

**New Jersey Commerce and Economic Growth Commission
Urban Enterprise Zone Program**

For Administrative Use Only

Part-Time Employee Data Sheet

Important: Only complete this form if you began the UEZ Program with ten or less FULL-TIME employees.

File Number	<input type="text"/>
Program Year	<input type="text"/>

Legal Company Name _____

N.J. Taxpayer ID# --/

List All Currently-Employed **PART-TIME** Employees (*Part-time employees must work a minimum of 15 hours per week; a minimum of 16 weeks per year; and earn at least \$1,000 per quarter.*)

	Name (Last, First Initial)	Street Address	City	St.
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				

I certify that the part-time employees listed above are currently employed by the business which is making application for certification; work a minimum of 15 hours per week and were hired to work a minimum of 16 weeks per year. The employees listed earn at least \$1,000 per quarter.

GRAND TOTAL
Part-Time Employees

Name of Business Contact (Print or Type)