**Contact AlaskaJobs Help Desk – Template**

Date Issued Occurred: Time Issued Occurred:

Are you an:  Individual  Employer  Provider  Grantee  Staff

Program Name (if known):  
  WIOA/Dislocated Worker  TAA  WOTC  Other

Username:

First Name: Last Name:

Zip Code: Email:

Phone Number:

Brief description of problem:

Link to page where problem occurred:

Location Path: example - assist an individual>programs>activities

If using log in instructions, which step caused issues?

Screen shots:

Copy and paste the above information in the body of the email to fill in the information.