EMPLOYER OPT-OUT FORM

[,		ur	nderstand it is my responsibility to ensure my new PCA is oriented to his/her
	Ei Positio	nployer Name	
choos and R	se to pr Respon estand	ovide the PCA Orienta sibilities" portion of the	choice to ask my new PCA to attend a group orientation session, or I can ation material to my new PCA myself. I understand that the "Workers' Rights to program must be presented by a union representative at a group session. I ion of the approved curriculum will be my responsibility to provide to my
			e information provided to me. I choose to provide the Orientation to elf. (If you choose to ask your PCA to attend a group session, please do not
			PLEASE CHECK ONE
		I will access the curriculum from the website at http://portal.ct.gov/pcaworkforcecouncil/	
		Please email the cu	rriculum to
		Please fax the curri	culum to
		Please mail me a co	ppy of the curriculum materials
	Employer signature		Federal Employer ID Number Date (FEIN)
Т	THIS I	BOTH EMPLOY	TURNED TO YOUR FISCAL INTERMEDIARY BY JULY 13, 2016 'ER AND EMPLOYEE SIGNATURES ARE REQUIRED LOYER'S RESPONSIBILITY TO RETURN THIS FORM
			FOR PCA SIGNATURE
[,	PC	, under	rstand my employer has chosen to provide orientation to me him/herself.
furthe	erstander unde	l PCAs first hired on or erstand that the "Worke	r after January 1, 2015 must complete the PCA Orientation requirement. I ers' Right and Responsibilities" portion of the curriculum must be provided I must attend just this portion of the group sessions.
	PCA	Signature	

Please return entire page by fax, email, or mail to your fiscal intermediary.