



Petition for Trade Adjustment Assistance (TAA)

82268

Section 1. Petitioner Information

Provide petitioner information below. Three workers from the same job location completing this Petition Form must fill in all three columns. Other petitioners need only fill in the Petitioner 1 column. A union official completing this petition form should provide the name of the Union.

	Petitioner 1	Petitioner 2	Petitioner 3
a) Name	Chris Zylka		
b) Title	Director of Manufacturing		
c) Street Address	314 Main Street		
City	Red Wing		
State, Zip	Minnesota, 55086		
d) Phone – Main	651-388-8211		
e) Phone – Alternate	651-385-6732		
f) E-mail	chris.zylka@redwingshoes.com		
g) Worker Separation Date	12/31/12		
h) Petitioner Type:	Three Workers <input type="checkbox"/>	Company Official X	Union Official <input type="checkbox"/> (Union Name _____)
(please check one)	State Workforce Office <input type="checkbox"/>	One-Stop Operator/Partner <input type="checkbox"/>	Other Authorized Representative <input type="checkbox"/>
i) Describe the worker group on whose behalf this petition is being filed:	Manufacturing employees		

Section 2. Workers' Firm

Provide information on the firm employing the worker group. Complete items (a) – (g) regarding the employing firm. If the workers are doing work at a location that is different than the worker's employer (e.g., the petitioning workers are employed by a staffing agency but work at a manufacturing firm), also complete items (h) – (m) regarding the firm at which the workers perform their jobs.

NOTE: Workers completing this Petition Form must provide information for the location where they work. All other petitioner types may apply on behalf of more than one location. State offices and One-Stop Operators/Partners may file for workers at multiple locations of a firm within their State. If you choose to file on behalf of workers at more than one location, please attach additional sheets as necessary.

Employer (Firm)

a) Name of Firm	Red Wing Shoe Company, Inc.
b) Street Address	1020 Hustonville Road
City	Danville
State, Zip	Kentucky, 40422
c) Phone	859-236-3150
d) Website (if known)	www.redwingshoes.com
e) Describe the article produced or service supplied by this firm	footwear
f) How many workers have been or may be separated (if known)?	68
g) Is the firm or any part of the firm closing (if known)? If yes, when?	Yes, December 31, 2012

If the workers work at a location that is different from that listed in item a) and b), then fill out items h) through m) for that location:

h) Name of Firm	
i) Street Address	
City	
State, Zip	
j) Phone	
k) Describe the article produced or service supplied by this firm	
l) How many workers have been or may be separated (if known)?	
m) Is the firm or any part of the firm closing (if known)? If yes, when?	

