## U.S. DEPARTMENT OF LABOR Employment and Training Administration

Exp. Date 6/30/2008 OMB Approval #1205-0132

WORKSHEET UI-1	UI STAFF	UI STAFF HOURS				
State	Fiscal Year	Fiscal Year		Date		
Annual Hours	Per Staff Year	and Qu	arterly Di	stribution	1	
Hours Per Staff Year	Annual	First	Second	Third	Fourth	
a. Hours Worked						
b. Hours Paid						

ETA 8623A (July 2003)

## **INSTRUCTIONS FOR THE UI-1**

OMB Control No. 1205-0132. This form and reporting instructions have been approved under the Paperwork Reduction Act of 1995. Persons are not required to respond unless a valid OMB control number is displayed. Public Reporting Burden for the collection of this information is estimated to average 1 hour per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Submission is required to obtain or retain benefits under SSA 303(a)(6). Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of Workforce Security (1205-0132), Room S-4231, 200 Constitution Ave., NW, Washington, DC 20210.

Please type or print legibly. The following general instructions explain how to use the form itself.

## <u>Item</u> <u>Entry</u>

- Enter the annual staff year hours worked and distribution by quarter.
  The annual hours for this item must equal the annual hours worked from the planning targets.
- Enter the annual staff year hours paid and distribution by quarter.
  The annual hours for this item must equal the annual hours for the number of standard hours.

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