



**GOVERNMENT OF THE DISTRICT OF COLUMBIA  
REVISED EMPLOYMENT PLAN**



**I. REVISED FIRST SOURCE EMPLOYMENT PLAN**

**GOVERNMENT-ASSISTED PROJECT/CONTRACT INFORMATION**

DISTRICT CONTRACTING AGENCY: \_\_\_\_\_  
 CONTRACTING OFFICER: \_\_\_\_\_  
 TELEPHONE NUMBER: \_\_\_\_\_  
 TOTAL CONTRACT AMOUNT: \_\_\_\_\_  
 EMPLOYER CONTRACT AMOUNT: \_\_\_\_\_  
 PROJECT NAME: \_\_\_\_\_  
 PROJECT ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 PROJECT DESCRIPTION OF WORK: \_\_\_\_\_  
 \_\_\_\_\_  
 PROJECT START DATE: \_\_\_\_\_ PROJECT END DATE: \_\_\_\_\_  
 EMPLOYER START DATE: \_\_\_\_\_ EMPLOYER END DATE: \_\_\_\_\_

**EMPLOYER INFORMATION**

EMPLOYER NAME: \_\_\_\_\_  
 COMPANY NAME: \_\_\_\_\_  
 EMPLOYER ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
 TELEPHONE NUMBER: \_\_\_\_\_ FEDERAL IDENTIFICATION NO.: \_\_\_\_\_  
 CONTACT PERSON: \_\_\_\_\_  
 TITLE: \_\_\_\_\_  
 E-MAIL: \_\_\_\_\_ TELEPHONE NUMBER: \_\_\_\_\_  
 EMPLOYER DESCRIPTION OF WORK: \_\_\_\_\_

GENERAL CONTRACTOR WILL MEET THE HIRING OR HOURS WORKED PERCENTAGES REQUIREMENTS FOR ENTIRE PROJECT  OR PER EACH SUBCONTRACTOR

**A. EMPLOYMENT HIRING PROJECTIONS**

**ALL EMPLOYERS:**

Please indicate ALL new position(s) you will create as a result of the project. If you WILL NOT be creating any new employment opportunities, please complete the attached justification sheet with an explanation. Attach additional sheets as needed.

JOB TITLE	# OF JOBS		SALARY RANGE	UNION MEMBERSHIP REQUIRED NAME LOCAL#	PROJECTED HIRE DATE
	F/T	P/T			
A					
B					
C					
D					
E					
F					
G					
H					



GOVERNMENT OF THE DISTRICT OF COLUMBIA  
REVISED EMPLOYMENT PLAN



**B. JUSTIFICATION SHEET:** Please provide a detailed explanation of why the Employer will not have any new hires on the project.

This page to be completed by Employer	_____ Employer Initials
---------------------------------------	----------------------------

**C. EMPLOYMENT PROJECTIONS**





GOVERNMENT OF THE DISTRICT OF COLUMBIA  
REVISED EMPLOYMENT PLAN



**C. EMPLOYMENT PROJECTIONS (Continued)**

- IV. This strategy should include a remediation strategy to ameliorate any problems associated with meeting these 51% Hiring of District Resident requirements, including any problems encountered with contractors and subcontractors.
  
- V. The designation of a senior official from the Employer who will be responsible for implementing the hiring and reporting requirements.
  
- VI. Provide descriptions of the health and retirement benefits that will be provided to District residents working on the project or contract.
  
- VII. Provide a strategy to ensure that District residents who work on the project or contract receive ongoing employment and training opportunities after they complete work on the job for which they were initially hired and a review of past practices in continuing to employ District residents from one project or contract to the next.

This page to be completed by Employer	_____ Employer Initials
---------------------------------------	----------------------------



GOVERNMENT OF THE DISTRICT OF COLUMBIA  
REVISED EMPLOYMENT PLAN



**D. EMPLOYMENT PROJECTIONS (continued)**

**VIII.** Provide a strategy to hire graduates of District of Columbia Public Schools, District of Columbia Public Charter Schools, community-based job training providers, and hard-to-employ residents.

**IX.** Please disclose past compliance with the First Source Employment Agreement Act of 1984 or the Workforce Intermediary Establishment and Reform of First Source Amendment Act of 2011 and the Davis-Bacon Act, where applicable, and the bidder or offeror's general District-resident hiring practices on projects or contracts completed within the last two (2) years.

**X.** Please note that EMPLOYERS with construction projects must make payroll records available upon request at job sites to the contracting District of Columbia agency.

This page to be completed by Employer

\_\_\_\_\_  
Employer Initials



**GOVERNMENT OF THE DISTRICT OF COLUMBIA  
REVISED EMPLOYMENT PLAN**



**CURRENT EMPLOYEES:** Please list the names, residency status and ward information of all current employees, including apprentices, trainees, and transfers from other projects, who will be employed on the Project. Attach additional sheets as needed.

NAME OF EMPLOYEE	CURRENT DISTRICT RESIDENT √Please Check		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		

This page to be completed by Employer	<hr style="width: 80%; margin: 0 auto;"/> Employer Initials
---------------------------------------	---