



This report is authorized by law 29 U.S.C. 2. We request your cooperation to make the results of this survey comprehensive, accurate, and timely. The Bureau of Labor Statistics and the State agencies will use this information for statistical purposes only and will hold it in confidence to the full extent permitted by law. Please note this report is mandatory in California, under Section 320.5 of the Unemployment Insurance Code and Section 320.5.1 through 320.5-28, Title 22 of the California State Administrative Code; in North Carolina, under Section 96-4(g) (l) of the North Carolina Employment Security Law; in Oregon under the Oregon Revised Statute 657.660; in Washington, under the Revised Code of Washington sections 50.12.010, 50.12.070, and 50.12.180; and in South Carolina, under Section 41-29-120 of the Code of Laws of South Carolina (for firms employing more than twenty individuals). **Form Approved OMB No. 1220-0011.**

We estimate that it will take an average of 5 minutes to complete this form each month including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing this information. If you have any comments regarding these estimates or any other aspects of this survey, send them to the Bureau of Labor Statistics, Division of Current Employment Statistics (1220-0011), 2 Massachusetts Avenue, NE, Washington, DC 20212. Persons are not required to respond to the collection of information unless it displays a current valid OMB control number.

Purpose: These data are used to generate estimates of employment, hours, and earnings for the nation, States, and areas. For more information on these important economic indicators, visit www.bls.gov/ceshome.htm, contact BLS, or your State Employment Security Agency.

Primname
Secname
address
city, state zipcode

Definitions and Instructions for Completing this Form

Common Reporting Adjustments: Please pay special attention to items marked with an asterisk (*)

Reference Period: Complete this form for the pay period that includes the 12th day of the month. If you have a weekly pay period and the 12th falls on a Saturday, report for the week of the 6th-12th; if the 12th falls on a Sunday report for the week of the 12th-18th.

Column [1] All Employees: Enter the total number of persons who worked or received pay for any part of the pay period including the 12th of the month.

Include:

- Full- or part-time employees
- Teachers
- Administrators
- Custodial and Cafeteria Workers
- Counselors, librarians, coaches
- Other non-teaching personnel
- Students employed on your payroll
- Paid members of religious orders
- Persons on paid vacation *
- Persons on paid sick leave *
- Persons on other paid leave
- Trainees

Exclude:

- Volunteers
- Pensioners
- Members of unincorporated firms
- Contractors and their employees
- School trustees and school board members serving without pay
- Persons on strike the entire pay period
- Persons on leave without pay the entire pay period *
- Armed forces personnel on active duty the entire pay period

For Universities and Colleges

Exclude:

- Employees of hospitals serving the public
- Agricultural extension service units
- Agricultural experiment stations or farms

Column [2] Women Employees: Enter the number of employees from Column 1 who are women.

Column [3] Faculty Members: Enter the number of persons from Column 1 who are regular members of the faculty of this institution or school system. Regular members of the faculty are considered to be professional or "certified" employees who have a contractual arrangement (written or otherwise) for one or more years.

Include:

- Principals
- Teachers
- School superintendents
- Administrators
- Librarians
- Student counselors
- Other professional personnel

Exclude:

- Custodial personnel
- Cafeteria workers
- Secretaries and clerical workers
- Groundskeepers
- Maintenance workers
- Other non-faculty personnel
- Part-time/substitute teachers (unless they have at least a one-year contract)

Column [4] Comment Code: Please enter a comment code, found in Part D, to explain any large changes in your data. (Note: a change of 25% or more in any data element should be considered "large.")

Current Employment Statistics Report Form

U.S. Department of Labor

Report Number reptnum	Our information number: 1-dccphone Data Collection Center
Industry Code naics	pnumber

A. Please complete columns 1-4 for the single pay period which includes the 12th of the month.

Reference Period	[1] All Employees	[2] Women Employees	[3] Faculty Members	[4] Comment Code (see Part D)
12=DEC				
01=JAN				
02=FEB				
03=MAR				
04=APR				
05=MAY				
06=JUN				
07=JUL				
08=AUG				
09=SEP				
10=OCT				
11=NOV				
12=DEC				

D. Comment Codes: Select the **one** comment code that best explains large changes in your data. Please enter the number in Column 4. If more than one code is applicable, please select the code related to employment shifts. (Note: a change of 25% or more in any data element should be considered "large.")

Employment Shifts	Pay Shifts
01 Seasonal increase	20 Wage rate decrease
02 Seasonal decrease	21 Wage rate increase
03 More business (expansion)	22 Increase in percentage of lower-paid employees
04 Less business (contraction)	23 Increase in percentage of higher-paid employees
05 Short-term/specific business project starting	25 Higher hourly earnings for piecework or incentive pay
06 Short-term/specific business project completed	26 Less overtime
07 Layoff	27 More overtime
08 Strike	40 Shorter scheduled workweek
09 Temporary shutdown	41 Longer scheduled workweek
12 Internal reorganization resulting in an employment decrease	45 Majority of workers on paid vacation
13 Internal reorganization resulting in an employment increase	46 Majority of workers on unpaid vacation
19 Employment returns to normal	External Factors
83 Leasing arrangement	50 Adverse weather conditions
86 Permanent shutdown	55 Return to normal following adverse weather conditions

E. Contact person, in case of questions:

Your Name

Title:
title

Phone Number:
phone

FAX Number:
fax

E-mail Address: