
FORM AMJP-1A.2.4
AMJP RECIPIENT REPORT TO USDOT OF EMPLOYMENT ACTION NOT
AFFECTING THE ELIGIBLE EMPLOYEE GROUP

PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB Control Number. The OMB Control Number for this information collection is 2106-0048. Public reporting for this collection of information is estimated to be approximately 120 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing and reviewing the collection of information. All responses to this collection of information are required to obtain or retain a benefit (pursuant to the American Rescue Plan Act of 2021 (ARPA), Public Law (P.L.) 117-2, § 7201-7202). Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Department of Transportation, OST-S-83, 1200 New Jersey Avenue S.E., Washington, DC 20590.

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NOT AFFECTING THE ELIGIBLE EMPLOYEE GROUP

AMJP Recipient Business Name

AMJP Agreement Number

6 9 A 3 4 5

A M J 0

Date of Employment Action

Nature of Employment Action
(select all that apply)

- ☐ Layoffs
☐ Furloughs

Total Number of Affected Employees

Narrative Description of Employment Action:

Provide a description of the employment action. Do not include any personally identifiable information about employees; redact that information as necessary.

***Example:** On December 1, 2021, ABC Aerospace announced a mandatory furlough affecting all hourly and salaried employees other than those included in the AMJP Eligible Employee Group. Affected employees will be required to take 4 furlough days (unpaid) between January 1, 2022 and June 30, 2022. Management is required to take 12 furlough days during the same period. Medical insurance coverage is not impacted by these furlough days.*

Narrative Justification for the Employment Action:

Provide a narrative justification of the employment action. Do not include any personally identifiable information about employees; redact that information as necessary.

***Example:** This action is made necessary by the continued slow recovery of top-line revenues and new orders for parts and services. Management has limited the action to a six-month period based on optimistic forecasts for recovery during the second and third quarters of calendar year 2022.*

Attachments:

Provide a list identifying all attachments. Attach documentation as needed to support the narrative description or justification above. Do not include any personally identifiable information about employees; redact that information as necessary.

Certification:

I certify that the employment action described above did not include or result in the Recipient Involuntarily laying off, furloughing, or reducing the pay rate of any Employee in the Eligible Employee Group.

I certify under penalty of perjury that the information above and attached is true and correct, and I have authority to submit this information to the USDOT on behalf of the Recipient.

I acknowledge that false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal penalties, civil penalties, or both. (See 18 U.S.C. 287; 18 U.S.C. 1001; 31 U.S.C. 3729; 31 U.S.C. 3802).

Signature

Date

Name of Signing Official

Title of Signing Official