



Mashantucket Pequot  
Tribal Nation

## MASHANTUCKET EMPLOYMENT RIGHTS OFFICE

# Employment Data Report

For Reporting of Employment on the Mashantucket Pequot Tribal Reservation under Title 33,  
the Mashantucket Pequot Tribal and Native American Preference Law

For MERO Use Only

Please follow the instructions in Form 33-2400B. Additional pages may be added as needed.

### Section I – EMPLOYER & REPORTING YEAR INFORMATION

- A. Name of Establishment on the Reservation: \_\_\_\_\_
- B. Principal business activity of Establishment: \_\_\_\_\_
- C. This Employment Data Report (EDR) is submitted to comply with the October 15, 20\_\_\_\_ reporting requirement.
- D. If the Establishment did not meet Title 33’s definition of “Employer” during any 30-day period in the year preceding July 1 of the year for which the EDR is submitted (answer to I.C), check here  and skip to Section VI, page 2.
- E. The pay period end date for the Payroll Period for Data Collection (PPDC) is \_\_\_\_\_  
Note: The one (1) year period immediately prior to the PPDC is the Reporting Year (RY).
- F. If the Establishment is new, date on which employees were first employed on the Reservation: \_\_\_\_\_

### Section II – OVERVIEW

Enter the number for each of the following:	Total	Total Preference Eligible
A. Employees on the payroll as of the PPDC	A.1.	A.2.
B. Employees hired in the Reporting Year	B.1.	B.2.
C. Of those hired in the Reporting Year, those on the payroll as of the PPDC	C.1.	C.2.
D. Applicants for open positions in the Reporting Year	D.1.	D.2.
E. Number of positions for which preference eligible individuals applied in the RY		E.2.
F. Of those reported in II.D.2., those who are members of federally recognized tribes. (For employers other than the Tribe, F.2 should be the same number as D.2)		F.2.

### Section III - PREFERENCE TRACKING

A.	B.	C.	D.	E.	F.	G.	H.
Pref. Type	DOH	Job at Hire	DOT	Reason for Termination	Job at PPDC or DOT	Other Status Change	No. Others Employed

### Section IV – Closure Information

If the employer's business on the Reservation experienced any temporary closures during the Reporting Year, please indicate the approximate dates of the closure(s) and the reason for each closure.

### Section V – REMARKS

Explain any major changes in reported information from the prior submission and/or provide any additional pertinent information.

If any additional pages are attached to provide complete information, please check here:  Number of pages attached: \_\_\_\_

### Section VI - CERTIFICATION

This Employment Data Report may be signed manually or electronically. Signing electronically includes a manual signature submitted electronically. If this certification is signed electronically, check the following box to confirm your agreement to conduct business with the MERO electronically and your understanding that your electronic signature is the legally binding equivalent of your manual signature.  Your mark in the signature field below must be visible in both electronic and print formats.

**By my signature, I certify that the Employment Data Report was prepared in accordance with the instructions and the information provided on this Employment Data Report is true, accurate, and complete.**

Name of Certifying Official	Signature of Certifying Official
Title of Certifying Official	Date of Signature of Certifying Official
Name of Employer (if different from name of establishment on the Reservation)	
Certifying Official Mailing Address	Telephone No. (including Area Code and Extension)
	Email Address
Was this form completed by someone other than the certifying official? <input type="checkbox"/> Yes <input type="checkbox"/> No If "yes" is checked, please provide the below information about the individual who completed the form.	
Name and Position	For MERO Use Only
Telephone No. (including Area Code and Extension)	
Email Address	