

DEPARTMENT OF WORKFORCE SERVICES  
UNEMPLOYMENT INSURANCE  
REQUEST FOR EXTENSION OF DEPARTMENT  
APPROVED TRAINING



PO BOX 45266  
SALT LAKE CITY, UT 84145-0266  
Fax: 801-526-4402

Please read all questions and instructions below carefully. If you fail to follow all instructions, answer all questions, or fail to submit all the necessary documents, your request could be denied or delayed, causing a delay in the payment of your unemployment benefits.

Claimant's Name \_\_\_\_\_ Social Security No. \_\_\_\_\_

I request an extension of Department approved training for the next school term.

The next term Begin date: \_\_\_\_\_ End date: \_\_\_\_\_

School Name: \_\_\_\_\_

Listed below are the documents you must submit with this request.

- Copy of registration showing all the classes you will be taking for the next school term.

**Additionally you will need 1 of the following.**

- An official Grade Report from the school for the previously completed school term.
- A certification of progress for the classes for the current school term. (See Certification of progress below).

**CERTIFICATION OF PROGRESS**

You must submit evidence of your satisfactory performance in training to continue your Department approval while receiving unemployment benefits. You must present an official report of your grades or have this Certification of Progress completed by your instructors.

**CERTIFICATION BY INSTRUCTOR:** I certify this individual is satisfactorily attending training in my class and is receiving a passing grade.

|    | Attendance/<br>Passing Grade<br>(C or Better) |    | Class | Instructor | Signature | Telephone<br># | Date  |
|----|---|----|-------|------------|-----------|----------------|-------|
|    | Yes   | No |       |            |           |                |       |
| 1. | Yes   | No | _____ | _____      | _____     | _____          | _____ |
| 2. | Yes   | No | _____ | _____      | _____     | _____          | _____ |
| 3. | Yes   | No | _____ | _____      | _____     | _____          | _____ |
| 4. | Yes   | No | _____ | _____      | _____     | _____          | _____ |
| 5. | Yes   | No | _____ | _____      | _____     | _____          | _____ |

**CERTIFICATION:** I know that the law provides penalties for falsifying statements in order to obtain unemployment benefits. I certify that the above statements, the Certification of Progress, and other information I have submitted are true and correct to the best of my knowledge and belief.

Signature \_\_\_\_\_ Date \_\_\_\_\_