

How to File for Unemployment for Class

*Notes

- These directions are strictly for the purpose of filing for Unemployment benefits to attend your Mandatory Apprenticeship Training. If you are filing because you were laid off, and not for class, do not use these directions.
- Claim weeks are Sunday to Saturday, so file on the first Monday of class.
- You are ultimately responsible for how you answer the questions when filing for unemployment benefits. This guide is only meant to assist you in answering questions directly related to your mandatory apprenticeship training. Please answer all questions correctly; WECA will not be responsible for incorrect information given.

Step 1

Go to http://edd.ca.gov and click on "File for Unemployment"



Click on "eApply4UI"



Read information carefully, then click on "Continue"



Read this information carefully. This section tells you what you need to know and have available before you start the application for benefits. When done, check the "I have read all of the above information" box and click on "Continue".



Alternate Base Period (ABP)

Individuals who do not have sufficient wages in the Standard Base Period to establish a valid claim may potentially qualify to file a claim using the Alternate Base Period. The Alternate Base Period changes the quarters considered for a UI claim to allow more recent wages to be counted towards establishing a valid claim. The Alternate Base Period is a 12-month period of time consisting of the four most recently completed calendar quarters.

If the EDD finds that you do not have sufficient wages in the Standard Base Period to establish a valid UI claim, the EDD needs to know if you want to attempt to establish a claim using the Alternate Base Period. Make sure you indicate your preference on the application.

If v	our	claim	begins	in:

Your Alternate Base Period is the prior 12 months ending the last day of:

January-February-March	December
April-May-June	March
July-August-September	June
October-November-December	September

The diagram below reflects the same information as above

The shaded area is your Alternate Base Period. The unshaded area is the month you filed your claim.

JAN FEB MAR	A P R M A Y JUNE	JULY AUG SEP	OCT NOV DEC	JAN FEB MAR	-		\square	lf you clain
	A P R M A Y JUNE	JULY AUG SEP	OCT NOV DEC	JAN FEB MAR	A P R M A Y JUNE			begir in:
		JULY AUG SEP	OCT NOV DEC	JAN FEB MAR	A P R M A Y JUNE	JULY AUG SEP		,
			OCT NOV DEC	JAN FEB MAR	A P R M A Y JUNE	JULY AUG SEP	OCT NOV DEC	

If the effective date of your UI claim is January 2, 2005, or later, the benefit table (2005) provides your weekly benefit amount based on your wages in a calendar quarter during the base period. (The benefit tables are in Adobe Portable Document Format (PDF). You will need the Adobe Acrobat Reader to view or print these tables. You can download the free Adobe Acrobat Reader at http://www.adobe.com/products/acrobat/readstep.html.)

Can I cancel my claim?

You can cancel your claim if you have not collected benefits, you have not been issued a written notice of disqualification, you do not have an overpayment on your claim, and the benefit year of your claim has not ended.

Once you are paid benefits, the law does not allow you to cancel your claim. If you decide you want to cancel this claim, **do not certify for benefits by any** method. Do not return the Continued Claim DE 4581 or use the EDD Tele-CertSM or the EDD Web-CertSM to certify for benefits. Once a claim has been cancelled, it cannot be reestablished with the same beginning date. If you have questions about stopping your benefits or cancelling your claim, you must contact the EDD online, by mail, or by phone at http://www.edd.ca.gov/About_EDD/Contact_EDD.htm

Important Notice: 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.

What do you need to file a claim using this application?

To be able to file a claim, you must be out of work (for any reason) or working less than full-time at the time you file your claim.

The application will ask a series of questions. Some questions will be about your recent employment. Other questions will ask for personal information for identification and statistical purposes, such as date of birth and years of education. It is important to be as accurate as possible with the information you provide.

Please have the following information available when filing your claim: Your name and social security account number Your mailing and residence addresses (if different)	Make sure you have these items prior to starting your application.
Your telephone number	

- Your last employer information (regardless of the length of time you worked for the employer) including name, address (mailing and physical location) and telephone number (including area code)
- · Your last date worked and the reason you are no longer working
- Your gross earnings in the last week you worked, beginning with Sunday and ending with your last day of work
- Information on all employers you worked for during the past 18 months, including name, address (mailing and physical location), period of employment, gross wages earned, hours worked per week, and hourly rate of pay
- · Your driver's license or ID card number, if you have either
- · Your citizenship status (which may include your alien registration number)

Reporting Wages

For UI purposes, a week begins on Sunday and ends the following Saturday. Whether you have been paid or not, report the total gross wages for your regular pay for the hours worked in the last week you worked, beginning with Sunday and ending with your last day of work.

For example, if the last day you worked was Thursday, you would report wages earned from Sunday through Thursday. See the chart below:



To calculate your total gross wages for your last week of work, multiply your hourly rate of pay by the total hours you worked from Sunday through the last day you worked (add piece work pay for that week, if applicable).

Important!

If you were paid or if you will be paid Holiday Pay, Vacation Pay, Severance Pay, In-Lieu-Of-Notice Pay, or Other Pay (including, but not limited to, bonus pay, or commission pay), do NOT report these payments as part of your gross wages. Report them separately in the space provided.

You are required to report all wages you earn while you are certifying for and receiving UI benefits. Therefore, if you continue to work at all after the date on which you file your UI claim, you must report those additional wages.

You must report lodging, meals, or any other payment you receive when you work. If you are unsure about how to report wages, call EDD.

UI Claim Materials

Within ten days we will mail the following documents to the address you provided on your application:

- Notice of Unemployment Insurance Award DE 429Z. This notice shows your weekly benefit amount and your maximum benefit amount. These amounts
 are based on the wages reported by your employer(s). Please review the award notice for accuracy and call EDD immediately if you disagree with the
 information. This notice also gives instructions on your work search requirements.
- Notice of Unemployment Insurance Claim Filed DE 1101CLMT. This document contains information you provided when you filed your claim. The EDD
 will consider the information to be correct unless you contact the EDD within 10 days from the date we mailed the form to supply corrected or omitted
 information.
- A Guide to Benefits and Employment Services DE 1275A. This is a handbook that explains your rights and responsibilities under the UI Program. Read it completely and carefully. You are responsible for knowing its contents.
- A Continued Claim DE 4581. This is a form used to claim weekly benefits. Follow the instructions in the handbook on how to complete the form. The
 benefit week begins Sunday and ends Saturday at midnight. Answer all the questions for each week, sign and mail the form on the date shown on the
 front. Remember to report any wages you earned for the weeks on the form, paying attention to the beginning and ending dates of each week. The first
 week of UI benefits is the "waiting period" week. You will not receive benefits for that week. However, you must complete the claim form for that week to
 certify for benefits. You may also certify for weekly benefits online using EDD Web-CertSM or over the telephone using EDD Tele-CertSM.

Prior Disgualification or Overpayments

If you had a disqualification or overpayment on a previous UI claim, the disqualification or overpayment may carry over and affect your new claim. Please refer to the disqualification or overpayment notice you received by mail at the time the disqualification or overpayment was established.

If you are Receiving a Pension

Some pensions are deductible from UI benefits. If you are receiving a pension other than Social Security, Railroad Retirement, or a pension based on another person's work or wages, you may have to repay UI benefits received, if the pension payments are for the same time period. A determination interview may be needed to determine if your pension payments are deductible.

Determination Interview

If there is a question of your eligibility for UI benefits, you will be scheduled for a telephone eligibility determination interview. You will receive a notice entitled Notification of Unemployment Insurance Benefits Eligibility Interview that will indicate the date and time the EDD representative will call you. This notice will also give you information about the issues to be discussed and possible questions you will be asked.

An EDD representative will call you at a predetermined time, and will ask you questions to assist that representative in determining your eligibility. The interviewer may also speak to your former employer if you quit or were fired from your last job.

Training Benefits

If you are interested in training, you may be eligible for California Training Benefits, which would allow you to receive training while receiving UI benefits. Please refer to your UI claim handbook "A Guide to Benefits and Employment Services" for information.

You may also be eligible for additional training benefits if you contact the EDD before:

- · sixteen weeks of benefits are paid, or
- · your benefits are exhausted (if your claim is for less than 16 weeks)

Work Search Requirement

You are required to look for work each week that you are certifying for benefits by contacting employers who hire workers in your usual occupation. Failure to look for work in any week may affect your eligibility to receive benefits. We advise that you keep a record of your work search dates and employer contact information for future use and potential eligibility interviews.

Job Service Registration

You are required to register in California's Job Search assistance website (CaIJOBS) within 21 days of filing your UI claim. You may also be required to complete a work search questionnaire and attend multiple reemployment assistance interviews or workshops. Failure to register in CaIJOBS or failure to attend scheduled reemployment assistance appointments, may affect your eligibility for UI benefits.

If you have not registered for Job Search Assistance, you should register with your local America's Job Center of CaliforniaSM (formerly known as One-Stop Career Centers).

Job Search Assistance

Out-of-State Residents

You must actively seek work and should register for Job Search assistance with the local employment office in your state. Look in the telephone directory for local telephone listings or search online.

Interactive Voice Response

The EDD has an automated telephone system which is available seven days a week for general UI information, Job Service locations and telephone numbers.

Additional Information

If the EDD needs to verify any of the information you provide on the application, you will receive additional forms by mail and will be asked to provide additional information and/or documentation.

Please read all EDD materials carefully. If you have questions you may call EDD to obtain additional information.

File by Telephone

If you would rather file for unemployment benefits by telephone, call EDD and staff will assist you. Call Centers can be very busy, and you may be waiting for a period of time.

Completing the Application

For information on EDD's privacy policy and data security, please read the EDD Data Privacy and Security Policy before completing your application for benefits.

- The following instructions apply if you are filing your claim using our paper form, DE 1101I:
 - · You can fill in the form on-line and print, or print and complete by hand. Then mail or fax to an EDD office for processing.
- The following instructions apply if you are filing your claim online using eApply4UI:
 - If you are not familiar with completing forms on the Internet, please read the Instructions For Internet Form Entry before completing your application for benefits.
 - As you complete the UI Application, you may be asked to provide several dates. You may choose any of the following ways in which to report a date (M = month, D = day of month, Y = year):
 - MM/DD/YYYY or MM-DD-YYYY or MM.DD.YYYY

If you do not enter dates in one of these formats, you will receive an error message.

Do not use the Backspace key on your keyboard while you are entering information into the eApply4UI Application page. The Backspace key is
interpreted by most browsers as equivalent to the back arrow on the toolbar. If you do hit the Backspace key and leave the application, use the forward
arrow on the tool bar to return to your application.

If you are using eApply4UI or a paper application, DE 11011, to file for benefits, allow up to 10 days for processing. After your application is received by the EDD and a claim is filed, it will be determined if you are eligible to receive benefits.



Answer questions, click on "Continue".

*Note:

If you answer "yes" to any of these questions, you may see additional questions or be directed to file a paper application as some claims require special handling.

	State of Cali	fornia		Contact I	EDD Office Locator	Forms & Publications Online Services
- PA		ment Deve	lopment	t Departmer	nt	
GOV.	Home	Unemployment	Disability	Jobs & Training	Pavroll Taxes	Labor Market Info
		chempioyment	Choabinty	oobo a maming	r ayron ranco	
Home Unemploy	ment i Unemplo	oyment Insurance Applica	ation			
Unemploy	ment Insuran	ce Application Qu	estions			eApply4UI
Answer the follow	wing questions to a	determine which Unemplo	yment Insurance	application is best for yo	u:	
1. Did you wo	rk in a state other	than California during the	last 18 months?			⊖Yes ⊖No
Did you wo	rk in Canada durin	g the last 18 months?				
2. Have you a	pplied for unemplo	oyment insurance benefit	s in another state	or Canada during the las	st 12 months?	⊖Yes ⊖No
 Did your er unemployn 	nployer or union, o ient insurance ben	r non-union trade associa efits?	ation give you on	e of the following claim fo	rms for	⊖Yes ⊖No
Notice of R	educed Earnings,	DE 2063				
 Notice of R 	educed Earnings (Fisherperson), DE 2063F	:			
 Pacific Mar 	itime Association F	Partial Evidence of Payme	ent Form, PMA 2	063		
 Payment C 	ertification (Work \$	Sharing), DE 4581WS				
 Initial Claim 	and Payment Ce	rtification (Work Sharing I	Employer), DE 45	511WS		
Note: 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.						
	Back to Top	Contact EDD Cond	itions of Use	Privacy Policy Equa	I Opportunity Notice	Site Map

Answer questions, click on "Continue".

*Note:

If you answer "yes" to questions 4, 5 or 6, you may see additional questions or be directed to file a paper application as some claims require special handling.

	01	State of Calif			Contact I	EDD Office Locator	Forms & Publications Online Services
1	A	Employ	ment Deve	lopment	Departmer	nt	
C	-GOV	Home	Unemployment	Disability	Jobs & Training	Payroll Taxes	Labor Market Info
Home	Unemploym	ent Unemplo	oyment Insuran <mark>c</mark> e Applic	ation			
٢	Unemploym	ent Insuran	ce Application Qu	estions (cont	tinued)		
Ans	wer the following	g questions to d	etermine which Unempl	oyment Insurance	application is best for yo	u:	
<mark>4</mark> .	Did you serve	in the military d	uring the last 18 months	?			O Yes O No
	4a. Are you	currently preser	nt in California?				O Yes O No
5.	Did you work	for an agency of	the federal government	during the last 18	3 months?		OYes ON0
6.	Have you filed	an Unemploym	ent Insurance Claim in (California in the la	st 12 months?		OYes ON0
Not You	Note: 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.						
		-					
-							
		Back to Top	Contact EDD Cond	litions of Use	Privacy Policy Equa	I Opportunity Notice	Site Map

	State of California	Contact EDD Office Locator Forms &	Publications Online Services
1	Employment Developmen	t Department	
• (Apply4UI - Application for Unemployment Insurance		
Appli	icant Information	Steps: 1 2 3 4 5 6 7	8 9
1.	Social Security Number (SSN) or EDD Client Number (ECN) Help	1a. Confirm the last 4 digits of y	Vor ONo
2.	If you have used any other Social Security Numbers, please list them 2a. 2b.		
3.	Date of Birth (mm/dd/yyyy)	4. Gender: O Female O Male	
5.	Claimant Name. 5a. First Name 5b. Middle Initial	5c. Last Name	
6.	Is this the name that appears on your social security card?		⊖Yes ⊖No
7.	If you have used any other names, please list them Help 7a. 7b.	7c.	
8.	Do you have a state-issued Driver's License or ID card?		●Yes ○No
	8a. Name of issuing state or entity Help	8b. Driver's License or ID Number	
9.	Preferred spoken language? English	9a. Preferred written language? English V	
		Next	
	Back to Ton Contact FDD Conditions of Use	Privacy Policy Foual Opportunity Notice Site	Man
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-	State of California	Contact EDD Office	ce Locator Forms & Publications Online Services
<i>C.</i> Gov	Employment Develop	pment Department	Search Q This Site California
eApply4UI · Contact Inform	• Application for Unemployment Ins	surance Steps: 1 2 3 4	6 7 8 9
 What is your 1a. Number 1b. City 1c. State H 1d. ZIP Cod Is your resid If you do not independent Telephone N 	mailing address? r and Street / P.O. Box and Number the the ence address the same as your mailing address live in California, please provide the name of the city, etc.) where you live. lumber	s? Help ne county or county-equivalent (e.g. parish, boro 4a. Telephone Type	☐ O Yes ○ No pugh, census area,
	Back to Top Contact EDD Condition	Previous	Next Always give your mobile number! If EDD calls, and you don't answer, your claim could be delayed or denied!

r		Shale of California		Contact EDD	Office Locator Forms & Publications Online Services
l	.GOV	Employment D	evelopment	Department	Search 🔍
) e	Apply4UI - enship & St	Application for Unempl atistical Information	oyment Insurance	Steps: 1 2 3	4 5 6 7 8 9
1.	Are you a U.	S. citizen or national?			∷Yes ⊖No
	The following	information is collected for stati	stical purposes only.		
2.	Education			~	
3.	Are you a Ve	teran?	○Yes ○No		
4.	What race or	ethnic group do you identify with	h?	\checkmark	
5.	Do you have	a disability? Help		~	
				Previous	Next
		Back to Top Contact EDD	Conditions of Use F	Privacy Policy Equal Op	oportunity Notice Site Map

Answer questions, click on "Next". (Complete questions #5 and #5a as described below – only if filing for benefits during mandatory training)

	Contact EDD Office Locator Forms & Publications Online Services
N	Final Command Development Department
	OV
🕘 еАрр	ly4UI - Application for Unemployment Insurance
Employm	ent Information (Part 1 of 2) Steps: 1 2 3 4 5 6 7 8 9
1. Iden	tify your very last employer:
Imp The	ortant! EDD considers your last employer to be the very last employer you physically worked for regardless if it was a full-time, part-time, or a temporary plover
1a.	Business Name of Last Employer Help
Mail	ing Address:
1b.	Number and Street / P.O. Box and Number Help
1c.	City
1d.	State Help
1e.	ZIP Code Question #3 - Enter your
11. 1a	Telephone Number of Last Employer
.9.	person who was your immediate supervisor?
2. Is th	e location or physical address of your very last employer the 90 comment mailing address? Help
3. Last	
Importa	unti
Your las	st employer will be contacted to verify the reason you are no longer working. Providing false information is considered fraud and may result in
penaltie	S.
4. Rea	Ison No Longer Working: Voluntary Quit
4a.	Please provide a brief explanation (Maximum 150 characters): Question #5 and 5a - Select the reason
	Mandatory State Approved Apprenticeship Training with
	Western Electrical Contractors Association, Inc. 48 Voluntary Quit and WECA's
5. If yo	u received, or if you expect to receive, any payments from your very last employer or any other e you had to leave to attend training.
рау	ment below. Help
	Amount (mm/dd/yyyy) (mm/dd/yyyy)
5a.	Holiday Pay
5b.	
5c.	
5d.	
5e.	
5f	Li Utilet Pay
01.	
	characters left
	Previous Next
	Howe Howe
COLUMN DESIGNATION	
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	Back to top 1 Contact EDD 1 Conditions of Use Phyacy Policy Equal Opportunity Notice Site Map
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State of California	Contact EDD Office Locator Forms & Publications Online Services
Employment Development D	epartment
U .GOV	
eApply4UI - Application for Unemployment Insurance	eapply4UI
Employment Information (Part 2 of 2) Sta	eps: <u>1</u> <u>2</u> <u>3</u> <u>4</u> <u>5</u> <u>6</u> 7 8 9
Correct the following error(s) below. For a detailed error message, move the mo	ouse cursor over the error icon $oldsymbol{0}$.
Provide your employment history for the past 18 months, including your very last e for actors, or an employer where wages are reported under a corporate name, you to refer to your check stub(s) or W-2(s) to obtain the name of your employer.	employer. If you worked for a temporary agency, a labor contractor, an agent ir wages may have been reported under that employer name. You may want
Note: Failure to report all employers, periods of employment, and total wages may information as possible for each employer.	y result in your benefits being delayed or denied. Provide as much accurate
1-1. Employer Information	
a. Employer Name Help	
b. Mailing Address Help	
c. City	0
d. State Help	
e. ZIP Code	
f. First day you worked for this employer (mm/dd/yy	(yy)
g. Last day you worked for this employer (mm/dd/yy	(уу) 🔍
h. Did you work full time or part time? O Full Time O Part Time	Question #1k - Enter
i. How much did you earn per hour? Help	Gross Wages, Check your
j. How many hours did you work per week?	pay stubs for gross
k. Provide wages earned from the employer listed above for the following gus	arters: Help Wages.
Gross wages Gross wages Gross wages Gross wages	Gross wages Gross wages
earned from earned from earned from earned from	earned from earned from
1/1/2014 to 4/1/2014 to 7/1/2014 to 10/1/2014 to 3/30/2014 6/30/2014 9/30/2014 12/30/2014	1/1/2015 to 4/1/2015 to 3/30/2015 6/30/2015
1-2. Did you work for another employer in the last 18 months?	○Yes ○No
2. During the past 18 months, did you work for any other employers not listed at	bove in question 1? O Yes O No
3. In the past 18 months, which employer did you work for the longest?	
3a. How long did you work for that employer?	Years Months
3b. What type of business did that employer operate? (For example: retail fu sales, legal services, software manufacturing, road construction, etc.) 3c. What kind of work did you do for that employer?	
4. Are you currently working for or do you expect to work for any school or educ employer performing school-related work?	ational institution or a public or nonprofit OYes ONo
4	revious Next
Back to Top Contact EDD Conditions of Use Prive	acy Policy Equal Opportunity Notice Site Map

Answer questions, click on "Next". (Complete questions #8 and 8a through 8g EXACTLY as shown below)

C	Contact EDD Office Locator Forms & Publications Online Services Employment Development Department						
() e	Apply4UI - Application for Unemployment Insurance	ply4UI					
Avail	ability Information Steps: <u>1</u> <u>2</u> <u>3</u> <u>4</u> <u>5</u> <u>6</u> 7 <u>8</u>	9					
1. 2.	What is your usual occupation? Help What other work-related skills do you have?						
3.	Is your usual occupation seasonal?						
4.	Do you expect to return to work for a former employer?						
5.	Do you have a date to start work?						
6.	Are you ready and willing to accept work that matches your occupational skills and educational background?	⊖Yes ⊖No					
7	(Example: If offered a job, would you be able to accept it?)	0					
7. 8	Are you currently self-employed (have your own business of work as an independent contractor) of plan to become self-employed?	O Yes O No					
0.		● Yes ○ No					
	8a. What is the name of your union or non-union trade association? WESTERN FLECTRICAL CO	ONT /					
	8b. What is your union local number? (Enter zero "0" for non-union trade association)						
	8c. What is the telephone number of your union or non-union trade association? (916) 453-0112						
	8d. Does your union or non-union trade association look for work for you? Help O Yes O No						
	8e. Does your union or non-union trade association control your hiring? Help O Yes O No						
	8f. Are you registered with your union or non-union trade association as out of work?						
	8g. Are you going to receive strike benefits?						
	Complete Question #8 a-g as shown. Ba						

Answer questions, click on "Next". (The answers to questions #4, 4c, 4d, 4e and 4f should be exactly as shown below)

Contact EDD Office Locator Forms & Put	olications Online Services
Employment Development Department	
eApply4UI - Application for Unemployment Insurance	
Additional Information Steps: 1 2 3 4 5 6 7	8 9
1. In the past 2 years did you file a claim for Unemployment Insurance (UI) or Disability Insurance (DI)?	
If Yes: provide the most recent type(s) of claim(s) and date(s) Claim Type Month Year 1a Month Year 1b Month Year 2. Are you receiving, or will you receive in the next year, a pension other than Social Security or Railroad Retirement, which is based	
your own work or wages?	
Are you receiving or do you expect to receive workers Compensation? Here Are you currently attending or are you planning to attend school or training?	● Yes ○ No
If Yes: 4a. School Start Date (m. td/yyyy) 4b. Ending Date of Current Session (n. the first Monday and 4c. School Name 4d. School Telephone Number	i d
4e. What are the days and hours you are attending or plan to attend school or training? (Maximum 150 characters)	
NOTE: If you are in State Approved Apprenticeship, Union or Non-union Journey Level training, mail your training certificate w Claim Form, DE 4581, for the weeks(s) of training.	Jote: Read this!!
4f. Is your school or training program authorized or funded by:	
 Workforce Investment Act (WIA) Employment Training Panel (ETP) Trade Adjustment Assistance (TAA) California Work Opportunity and Responsibility to Kids (CalWORKS) State Approved Apprenticeship Union or Non-union Journey Level Not authorized by any of the above 	
5. Are you now or have you been in the last 18 months an officer of a corporation or union or the sole or major stockholder of a	⊖Yes ⊖No
 6. Did you serve as elected public official or Governor-exempt appointee in the last 18 months? 7. If the EDD finds that you do not have sufficient wages in the Standard Base Period to establish a valid UI claim, do you want to atte to establish a claim using the Alternative Base Period? 	○Yes ○No empt ○Yes ○No
Previous Next	
Back to Top Contact EDD Conditions of Use Privacy Policy Equal Opportunity Notice Site Mag	

<i>O.</i> Gov	State of California Employment Development	Department	Office Locator Forms & Publication Search This Site	ns Online Services
eApply4UI - Disaster Unempl	Application for Unemployment Insurance oyment Assistance	Steps: 1 2 3	4 <u>5 6</u> Z 8	9 9
1. Are you unem	ployed as a direct result of a recent disaster in California, s	uch as an earthquake, flood,	mudslide, fire, etc.?	:Yes O No
		Previous	Next	
	Back to Top Contact EDD Conditions of Use I	Privacy Policy Equal Opj	portunity Notice Site Map	

Review your answers, click on "Next".

	Contact EDD Office Locator Forms & Publications Online Service
Final Avenue of California	t Department
.GOV	
Apply4UI - Application for Unemployment Insurance	eApply4UI
ication Review	Steps: 1 2 3 4 5 6 7 8 9
ALERT! Your application for unemploy	ment insurance has not yet been submitted!
To submit it, you must click on the Submit Application button at the entries for accuracy and completeness. If changes are needed, click the make any required ch	bottom of the page. Before clicking the "Submit" button, please review your e Edit Application button, the title for the section, or the appropriate step and anges before returning here.
After you submit your application, you will receive the Confirmation sul	page which will have a confirmation number. This number is your proof of bmission.
Applicant Information	
Social Security Number (SSN) or EDD Client Number (ECN)	
Did the Social Security Administration issue this SSN to you?	
If you have used any other Social Security Numbers, please list them	
Date of Birth Gender:	
Claimant Name. First Name Middle Initial Last N	lame
Is this the name that appears on your social security card?	
If you have used any other names, please list them	
Do you have a state-issued Driver's License or ID card?	
If Yes:	
Name of issuing state or entity Driver's License or ID Nu	Imber
Preferred spoken language? Preferred written language?	?
Contact Information	
What is your mailing address?	
Number and Street / P.O. Box and Number	
City Stat	te ZIP Code
Is your residence address the same as your mailing address?	
If you do not live in California, please provide the name of the county or where you live.	county-equivalent (e.g. parish, borough, census area, independent city, etc.)
Telephone Number Telephone Type	
Citizenship & Statistical Information	
Are you a U.S. citizen or national?	
The following information is collected for statistical purposes only.	
Education	Are you a Veteran?
What race or ethnic group do you identify with?	Do you have a disability?

The EDD o	i considers your la	st employer to	be the very last	employer you p	hysically work	ed for regard	diess if it was a	a full-time, p	art-time, or a
temporary Business N	employer.	niovor							
Malling Ad	drace:	ipioyer							
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City	a ouccurre.o. c	Jox and Homes			State	ZID Cod	la l		
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What is the person who	e fuil name (first) o was your imme	and last) of the ediate superviso	or?						
is the locat	lion or physical a	ddress of your	very last employ	yer the same as	their mailing	address?			
Last Date !	Worked 5/1/20	15							
Enter below	w your dally gros	s wages earne	d from Sunday t	o your Last Dat	e Worked, wh	ether you ha	ve been paid	or not.	
Note: Do N	OT Include Hol	day Pay, Vacat	tion Pay Several	nce Pay, In-Lieu	I-Of-Notice Pa	ay, Other Pay	(Example: Bo	onus Pay). R	eport these payments
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Total Gross	1	
4/26/2015	4/27/2015	4/28/2015	4/29/2015	4/30/2015	5/1/2015	5/2/2015	Earnings		
importanti Your last er penaities. Reason No	mployer will be o Longer Working	ontacted to ver	ify the reason yo	ou are no longe	r working. Pro	viding false i	nformation is (considered fr	aud and may result In
Please pro	vide a brief expla	anation (Maxim	um 150 characte	ers):					
f you receil payment be	ved, or if you exp slow.	pect to receive,	any payments f	rom your very la	ast employer o	or any other (employer othe	r than you re	gular salary, report the
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What is your usual occupation?	
What other work-related skills do you have?	
Is your usual occupation seasonal?	
Do you expect to return to work for a former employer?	
Do you have a date to start work?	
Are you ready and willing to accept work that matches your occupational skills and educ background? (Fxample: If offered a job, would you be able to accept it?)	cational
Are you currently self-employed (have your own business or work as an independent or	ontractor) or plan to become self-employed?
Are you a member of a union or a non-union trade association?	,
If Vae-	
What is the name of your union or non-union trade association? What is your union local number?	WECA 0
(Enter zero "0" for non-union trade association)	
What is the telephone number of your union or non-union trade association?	(916) 453-0112
Does your union or non-union trade association rook for work for you?	Tes
Are you registered with your union or non-union trade association as out of work?	Yes
Are you going to receive strike benefits?	No
Are you receiving or do you expect to receive Workers' Compensation?	
School Name WECA School Telephone Number (916) 889-7124	
School Name WECA School Telephone Number (916) 889-7124 What are the days and hours you are attending or plan to attend school or training? Monday-Friday 7:00am-3:30pm	? (Maximum 150 characters)
School Name WECA School Telephone Number (916) 889-7124 What are the days and hours you are attending or plan to attend school or training? Monday-Friday 7:00am-3:30pm Is your school or training program authorized or funded by: State Approved App	? (Maximum 150 characters) renticeship
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Print the confirmation for your records. If you are unable to print the confirmation at least write down the confirmation number or take a picture with your cell phone. If there are any issues with your filing, EDD will ask you for this number.

Congratulations, you are done!

If you have any questions, please contact WECA at toll free (877) 444-9322.