



STATE OF NEW MEXICO  
NEW MEXICO DEPARTMENT OF  
WORKFORCE SOLUTIONS  
PO BOX 1928  
Albuquerque, NM 87103  
[www.dws.state.nm.us](http://www.dws.state.nm.us)

## Report Refusal of Suitable Work

**INSTRUCTIONS:** Complete this form if you have offered work to an individual who is receiving unemployment benefits, and that person turned down the offer of work. **COMPLETED FORM MUST BE EMAILED TO:** [uitax.support@state.nm.us](mailto:uitax.support@state.nm.us) using “**Report Refusal of Work**” in the email subject line.

1. Your business name \_\_\_\_\_
2. Your Unemployment Employer Account Number \_\_\_\_\_
3. Name of the individual \_\_\_\_\_
4. Last four digits of the individual's Social Security Number \_\_\_\_\_
5. Name and title of the person who made the offer of work to the individual \_\_\_\_\_
6. On what date was the offer to work made? \_\_\_\_\_
7. How was the individual contacted to make the offer? (Check all that apply)  
☐ Email ☐ Phone ☐ In person ☐ Mail ☐ Other. Please explain \_\_\_\_\_
8. What type of work was offered? \_\_\_\_\_
9. Indicate city/town/state and division/unit of the work offered: \_\_\_\_\_
10. Was the work offered ☐ Full-Time or ☐ Part-Time
11. Indicate the number of hours per week and shift of the work offered: \_\_\_\_\_
12. Indicate the rate of pay for the offered work: \_\_\_\_\_
13. Indicate the date work was to start: \_\_\_\_\_
14. Indicate the reason(s) given by the individual for refusing the offer of work: \_\_\_\_\_
15. Had the individual done this type of work before? ☐ Yes ☐ No If yes, please answer the following:
  - What was the previous job, rate of pay, and the last day of that work? \_\_\_\_\_
  - Where was the previous work performed? \_\_\_\_\_

“AN EQUAL OPPORTUNITY EMPLOYER”