LAST JOB SHEET

1a. Why did you stop working?

Ill, disabled 1

Retired *(Go to CONTACTS SECTION)* 2

Fired *(Go to CONTACTS SECTION)* 3

Laid off *(Go to CONTACTS SECTION)* 4

Temporary employment *(Go to CONTACTS SECTION)* 5

On leave of absence *(Go to CONTACTS SECTION)* 6

Other *(Specify)* _____
(Go to CONTACTS SECTION) 7

b. What is the nature of your disability?

_____

_____

Go to CONTACTS SECTION

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