

State of Wisconsin

Office of State Employment Relations

RESTORATION FROM LAYOFF

Under several labor union agreements, an employee who has received an official notice of layoff or who is separated from the service due to layoff may file a request for mandatory restoration with any other department and shall be appointed if the contractual language is satisfied. The employee must meet the necessary qualifications for the position.

This form must be completed to receive consideration for restoration. The form must also include the signature of the agency Human Resources (HR) Director initiating the layoff. A copy of this completed and signed form must be filed with the HR Director of any other department to which consideration for mandatory restoration for current or future vacancies is being requested. Be sure to list only those geographic areas where an offer of employment will be accepted (see block 10 below and the map on the back of this form).

Complete this form and return it for signature to the HR Office in the agency from which notice of layoff was received or from which layoff occurred. The HR Office will assist in completion of this form, upon request. The **HR Office will not forward this form to other departments; that is the employee's responsibility.**

1. Civil Service Title:
2. 5-digit Class Code Number to which restoration is being requested:
3. Last Name, First Name, Middle Initial:
4. Employing Department (please include Division, Institution, & Assigned Headquarters mailing address):
5. Home Mailing Address:
6. Phone Number: (List a daytime telephone number).
7. Seniority Date (adjusted continuous service date): (Use numbers, e.g., 02-24-1971)
8. At the time of layoff, my position was <input type="checkbox"/> Full time, <input type="checkbox"/> Part-time. If Part-time, the Personnel Office will complete this line showing the percent (%) FTE: _____%. Effective Date of Layoff _____ Type of employment preferred FT PT Either (Check choice(s))
9. I wish to be considered for the following areas identified by the map on the back of this form (list the numbers off the map (located on the back side) to identify the specific areas where you are certain you will accept employment):
Employee's signature:
Signature of Personnel Director/Manager:

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