

REEMPLOYMENT ASSISTANCE APPEALS COMMISSION REQUEST FOR REVIEW

NOTICE: Appeals cannot be filed at a local “one-stop” office. The Reemployment Assistance Appeals Commission will not hold a hearing. **This form is not intended for use in filing an appeal with a District Court of Appeal.**

PLEASE PROVIDE THE FOLLOWING INFORMATION:

Claimant Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Social Security Number Last Four Digits*: _____

Employer Name (if applicable): _____

Account Number (if known): _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____ Telephone: _____

REPRESENTATIVE – If you are filing on behalf of a party, provide the following:

Name of Representative: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____ Telephone: _____

I AM APPEALING REFEREE DECISION NO. _____, DATED _____

I appeal because:

Important: If you did not attend the referee’s hearing, you **must** explain your nonappearance.

() I did not attend the hearing because:

Important: Late appeals are subject to dismissal. If your appeal is not being filed within 20 calendar days of the mailing date of the referee’s decision, you **must** explain why your appeal is late. Parties are urged to contact the REEMPLOYMENT ASSISTANCE APPEALS COMMISSION (850-487-2685) to verify that the faxed appeal was received.

() My appeal is late because:

Signature: _____ Print Name: _____ Date: _____

I am: () the claimant; () the claimant’s representative; () the employer; () the employer’s representative

MAIL OR FAX THIS FORM TO:

**Reemployment Assistance Appeals Commission
1211 Governors Square Boulevard
Suite 300
Tallahassee, Florida 32301
Fax: (850) 488-2123**

***PRIVACY ACT STATEMENT**

Information provided to the Reemployment Assistance Appeals Commission is voluntary and confidential but is required to process claims. Pursuant to the Internal Revenue Code of 1986, the Social Security Act, 42 U.S.C. 1320b-7(a)1, and s. 443.091(1)(h), F.S., disclosure of Social Security numbers is mandatory when requested by the Commission. Social Security numbers will be used to ensure unemployment benefits have been properly paid, to report benefits received to the Internal Revenue Service as potential taxable income, and for statistical and research purposes. In accordance with the Federal Deficit Reduction Act, an amendment to the Federal Social Security Act, and 5 U.S.C. 552a(o)(1)(D), information provided is subject to verification through computer matching programs and information about wages and claims may be provided to other federal, state and local agencies or their contractors for verification of eligibility under other government programs to ensure benefits have been properly paid and for statistical and research purposes.

An equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities.

Form: Reemployment Assistance Appeals Commission Request For Review

Rule 73B-21.002

Form # DEO– A100 RAAC(E) (4/12)