

IDES Earned Credit Program Eligibility Request



Illinois State Toll Highway Authority Earned Credit Program

By completing and submitting this form, permission has been given to provide the social security number below to Illinois Department of Employment Security (IDES) for Earned Credit Program qualification evaluation.

| Company/Referral Agency Information | |
|--|--|
| Company/Referral Agency Name | |
| Contact Name | |
| Company Phone | |
| Email Address | |
| Candidate Information | |
| First Name, Middle Initial, Last Name | |
| Social Security # | |
| Contact Phone # | |
| Email Address | |
| Program Graduation Date or Hire Date (as applicable) | |

Send this COMPLETED form to:

Maria Talis; Maria.Talis@illinois.gov and Telly Chueng; Telly.Cheung@illinois.gov

- If you have questions, they can be reached at 312-243-6795

**Eligibility confirmation will be sent to Company/Referral Agency and then must be forwarded to Illinois State Toll Highway Authority with resume and a completed Candidate Demographic Form.*

PLEASE NOTE: Do not forward this form to Illinois State Toll Highway Authority