

Contract Labor Retiree Registration Form



Name _____ Date of Retirement * _____

Primary Home Address _____

City _____ State _____ Zip _____

Phone _____ Cell Phone _____ E-mail _____

Last Position Held _____ How long at this position _____

Department _____ Supervisor's Name _____

Work Location _____ Annual Salary _____

Brief Job Description/Skills/Computer Skills _____

Contract Salary Requirements \$ _____ per Hour

Preferred Work Area

Berlin Central District Eastern District Southern District Western District WMECO PSNH Storm Duty

* NOTE: You are not eligible to start an assignment until after 100 days from your retirement date

Normal Availability	No. of hours available per week <input type="checkbox"/> 40 Hours <input type="checkbox"/> _____ <input type="checkbox"/> Full Days <input type="checkbox"/> Half Days	No. of hours of the day you are available _____
	Months of the year that you are available <input type="checkbox"/> All <input type="checkbox"/> Jan <input type="checkbox"/> Feb <input type="checkbox"/> Mar <input type="checkbox"/> Apr <input type="checkbox"/> May <input type="checkbox"/> Jun <input type="checkbox"/> Jul <input type="checkbox"/> Aug <input type="checkbox"/> Sep <input type="checkbox"/> Oct <input type="checkbox"/> Nov <input type="checkbox"/> Dec	

Storm Duty Availability	No. of hours available per week <input type="checkbox"/> 40 Hours <input type="checkbox"/> Weekends <input type="checkbox"/> Full Days <input type="checkbox"/> Half Days	Max. No. of hours per day _____ Shifts available (e.g. 1st, 3rd) _____
	Months of the year that you are available <input type="checkbox"/> All <input type="checkbox"/> Jan <input type="checkbox"/> Feb <input type="checkbox"/> Mar <input type="checkbox"/> Apr <input type="checkbox"/> May <input type="checkbox"/> Jun <input type="checkbox"/> Jul <input type="checkbox"/> Aug <input type="checkbox"/> Sep <input type="checkbox"/> Oct <input type="checkbox"/> Nov <input type="checkbox"/> Dec	

RESTRICTIONS: Are there any types of jobs that you do not wish to perform? Yes No If yes, explain below:

I understand that I am not an employee of Northeast Utilities System and therefore I am not entitled to any compensation or employee benefits through any Northeast Utilities System Company. If I choose to accept a contract temporary assignment, I understand that it is at will employment and that it may be terminated by either party at any time. I authorize Guidant Group to release my contact information to NU Managers when requested.

Signature _____ Date _____

Return to: Guidant Group
 107 Selden Street
 Berlin, CT 06037
 Email: guidant@nu.com
 Fax: 860-665-3800
 Phone: 860-665-3366