State of Rho				☐ PLEASE CHECK IF CORRECTION (	OF PRIOR REPORT	
	WAGE STATE	•		1 /		
•	abor and Training,		•			
PO Box 20190, Cr	anston, RI 02920-09	42 Phone (401) 4	162-8100 TDD (40	11) 462-8006 Insurer File No.		
				ilisulei File No.		
EMPLOYEE INFORMATION:				CLAIM INFORMATION:		
SSN				Employer		
Name				Insurance Co.		
Hired for hours each week ( Approximate)				Claim Administrator		
Are these supplem	nental wages?	☐ Yes	☐ No	Injury date		
If yes, supplemental employer name:				Incapacity date		
Maximum no. of ex	xemptions	Single	Married	Hire date		
		<u>EMPLC</u>	OYED LES	S THAN 2 WEEKS:		
If Yes:				OR:		
List agreed upon hourly wage				4		
2. Number of hrs. per week for full-time employees				Give average weekly for same or similar employment:		
3. Multiply #1 by #	<sup>‡</sup> 2 for average weekly		\$0.00			
				E THAN 2 WEEKS:		
				out of work. <b>DO NOT</b> include their week of hire or		
week was worked. <b>DO NOT SKIP WEEKS.</b> Please calculate any overti				BONUS AND OVERTIME CALCULATION:		
		No. of standard	Gross Wages		Block 1	
Week Number	Week Ending Date	hrs. worked	(No Overtime)	Number of weeks employed (up to 52)		
1				Total BONUS amount paid in past 52 weeks	Block 2	
2				Divide Block 2 by Block 1 for average bonus	Block 3	
3						
4				Total OVERTIME amount paid in past 52 weeks	Block 4	
5				Divide Block 4 by Block 1 for average overtime	Block 5	
6						
7				CALCULATION OF AVERAGE WEEKLY WAGE (AWW):		
8				Total earnings from 13 weeks	\$0.00	
9				2. Total number usable weeks	0	
10				3. Divide total earnings by number of usable wee	:ks	
11				4. Average bonus (Block 3 in BONUS AND OT)		
12				5. Add 3 and 4 for AWW excluding Overtime	\$0.00	
13				6. Average overtime (Block 5 in BONUS AND O	<u> </u>	
Total number	•	Total earnings:	<b>#0.00</b>	1		
usable weeks:		rotar darrings.	\$0.00	7. Add 5 and 6 for Total Average Weekly Wage	\$0.00	
Print Preparer I	Name <sup>.</sup>		Date:	Print Adjuster Name:	 Date:	
i illik i repaiel i	valle.		Date.	i inichajustei maine.	Date.	

DWC-03F (01/03) For instructions visit our web site: www.dlt.ri.gov/wc

Wage Statement: Full-Time (DWC-03F) or Part-Time (DWC-03P)

## **Determine which Wage Statement to use:**

- Full-time: use for employees hired for **20 hours or more** per week
- Part-time: use for employees hired for less than 20 hours per week
- Seasonal: use for employees hired for a seasonal job of 16 weeks or less

These instructions are for full-time or part-time employees. There are separate instructions for the seasonal wage statement. See the instructions for concurrent employment if the employee has more than one job.

The employer provides employee and wage information to the claim administrator: the insurer, self-insured employer or third party administrator handling the claim. The claim administrator completes the wage statement to calculate the employee's compensation rate. The wage statement is sent to

## Top of form:

Correction Box: Check if this document is correcting a document previously filed.

DWC No: For DLT use only. Please leave blank.

Insurer File Number: Provide the claim number or file identification number for the company handling the claim:

the insurer, self-insured employer or third party administrator.

# Employee Information.

**SSN:** provide at least the last 4 digits of the employee's social security number or the employee ID number assigned by RIDLT. DO NOT USE A FICTITIOUS NUMBER. Please contact RI DLT to obtain an assigned employee ID number.

Name: enter the employee's first name, middle initial and last name.

**Hired for:** Enter the number of hours the employee was hired to work each week. Check if the number of hours was approximate.

**Supplemental wages?** Check YES if these are wages from a supplemental employer (not the employer where the employee was injured) and give the supplemental employer's business name. Maximum no. of exemptions: enter the maximum number of exemptions the employee may claim for tax purposes. Count the employee and his or her dependents and any other person who qualifies as an exemption for tax purposes. The number of exemptions must be at least one (the employee).

Check SINGLE if the employee is unmarried, widowed or divorced. Check MARRIED if the employee is married or separated.

#### Claim Information.

**Employer:** enter the business name of the injured worker's employer.

**Insurance Co:** give the name of the licensed insurer shown on the workers' compensation policy or the self-insured employer's name.

**Claim Administrator:** enter the name of the company handling the claim.

**Injury date:** Enter the date of the injury.

**Incapacity date:** Enter the first full calendar day that the employee was unable to work due to the injury.

Hire date: Enter the date the employee was hired (the first day the employee worked).

**Employed less than 2 weeks:** If the employee worked for less than two weeks before the injury, complete either the left or right section:

- Left section: wage times full-time (or part-time) hours
  - 1. List the agreed upon hourly wage.
  - 2. Enter the number of **hours** per week for the employer's full-time (or part-time) employees.
  - 3. Multiply wage (1.) times hours (2.) to give the average weekly wage.
- Right section: give the average weekly wage for employees with the same or similar jobs.

#### **Employed more than 2 weeks:**

Determine the first week of wages to include.

Identify the incapacity date: the first full calendar day that the employee was unable to work due to the injury. 13 weeks of wages (26 weeks for part-time) before the **INCAPACITY DATE** should be included. Start from the week of the INCAPACITY DATE (not the injury date) and work backward.

Did the employee work a full week for the week including the INCAPACITY date?

Yes, the employee worked a full week - use the week of the incapacity date as the first week of wages. No, the employee did not work a full week - use the week before the incapacity date as the first week of wages, even if a full week was not worked that week.

- List 13 **CONSECUTIVE** weeks for full-time. List 26 **CONSECUTIVE** weeks for part-time.
  - o Start with first week above. For Week Number 1, enter:
    - Week ending date.
    - Number of standard hours worked. If the employee worked more than 40 hours without overtime, note "NO OT" next to the hours worked so it is clear that overtime is not included.
- Gross wages WITHOUT overtime. List gross pay without overtime and without bonuses. Overtime and bonus are calculated seoarately. INCLUDE these payments:
  - Commissions
  - Shift differential
  - Sunday pay
  - Paid holiday, sick and vacation
    - Include weeks the employee was not paid for plant shutdown or unpaid time off. Write "UNPAID" for Gross Wages and enter 0 (zero) in the Number of Standard Hours Worked.
  - Enter the week ending date, number of standard hours worked and gross wages for 13 CONSECUTIVE weeks for full-time (26 CONSECUTIVE weeks for part-time) before the incapacity. Do not skip any weeks. Include unpaid weeks as shown above.
  - o Total number of usable weeks:
    - Count the number of weeks above where wages are listed. Do not count weeks where Gross Wages are zero.
    - Fill in the number of usable weeks.
  - o Total earnings: add all the gross wages and enter the total.
- Bonus and Overtime Calculation
  - o Average Bonus:
    - Number of weeks employed (up to 52). Fill in the number of weeks the worker has been employed up to 52. If employed less than 52 weeks, use the actual number of weeks employed. If employed more than 52 weeks, use 52.
    - Total bonus amount paid in the past 52 weeks. Fill in the total amount of bonuses paid to the employee in the last 52 weeks.
    - Average bonus: divide Total Bonus (block 2) by Number of Weeks (block 1) to

get the average bonus.

- Average Overtime:
  - Total Overtime: enter the total amount of overtime paid in the last 52 weeks in block 4.
  - Average: divide Total Overtime (block 4) by Number of Weeks (block 1) to get the average overtime. Enter it in block 5.
- Calculate Average Weekly Wage (AWW)
  - 1. Total Earnings: Enter the total earnings from the end of the section listing 13 (full-time) or 26 (part-time) consecutive weeks of wages.
  - 2. Usable Weeks: Enter the total number of usable weeks from the end of the section listing 13 (full-time) or 26 (part-time) consecutive weeks of wages.
  - 3. AWW no Bonus no OT: Divide total earnings (1.) by total number of usable weeks (2.) and enter the result. This is average weekly wage without bonus and without overtime.
  - 4. Average bonus: enter the average bonus from Block 3 in the Bonus and Overtime section above.
  - 5. Average weekly wage excluding overtime (AWW no OT): add (3.) AWW no Bonus no OT) and (4. Average Bonus).
  - 6. Average overtime: enter the average overtime from Block 5 in the Bonus and Overtime section above.
  - 7. Add (5.) and (6.) to Total Average Weekly Wage.

### Preparer and Adjuster.

- Print Preparer Name and Date: Print the name of the person who filled out the form and enter the date the form was prepared.
- Printer Adjuster Name and Date: Print the name of the adjuster who checked the form and the date the form was completed.

Revised 12/12/2016