



**PREFERRED WORKER
REGISTRATION**
RETURN TO WORK DIVISION
SFN 53235 (10/2017)

1600 E Century Ave, Ste 1
PO Box 5585
Bismarck ND 58506-5585
Telephone 800-777-5033
Toll Free Fax 888-786-8695
TTY (hearing impaired) 800-366-6888
Fraud and Safety Hotline 800-243-3331
www.workforcesafety.com

SECTION 1 – Injured worker’s information		
Claim number	Injured worker’s (First name)	(Last name)
Address		
City	State	ZIP code
Telephone number	Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
SECTION 2 – Preferred worker recommendations and expectations		
<p>To be successful in your work search and employment, the following is recommended:</p> <ul style="list-style-type: none"> • Have an up-to-date resume • Set daily and weekly goals based on good faith work search • Register at nearest Job Service and maintain weekly contact • Attend job fairs • Attend a Job Seeking Skills Workshop (visit www.workforcesafety.com/calendar) • Be available for full-time work search, 6-8 hours per day, 5 days per week or according to level of release • Understand your physical capabilities when applying for positions • Make sure you are qualified for the jobs for which you apply • Immediate follow-up on job leads • Keep legible daily logs of activities (documentation should include employer contacts, names, dates, and results) • Submit an Employment Contact Log on a weekly basis (visit www.workforcesafety.com/workers/forms) • Review the preferred worker benefits and be prepared to explain the value of the program to a potential employer • Be prepared, proactive, persistent, and organized 		
<p>Once employed, the preferred worker is expected to:</p> <ul style="list-style-type: none"> • abide by the terms of the employer’s business practices, policies, and agreements • perform work within restrictions as outlined by the medical provider • notify Workforce Safety and Insurance (WSI) if the employment ends prior to the exemption period end date • notify WSI if an injury is sustained within the exemption period 		
<p>If approved, WSI will issue a Preferred Worker Program Work Search Allowance of \$250 to be used for appropriate interview clothing, uniforms, travel expenses, or other items deemed necessary for work search.</p>		
SECTION 3 – Injured worker’s signature		
Injured worker’s signature		Date
SECTION 4 – Program approval (WSI use only)		
Preferred worker number	Status <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Pending	
Authorized representative	Date	