

Commission on Human Rights and Opportunities Contract Compliance Unit 21 Grand Street Hartford, CT 06106				1. MONTHLY EMPLOYMENT UTILIZATION REPORT <i>(FORM chro cc-257)</i>		PROJECT AREA (MSA): <hr/> 2. EMPLOYERS FEIN NO.		3. PROJECT AAP GOALS MINORITY: _____ FEMALE: _____		4. REPORTING PERIOD FROM: _____ TO: _____							
GENERAL CONTRACTOR: PROJECT NAME: CONTRACT NUMBER:				NAME AND LOCATION OF CONTRACTOR (submitting report):				STATE AWARDING AGENCY:									
5. CONSTRUCTION TRADE (please identify)	CLASSIFICATION	6. WORK HOURS OF TRADE WORKERS EMPLOYED ON PROJECT										9. TOTAL NUMBER OF EMPLOYEES	10. TOTAL NUMBER OF MINORITY EMPLOYEES				
		6a. TOTAL HOURS BY TRADE M F	6b. BLACK (Not of Hispanic Origin) M F	6c. HISPANIC M F	6d. ASIAN OR PACIFIC ISLANDERS M F	6e. AMERICAN INDIAN OR ALASKAN NATIVE M F	7. MINORITY PERCENT	8. FEMALE PERCENT	M F	M F							
	Journey Worker Apprentice Trainee SUB-TOTAL																
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TOTAL JOURNEY WORKERS TOTAL APPRENTICES TOTAL TRAINEES GRAND TOTAL																	
11. COMPANY OFFICIALS SIGNATURE , PRINTED NAME, AND PRINTED TITLE				12. TELEPHONE NUMBER (Including area code)				13. DATE SIGNED			PAGE _____ OF _____						
<div style="border: 1px solid black; width: 20px; height: 15px; display: inline-block; margin-right: 10px;"></div> Did not perform work on this project for this month (Please place an "X" in the box if your company did not perform work on this project for this month only.)																	

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GENERAL CONTRACTOR: PROJECT NAME: CONTRACT NUMBER:				NAME AND LOCATION OF CONTRACTOR (submitting report):				STATE AWARDING AGENCY:							
5. ON SITE PERSONNEL (OTHER THAN TRADE WORKERS) <i>(please identify specific job title)</i>	6. WORK HOURS OF WORKERS <i>(OTHER THAN TRADE WORKERS)</i> EMPLOYED ON PROJECT										9. TOTAL NUMBER OF EMPLOYEES M F		10. TOTAL NUMBER OF MINORITY EMPLOYEES M F		
	6a. TOTAL HOURS BY TRADE M F		6b. BLACK (Not of Hispanic Origin) M F		6c. HISPANIC M F		6d. ASIAN OR PACIFIC ISLANDERS M F		6e. AMERICAN INDIAN OR ALASKAN NATIVE M F						7. MINORITY PERCENT
GRAND TOTAL WORKERS															
11. COMPANY OFFICIALS SIGNATURE, PRINTED NAME, AND PRINTED TITLE				12. TELEPHONE NUMBER (Including area code)				13. DATE SIGNED				PAGE _____ OF _____			
<div style="display: flex; align-items: center;"> <input style="width: 30px; height: 15px; margin-right: 10px;" type="checkbox"/> <div> Did not perform work on this project for this month (Please place an "X" in the box if your company did not perform work on this project for this month only.) </div> </div>															