

#### TEXAS WORKFORCE COMMISSION

## Alternative/Reemployment Trade Adjustment Assistance Application Instructions

You must meet specific requirements at the time of your reemployment to be eligible for Alternative/Reemployment Trade Adjustment Assistance (ATAA/RTAA).

## Submit the application only if all of the following are true:

#### For ATAA:

- 1. You are reemployed full time.
- 2. You are age 50 or older at the time of your reemployment.
- 3. You did not return to work for the trade-affected employer in the same position from which you separated.
- 4. You have not received Trade Readjustment Assistance (TRA) benefits.

#### For RTAA:

- 1. You are reemployed:
  - a. At least 30 hours per week for one or more employer; or
  - b. At least 20 hours per week for one or more employer and enrolled full-time in TAA-approved training.
- 2. You are age 50 or older.
- 3. You did not return to work for the trade-affected employer from which you separated.
- 4. You are not currently receiving Trade Readjustment Assistance (TRA) benefits.

Note: If you are working for multiple employers, you must submit a separate ATAA/RTAA application for each employer. If approved for ATAA/RTAA, you must report earnings from all of your employers when you submit your ATAA/RTAA subsidy claim forms.

### Return the completed application with copies of the following:

- A valid driver's license, birth certificate, passport, or other acceptable legal documentation verifying you were 50 years of age, or older, at the time of your reemployment.
- A check stub from your current employer or job offer letter showing your current wages.
- A check stub from your former, trade-affected employer (final full week worked, if possible).

Return the completed application and supporting documents to:

MAIL FAX
Texas Workforce Commission-TRA Department
P.O. Box 149137
Austin, TX 78714-9137

FAX
Claim Services at (512) 936-3250

You may receive, review, and correct information TWC collects about you by contacting TWC Open Records at 1-866-274-0940. Deaf or hearing-impaired customers, dial 711 for Relay Texas.



# TEXAS WORKFORCE COMMISSION Cngt pcvkxgReemployment Trade Adjustment Assistance Application

Section 1. Personal Information				
1. Social Security Number:			2. Da	ate of Birth (mm/dd/yy):
3. First Name:	4. Middle Initial:	5. Last Name:		
6. Mailing Address:				
7. City:			9. ZIP code:	
10. Telephone Number (include an	11. Do you receive SSI or SSDI?			
12. Are you a veteran?	13. Highest Grade Completed:			
14. Sex: Male	15. Do you speak and understand English?			
16. Are you a United States Citizen? Yes No (if no, answer a.)  a.) Alien Registration Number:				
Section 2. Former Trade-Affected Employer Information				
17. Employer Name:	18. Petition Number:			
19. Hourly rate or yearly salary, if salaried:				
20. How many hours did you work during a full-time week before your separation?				
21. Number of years employed by the trade-affected employer?				
Section 3- New Employer(s) Information				
22. Employer Name:				
23. Employer Address:				
24. City:		25. State:		26. ZIP code:
27. Telephone Number (include area code):				
28. Contact Person:	29. First Day Worked (MM/DD/YY):			
30. What is your hourly rate or year	arly salary, if salaried?			
31. Are you considered to be a ful	l-time employee, working 30	+ houru a week?		
Current Employment: Signature of the new employer is only required for those workers who have not provided a pay stub or appropriate documentation of employment as of the date of this application.				
Signature and Title of New Employer Date signed				gned
I hereby request consideration for certification of individual eligibility under the Cngt pcvkxgReemployment'Vtcf g Cf lwwo gpv'Assistance (CVCCIRTAA) Program. I understand that receipt of CVCCIRTAA payments can affect my grki klkk 'hqt'Vtcf g'Cf lwwo gpv'Assistance services, including Trade Readjustment Assistance benefits.				
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Signature of CVCC IRTAA applicant		Date signed		Date signed
Signature of TAA or UI representa			Date signed	