



EDD UNEMPLOYMENT BENEFITS

Benefits Overview

Inside this issue:

Filing For EDD Unemployment Benefits	2
Frequently Asked Questions	3
Important Contact Information	4
Sample Unemployment Insurance Application	Inserts

Apprentices & Trainees enrolled in a State Approved Apprenticeship Program are eligible for Unemployment Benefits while attending mandatory Apprenticeship Training, which causes them to be unemployed for a period of time. Once you have been informed of your scheduled two-week class start date you should plan on filing for Unemployment Benefits the Friday before the first day of your 1st semester class session. This should be your last day worked before your two-week class session. Do not file until your last day of work. If you have not already applied for your Unemployment Benefits by the first day of class you should do so immediately. The EDD can backdate any claim up to three weeks. EDD filing must be done on your own time - no opportunity will be available during class time. Information on how to file is include in this informational packet.

Once you have filed your claim on-line or over the phone EDD will open a claim and send you the

paperwork to report the days that you did not work due to class attendance.

When you have successfully completed the class, WECA will issue you a certificate of semester completion. This needs to be sent in with the paperwork that EDD has sent you.

Since EDD has a 7 day waiting period for Unemployment Benefits, you will only be paid for the second week of classes. Once your application is received and accepted by EDD, it should take no longer than 10 days to get a check.

The steps for filing a claim for your second two week class are the same, except you will be exempt from the 7 day waiting period, as long as you have not exhausted your EDD time or monetary limits (1 year or 26 weeks of payment)

You will receive a benefit book from EDD that will include an unemployment insurance benefit table and complete filing information.

Filing for EDD Unemployment Benefits

When to file your claim.

- ❑ File your EDD Unemployment Insurance claim the Friday before the first day of each of your 2-week class sessions. (Do not file your claim before your last day worked.)

What you will need.

- ❑ Your name (including all names you have used while working), your social security number, your mailing address and telephone number (include the ZIP code for your mailing address and the area code for your telephone number).
- ❑ The last date you worked for any employer. (For most, this will be the Friday before class starts).
- ❑ The name, mailing address and telephone number of your last employer, include the ZIP code for your last employer's mailing address and the area code for your last employer's telephone number (WECA is not your Employer, your Employers are the contractors you work for). Be specific about the spelling of the employer's name and make sure the address is correct because EDD is required to mail a notice to that employer and an incorrect address will delay payments.
- ❑ The name of the employer you worked for the longest within the last year and a half; and the number of years you worked for that employer. This may or may not be the same as your last employer (WECA is not your Employer, your Employers are the contractors you work for).
- ❑ The reason you are no longer working for your last employer. You may have quit, been laid off, fired, or left work because of a trade dispute. Be specific about the reason you are not working because the information you give must be sent to your last employer. If you quit, were fired, or left work because of a trade dispute you will be scheduled for a future telephone interview. The information obtained during the interview will help decide if you are eligible to receive benefits. **For the 2-Week Class Session you will choose "Laid off, lack of work" and you will explain that you were "laid off to attend mandatory Apprenticeship Training".**
- ❑ Whether you are receiving, or expect to receive any payments from a former employer. EDD asks about this because some types of payments may be deducted from your benefits. A few examples of payments that may be deducted:
 - Wages
 - Pension payments
 - Holiday pay
 - Vacation or sick pay
- ❑ Whether you are able to work and available to accept work. (In most cases you would check Yes, because after the training is over you will be available to work.)
- ❑ Whether you have a legal right to work in the United States. If applicable, individuals will be asked for their alien registration number.

(Continued on page 3)

(Continued from page 2)

How to file.

☐ By Phone

- To file your claim for EDD Unemployment benefits by phone, call EDD's Automated phone line at 1 (800) 300-5616.
- You will hear a welcome message in English and Spanish. You will then be asked to:
 - ➔ Press 1 to hear the recording in English
 - ➔ Press 2 to hear the recording in Spanish
- Special instructions or announcements may be played prior to the main menu. A brief description of each main menu item will then be provided. If you know the selection you want, you can press the number and bypass the main menu recording. After you make your selection from the main menu, you may need to make further choices.
 - ➔ Press 2 to file a claim or for information about unemployment insurance.
- Throughout the automated system:
 - Press 9 to repeat the main menu choices or to return to the main menu.
 - Press * to return to the previous menu.
 - Press 0 to speak with an EDD representative.

☐ On-Line

- To file your claim on-line, go to EDD's website at www.edd.ca.gov and click on the "How to File an Unemployment Insurance Claim" link on the left hand side. Then click the "Applications" link under Programs and Services. You can also go to the application directly by typing the following in your internet address bar: <https://eapply4ui.edd.ca.gov/>
- Once you're on the application page...
 - ➔ Click the "continue" button on the bottom right of the website and begin to complete your application for unemployment insurance.

Frequently Asked Questions

Q What if I have already filed for Unemployment Benefits within the last year because I have been laid off from work.

A: If you have already filed for unemployment Insurance within the last 12 month period and have not exhausted the allotted benefits for that claim (26 weeks of payments) then your claim for Unemployment Benefits because of class will be a re-open of your existing claim and you will not be subject to any waiting period.

Q: I'm a Trainee, can I still apply for Unemployment Benefits?

A: Yes, Trainees can apply for Unemployment Benefits while they are attending classes.

Q: I got a letter that states I have to be available for a phone interview on a certain date. Do I have to comply with the letter? What's it for?

A: The EDD randomly picks applicants for follow-up phone interviews to check on the accuracy of their applications. These instructions have to be complied with since they are generated from a different division within EDD. The best way to insure you will be there for the call is to leave a cell phone number (line 9 on the application) where you can be reached. They give you a tight window in which they will call and it only takes a few minutes. You can also have the call forwarded to a number where you can be reached if you have left your home number. If you've already gone back to work because the class is over then mention that at the outset. It will save a lot of time. The call is to help you in your search for work.

Q: What do I do if I need to reschedule my interview time?

A: You need to follow the instructions on the "Telephone Interview Notification and Instructions" form mailed to you by EDD. This form instructs you to call EDD's 800 number, before the date of your scheduled interview, to reschedule. The best times to call this number is between 8:AM & 10:AM and between 3:15PM & 4:45PM. It can be very difficult to get through on this line so it is very important that you keep trying.

(Continued on page 4)

Important EDD Contact Information

INTERNET:

www.edd.ca.gov

TELEPHONE:

English

1-800-300-5616

Spanish

1-800-326-8937

Cantonese

1-800-547-3506

Vietnamese

1-800-547-2058

(Continued from page 3)

- Q:** I called in my application and was asked about union membership when I stated I was in "State Approved Mandatory Apprenticeship Training Program". The person didn't recognize WECA as a program and even questioned it being state-approved. What should I say about that?
- A:** Certain people within EDD are unaware of WECA and have only dealt with non merit shop (union) apprentice applicants. Give them our State File Number for your program (Commercial Program File Number 19602 - Residential Program File Number 10628) and ask them to verify with the Department of Apprenticeship Standards. If problems persist call the WECA office and make sure to have the name and telephone number of your EDD Interviewer, so we can help you resolve this type of issue.
- Q:** Do I have to have my instructor sign the back of the form they sent me to mail in after the class ends?
- A:** The instructor's signature is only required for ongoing classes not the 2-week model. It doesn't hurt to have it signed though.
- Q:** I received my form in the mail. When do I send it in?
- A:** Check the form for the date to mail it back. Most of the time it should not be mailed until the Sunday after the last class of your semester. Be especially sure to include the completion certificate WECA gives you, with the form. You will not get paid without it.
- Q:** How much will I get from unemployment?
- A:** Very often WECA apprentices qualify for the maximum amount. It depends on your employer's contributions and the hours you worked in the previous quarters.
- Q:** How do I end my claim?
- A:** Discontinue mailing your Confidential Claim Form, DE 4581. If EDD does not receive a claim form from you, they assume that you have returned to work, or are no longer claiming benefits. It is not necessary to contact the EDD to stop your benefit.

For Department Use Only

Date Received: _____
Date Postmarked/Faxed: _____
Effective Date: _____

UNEMPLOYMENT INSURANCE APPLICATION

PRE APPLICATION QUESTIONS MUST BE COMPLETED

- | | | |
|---|------------------------------|-----------------------------|
| A. Were you in the military during the last 18 months? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| B. Did you work for an agency of the federal government during the last 18 months? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| C. Did you work in a state other than California during the last 18 months? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| D. Have you applied for unemployment insurance benefits in another state during the last 12 months? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| E. Did your employer or union give you a claim form for unemployment insurance benefits? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you answered **NO** to all of the above questions (A through E) proceed.

If you answered **YES** to any of the above questions (A through E) do not complete this form, call 1 (800) 480-5616.

PLEASE ANSWER ALL QUESTIONS ON EACH PAGE

If a question is not answered it may delay or prevent the filing of your claim, or cause benefits to be denied.

- Please complete this form with blue or black ink only.
- Please print or type information.

The answers you give to the questions on the application must be true and correct. You may be subject to penalties if you make a false statement or withhold information.

This application will take you approximately 30 minutes to complete.

1. What is your Social Security Number?	1. _____
2. List other Social Security numbers you have used.	2. a) _____ b) _____
3. What is your name?	3. Last _____ First _____ Middle Initial: _____
4. List the names you have used.	4. _____ _____
5. What is your birth date?	5. ____/____/____
6. What is your gender?	6. <input type="checkbox"/> Male
7. a) Would you prefer your written material in English or Spanish? b) What is your preferred spoken language?	7. a) <input type="checkbox"/> English b) _____
8. List the names of employers you worked for in the last 18 months. a) _____ b) _____	<div style="border: 2px solid black; padding: 5px;"> <p>WECA is not your employer, list those contractors you have worked for in the last 18 months.</p> </div>
9. What is your telephone number?	

Use a cell phone number, if available, so EDD can reach you while you are attending classes. It is very important that you can be reached for your scheduled phone interview, it is very difficult to reschedule.

UNEMPLOYMENT INSURANCE APPLICATION

Social Security Number: _____ - _____ - _____

10. What is your mailing address? Include your city, state, and ZIP code.	10. Street: _____ City: _____ State: _____ ZIP Code: _____
11. If you do not live in California, what is the name of the County in which you live?	11. _____
12. What is the highest grade of school you have completed? Check only one box. <input type="checkbox"/> Did not complete High School <input type="checkbox"/> High School Diploma <input type="checkbox"/> GED <input type="checkbox"/> Some college or vocational school <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's or Advanced Science <input type="checkbox"/> Masters or Doctorate	
13. Are you currently employed?	13. <input type="checkbox"/> No <input type="checkbox"/> Yes
14. In the last 12 months, which employer did you work for the longest? a) How long did you work for that employer? b) What type of business did that employer operate? (Please be specific . For example, software manufacturing, legal services, retail furniture sales, road construction.) c) What kind of work did you do?	14. _____ a) Years _____ Months _____ b) _____ c) _____
<p>Please provide information on the last employer you worked for as an employee. Do not include self-employment unless you have elective coverage.</p> <p>Reminder: To file a claim, individuals must be out of work (for any reason), or working less than full time. You must provide information on the last employer you worked for as an employee. Do not include self-employment unless you have elective coverage.</p>	
15. a) What is the last date you actually worked for your very last employer ? b) What are your gross wages for your last week of work? For unemployment insurance purposes, a week begins on Sunday and ends the following Saturday. c) What is the complete name of your very last employer ? d) What is the mailing address of this employer?	15. a) ____/____/____ (mm/dd/yyyy) b) \$ _____ c) Name _____ d) Street _____ City _____ State: _____ ZIP Code: _____ e) _____ <input checked="" type="checkbox"/> <input type="checkbox"/> Laid off, lack of work <input type="checkbox"/> Fired <input type="checkbox"/> Quit <input type="checkbox"/> Strike or lockout <input type="checkbox"/> Still working part time
<p>You need to write in that you were "laid off to attend mandatory Apprenticeship Training"</p> <p>For most, this will be the Friday before class</p> <p>Your wages before</p> <p>You choose this box, "Laid off, lack of work"</p> <p>Briefly explain in your own words the reason you are no longer working for your very last employer, within the space provided. Please do not include any attachments.</p>	

UNEMPLOYMENT INSURANCE APPLICATION

Social Security Number: _____ - _____ - _____

16. Do you expect to return to work for any former employer?	16. <input type="checkbox"/> Yes <input type="checkbox"/> No
17. Are you currently self-employed, or do you plan to become self-employed? (Self-employment means you have your own business or work as an independent contractor.) If yes explain: _____	17. <input type="checkbox"/> Yes <input type="checkbox"/> No
18. Are you now, or have you ever been, an officer of a corporation, a partner in a partnership, or a stockholder of a corporation? If yes explain: _____	18. <input type="checkbox"/> Yes <input type="checkbox"/> No
19. Are you currently attending, or do you plan on attending school or training? If yes: a) What is the starting date of the school or training? b) What is the ending date of the current session? c) What is the name of the school? d) What is the telephone number of the school? e) What are the days and hours you are attending, or plan to attend, school?	19. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No a) _____ (mm/dd/yyyy) b) _____ (mm/dd/yyyy) c) <u>Western Electrical Contractors Apprenticeship & Training Program</u> d) <u>(8 7 7) 4 4 4 -9 3 2 2</u> e) <u>Monday–Friday 7AM-4PM</u>
20. What is your usual occupation?	20. <u>Electrician Apprentice</u>
21. Are you available for immediate full-time work in your usual occupation? If no: a) Are you available for immediate part-time work in your usual occupation? If no: b) Please explain why you are not available for work: _____	21. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No a) <input type="checkbox"/> Yes <input type="checkbox"/> No b) _____
22. Are you receiving, or will you receive within the next 52 weeks, a pension other than Social Security or Railroad Retirement, which is based on your own work or wages? If yes: a) How are you receiving your pension payments? b) Did you pay into your pension or retirement plan? c) Did you or the employer you worked for make the last 18 months of payments for the pension? d) What is the name of the company paying into the pension? e) Who pays the pension check to you?	22. <input type="checkbox"/> Yes <input type="checkbox"/> No a) <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Lump sum b) <input type="checkbox"/> Yes <input type="checkbox"/> No c) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure d) _____ e) _____

This is your first day of the two week class session.

You choose this box, "Yes"

This is your last day of the two week class session.

You choose this box, "Yes"

UNEMPLOYMENT INSURANCE APPLICATION

Social Security Number: _____ - _____ - _____

<p>23. Are you receiving, or do you expect to receive, Workers' Compensation?</p> <p>If yes:</p> <p>a) Who is the insurance carrier?</p> <p>b) What is the insurance carrier's telephone number?</p> <p>c) What is the case number, if known?</p> <p>d) What are the dates of your claim, if known?</p>	<p>23. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>a) _____</p> <p>b) (_____) _____ - _____</p> <p>c) _____</p> <p>d) from: ____/____/____ (mm/dd/yyyy) to: ____/____/____ (mm/dd/yyyy)</p>		
<p>24. Have you received or do you expect to receive any payments from your last employer for salary? (for example, holiday pay, vacation pay, severance, in-lieu-of-notice pay, etc.)</p> <p>If yes: Example: Vacation Pay \$600.00 10/07/2001 10/07/2001</p>			
<p>Type of Payment</p>	<p>Amount</p>	<p>From (mm/dd/yyyy)</p>	<p>To (mm/dd/yyyy)</p>
<p>25. Are you a member of a union?</p> <p>If yes:</p> <p>a) What is your union name and local number?</p> <p>b) Through what date are your dues paid?</p> <p>c) Does your union look for work for you?</p> <p>d) Does your union control your hiring?</p> <p>e) Are you registered with your union for or against work?</p>		<p>25. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>a) _____</p> <p>b) ____/____/____ (mm/dd/yyyy)</p> <p>c) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>d) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>e) <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>26. Do you have a date to start work?</p> <p>a) What date will you start work?</p>		<p>26. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>a) ____/____/____ (mm/dd/yyyy)</p>	
<p>27. Are you attending school, a training institution, or a job training program?</p> <p>If yes:</p> <p>a) When are you returning to work in the next school session?</p>		<p>27. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>a) <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>28. Is your usual work seasonal?</p> <p>If yes:</p> <p>a) When does the season usually begin?</p> <p>b) When does the season usually end?</p> <p>c) What other work related skills do you have?</p>		<p>28. <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>a) ____/____/____ (mm/dd/yyyy)</p> <p>b) ____/____/____ (mm/dd/yyyy)</p> <p>c) _____</p> <p>_____</p>	

You choose this box, "No"