

Voluntary Leaving Questionnaire - Claimant

Claimant Information:

Last Name: _____ First Name: _____ MI: _____
 ID or SSN: _____

(Este es un documento importante. Si usted necesita un intérprete, póngase en contacto con su oficina local.)

Under Section 601 of the Illinois Unemployment Insurance Act, an individual who quits his/her job without good cause attributable to his/her employer is ineligible for unemployment benefits. Please provide information about your separation from employment. The information you provide will be used for the purpose of determining your eligibility for benefits.

Please complete, sign and return this questionnaire to your Illinois Department of Employment Security Local Office as instructed. Failure to respond will result in a determination based on the available information. *If you need additional space, please use the other side of this document, if appropriate, or attach a separate sheet of paper.*

You will receive a notice by mail with the date and time and interview will be held regarding your separation. At the time of the interview you may provide more detailed information.

Section A: Employment Information				
Employer Name: _____		Employer Telephone Number: () -		
Length of Employment From: / / To: / /		Work Hours From: To:		Wages (Hr/Day/Etc.) \$. Per
Type of Work (e.g. retail sales, cook, office manager, etc)		Job Duties		
Section B: Reason For Leaving				
What was the last day you worked? / /				
What was the circumstance, incident, or reason that caused you to leave your employment?				
Did you inform the employer that you were leaving? Yes No				
If Yes, what is the name and title of the person you informed? What was the date you informed that person? / /				
What reason did you give the employer for leaving?				
Did you have a choice to remain employed? Yes No				
Did you take any steps before leaving to explain or resolve the situation? Yes No				
If Yes, what steps did you take to explain or resolve the situation?				
If No, why didn't you attempt to explain or resolve the situation prior to leaving?				
Did you submit your resignation in writing? Yes No				
Did you give the employer a notice period? Yes No Did you complete the notice period? Yes No				
If No, please explain:				
Did the incident or problem violate or change the original hiring agreement? Yes No				
If Yes, please explain:				
Section C: Signature				
Signature: _____			Date: / /	
Name (Printed)		Day time Telephone Number: () -		