## SOUTH CAROLINA DEPARTMENT OF EMPLOYMENT AND WORKFORCE

## RECORD OF WORK SEEKING ACTIVITIES

NAME	SOCIAL SECURITY NUMBER	BENEFIT YEAR ENDS

Section 41-35-110 of the South Carolina Department of Employment and Workforce Law, and the South Carolina Department of Employment and Workforce Policy, require that you make an active search for full-time employment to be eligible for unemployment insurance benefits. The information that must be completed on the IB-303 Form, Record of Work Seeking Activities for each contact is:

- 1) The name of the employer;
- 2 The type of work sought;
- 3 The type of contact (telephone, resume, in-person, etc.); and
- 4 The results of the contact.

Approximately 2-6 weeks into your daim series, you will receive an Eigibility Review Questionnaire which must be completed and returned with this Record of Work Seeking Activities to the address printed on back of this form. Failure to provide this information could result in a denial of benefits. If you stop filing, return this form immediately.

	Type of W ork Sought	Type of Contact	Results
Employer Contacted	(Be Specific)	(Telephone,In-person,Resume,Family)	Interview, Application Taken)

Employer Contacted	Type of W ork Sought (Be Specific)	TYPE OF CONTACT (Telephone,In-Person,Resume,Family)	RESULTS Interview, Application Taken)

## RETURN THIS FORM TO:

S C. Department of Employment and Workforce

ATTN: Interstate Unit

P.O. Box 1477

Columbia, South Carolina 29202 Fax Number: (803) 737-0539

Signature Date