

## HENNEPIN COUNTY PURCHASING & CONTRACT SERVICES (PCS) MONTHLY EMPLOYMENT UTILIZATION REPORT

(A) Company Name \_\_\_\_\_  
 Status:  Contractor  Subcontractor (Select  one)

(C) County Contract No.: \_\_\_\_\_ (E) Project No.: \_\_\_\_\_

(B) Address \_\_\_\_\_  
 Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

(D) Your Prime Contractor's Name: \_\_\_\_\_  
 Status:  Contractor  Subcontractor (Select  one)

[F] REPORT PERIOD	[H] TOTAL <u>HOURS</u> WORKED ON THE PROJECT												[I] TOTAL NUMBER OF EMPLOYEES WORKING ON THIS PROJECT			
	<input type="checkbox"/> Check here if there were no hours worked during this report period. HOURS REMAINING ON THIS PROJECT: _____												[I1] TOTAL EMPLOYEES ON THIS PROJECT		[I2] TOTAL MINORITIES ON THIS PROJECT	
FROM: _____ TO: _____	[H1] TOTAL EMPLOYEE HOURS		[H2] BLACK, NOT OF HISPANIC ORIGIN		[H3] HISPANIC		[H4] ASIAN/PACIFIC ISLANDER		[H5] AMERICAN INDIAN OR ALASKAN NATIVE		[H6] PERCENT OF TOTAL HOURS		(a) M	(b) F	(a) M	(b) F
(G) CLASSIFICATION BY TRADE	M	F	M	F	M	F	M	F	M	F	(a) MIN	(b) F	(a) M	(b) F	(a) M	(b) F
TRADE																
TRADE																
TRADE																
TRADE																
TRADE																
[J] TOTAL SKILLED																
[K] TOTAL UNSKILLED																
[L] GRAND TOTALS																

**NO HIRING OPPORTUNITIES AT THIS TIME** (Please check if true statement)  
 (PLEASE CHECK THIS BOX IF THIS IS A LEGAL STATEMENT DURING THIS REPORTING PERIOD)

The information on this form is true and accurate to the best of my knowledge.

\_\_\_\_\_  
 [M] Print or type name of company's authorized EEO representative

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

CC Specialist: \_\_\_\_\_

Received On: \_\_\_\_\_

Reviewed On: \_\_\_\_\_

## HENNEPIN COUNTY CONSTRUCTION

### Instructions for Filing Monthly Employment Utilization Report

The Monthly Employment Utilization Report includes the total work hours for each employee classification in each trade on the construction site(s). The report is to be completed by each contractor (both the prime and its subcontractors); and signed by a responsible official of the company. **The prime contractor must submit all of the reports to Hennepin County Purchasing/Contract Services, Targeted Contract Services Program, A-1730 Government Center, 300 South Sixth Street, Minneapolis, MN 55487-0175 by no later than the 10<sup>th</sup> calendar day of each month.**

If you have any questions or need assistance, please call Angie Kirkpatrick at (612) 348-2528

- DEFINITIONS:**
- |     |          |                                                                                                                       |
|-----|----------|-----------------------------------------------------------------------------------------------------------------------|
| (1) | WOMEN    | Includes both minority and non-minority females.                                                                      |
| (2) | MINORITY | Includes Blacks, Hispanics, American Indians/Alaskan Natives and Asian/Pacific Islanders, and both males and females. |

<b>A. Company Name &amp; Status</b>	Enter the name of your company in this section. Place a <input type="checkbox"/> mark in the appropriate box to indicate the contracting status of your company.
<b>B. Address</b>	Enter your company address and include the telephone and fax number.
<b>C. County Contract Number</b>	Enter the County contract number as stated in your County contract documents. [If you are a subcontractor on a County contract, contact your prime contractor to obtain this information.]
<b>D. Prime Contractor Name &amp; Status</b>	Enter the name of your prime contractor. Place a <input type="checkbox"/> mark in the appropriate box to indicate the contracting status of your prime contractor (if applicable).
<b>E. County Project Number</b>	Enter the County project number as stated in your County contract documents. [If you are a subcontractor on a County contract, contact your prime contractor to obtain this information.]
<b>F. Report Period</b>	Enter the dates covered by the report (e.g., the <b>month</b> of 2/1/99 – 2/28/99)
<b>G. Classification By Trade</b>	Enter only the skilled and unskilled construction trade worker classifications that you employ on the project. [Clerical and other offsite personnel are not considered construction workers and must not be included in the monthly utilization report.]
<b>H. (1-5) Total hours worked on the project site(s).</b>	In Column (H1), enter the total number of <u>hours</u> worked by all employees in each trade classification, including minority and non-minority employees. Indicate males and female hours separately.
<b>H. (6) Minority &amp; Female Percentages</b>	In Column (H2-H5), enter the total hours worked by minorities in each trade classification. Indicate males and female hours separately.  In Column (H6) (a) "MIN", enter the percentage of the total hours worked by minorities (both male & female) in each trade classification. In Column (H6) (b) "F", enter the percentage of total hours worked by women (both minority & non-minority) in each trade classification.
<b>I. (1) Total Number of Employees Working on This Project</b>	In Column (I1) (a) and (b), enter the total number of employees <b>working on this project</b> in each trade classification in your workforce during the reporting period. Include minority and non-minority male and female employees.
<b>I. (2) Total Number of Minorities</b>	In Column (I2) (a) and (b), enter the total number of minority <b>employees working on this project</b> in each trade classification in your workforce during the reporting period. Indicate males and females separately.
<b>J. Total Skilled</b>	On this line, under each column enter the total number of Skilled hours, percentages and total number of employees <b>working on this project</b> in each trade classification in your workforce during reporting period.
<b>K. Total Unskilled</b>	On this line, under each column enter the total number of Unskilled hours, percentages and total number of employees <b>working on this project</b> in each trade classification in your workforce during reporting period.
<b>L. Grand Totals</b>	On this line, under each column enter the total number of Skilled and Unskilled hours, percentages and total number of employees <b>working on this project</b> in each trade classification in your workforce during reporting period.
<b>M. Official Signature</b>	The company official or authorized representative must print, sign, and date this report.

**THIS REPORT MUST BE SIGNED BY A COMPANY OFFICIAL OR DESIGNEE.**