

TAA PROGRAM BENEFITS OVERVIEW - ACKNOWLEDGEMENT FORM

◆◆ PLEASE COMPLETE AND BRING WITH YOU AT YOUR FIRST APPOINTMENT ◆◆

I _____ acknowledge, that on _____
print your name date(s)

read the Participant's Guide to the TAA Program in Connecticut and viewed the recorded benefit rights overview webinar or the PowerPoint presentation on the Connecticut Department of Labor website: <http://www.ctdol.state.ct.us/TradeAct>.

I understand that if I have any questions regarding this material, it is my responsibility to ask my TAA representative immediately for clarification or assistance.

(client's signature after reviewing material)

(counselor's signature at first appointment)

Office Use Only: A copy of this signed acknowledgement must be given to the client at the first appointment and the original kept in the case file.

INSTRUCTIONS: After you have read the Participant's Guide and viewed the benefits overview presentation, please list any questions you may have when you meet with a CTDOL representative. Use additional sheets if necessary.

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