Temporary Layoff Rehire Form			
Employment Department email: EmploymentSlips@jibei.com Employment Department Fax # (718) 820-0677			
Contractor #:		Contractor Name:	
Week Beginning:		Contractor Fax No.:	
Contractor email:		Job Location:	
EACH JOB LOCATION MUST BE ON A SEPARATE SHEET			
Contact Person: Shop Telephone Number :			
Job Telephone Number:			
Start Time:			
NAME	SS#	CLASSIFICATION	CONTACT#