



# UNEMPLOYMENT INSURANCE FOR PART-TIME FACULTY

**Winter 2021**

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California Teachers Association Staff

Thanks to Karen Roberts from Long Beach Community College  
CHI for creating the original version of this presentation!



# LATEST INFO ON FEDERAL BENEFITS EXTENSION

On March 11, 2021, President Biden signed legislation to extend federal unemployment benefits that were set to expire on March 13, 2021.

- There will not be a gap in eligibility for the extended benefits, but the details are not finalized yet.
- Maintains the current federal increase for all unemployment benefits, which adds a \$300 federal supplement payment through Sept. 6.
- The Senate made up to \$10,200 in unemployment compensation tax-free for households with annual incomes under \$150,000.
  - If you qualify and did not already pay taxes on your unemployment, now you don't have to, for up to \$10,200.
  - If you've already filed your 2020 return and paid taxes on the unemployment benefits, you can file an amended return to get the money back.

# COVID-19 FEDERAL CARES ACT PROVISIONS FOR UNEMPLOYMENT

**Pandemic Emergency Unemployment Compensation** – A 13-week benefit extension for people who have used all benefits available in their regular Unemployment Insurance claim beyond the normal 26 weeks.

If you exhaust this extension, you may qualify for a FED-ED extension.

**Pandemic Unemployment Assistance \*** – New program to provide unemployment benefits for people who don't usually qualify for regular state Unemployment Insurance.

\*This additional assistance is not the focus of this workshop. Check with EDD to see if you qualify for additional work you perform outside of the college.



# FEDERAL/STATE EXTENDED DURATION (FED-ED) EXTENSION

- Provides up to 20 weeks of additional benefits for people who used all of their unemployment benefits.
- The FED-ED program will continue until California's unemployment rate drops below a certain level. At this time, there is no end date for the extended benefit period.
- Review the EDD website for more details on eligibility.

# ARE YOU ELIGIBLE FOR UNEMPLOYMENT?

- **Yes (for your work as part-time faculty)**
  - Part-time faculty are at-will, temporary employees;
  - Part-time faculty are contracted on a semester by semester basis and do not earn compensation between semesters;
  - Assignments are subject to funding, enrollment, and FT loads
  - So even with a tentative assignment, you do not have a **reasonable assurance** of returning to work (Cervisi, 1989).

# MEETING ELIGIBILITY REQUIREMENTS

- You must:
  - Have received enough wages during the base period to establish a claim. (\$1,300 in the latest quarter.)
  - Be totally or partially unemployed.
  - Be unemployed through **no fault of his/her own**.
  - Be physically able to work.
  - Be available for work which means to be ready and willing to immediately accept work.
  - ~~Be actively looking for work.~~ **Currently waived**
  - Meet eligibility requirements each week benefits are claimed.

# “UNDER-EMPLOYMENT” BENEFIT

- In California, you can receive Unemployment Insurance because of reduced workload.
  - For instance, if you taught three classes in Fall, but only teach one in Spring, you may be able to continue receiving your benefits by:
    - Filling out and returning the bi-weekly form and entering the actual hours worked.
    - Those earnings will be deducted from your weekly benefit amount and if they are less than the benefit amount, you will receive the difference.
      - If your weekly earnings are \$100 or less, the first \$25 dollars does not count. The amount of earnings more than \$25 is subtracted from your weekly benefit amount and you are paid the difference, if any.
      - If your weekly earnings are \$101 or more, the first 25 percent does not count. The amount of earnings remaining is subtracted from your weekly benefit amount and you are paid the difference, if any.
  - You can receive Under-employment until your total award for the year is used up.



# APPLYING

- If you work at two or more districts, you do not have to wait until the end of the semester of both districts
  - File the day after your last final workday at the first district; then, after each district's last final workday—this is referred to as Under-Employment
- You will need to know:
  - Your hourly rate
  - District Calendars: Make sure start and stop dates for your work are correct.
- On the EDD website, read the section “Apply for UI Benefits” to help you gather all the materials you need.



# APPLYING

- Apply on the day of your final meeting even though you haven't received your final paycheck.
- ~~There is a one-week waiting period after you apply (an EDD week is Sunday – Saturday).~~ **CURRENTLY  
WAIVED DUE TO COVID-19**
- Apply online at:

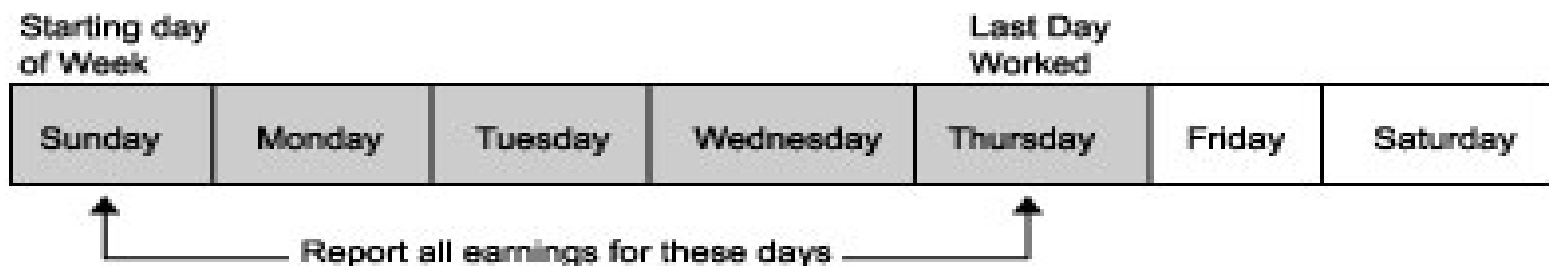
[www.edd.ca.gov](http://www.edd.ca.gov)



# 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:



# **FILLING OUT THE FORM ONLINE...**





## California Employment Development Department

### Application for Unemployment Insurance

Answer the following questions to ensure you use the correct process to file your Unemployment Insurance claim.

\*Indicates required field

1. \*Did you work in another state and/or Canada during the last 18 months? ☐ Yes ☒ No
2. \*Have you applied for Unemployment Insurance benefits in another state or Canada during the last 12 months? ☐ Yes ☒ No
3. \*Did your employer, union, or non-union trade association give you one of the following claim forms for Unemployment Insurance benefits? ☐ Yes ☒ No
  - *Notice of Reduced Earnings (DE 2063)*
  - *Notice of Reduced Earnings (Fisherperson) (DE 2063F)*
  - *Pacific Maritime Association Partial Evidence of Payment Form (PMA 2063)*
  - *Payment Certification (Work Sharing) (DE 4581WS)*
  - *Initial Claim and Payment Certification (Work Sharing Employer) (DE 4511WS)*
4. \*Did you serve in the U.S. military during the last 18 months? ☐ Yes ☒ No
5. \*Did you work for an agency of the federal government during the last 18 months? ☐ Yes ☒ No
6. \*Have you filed an Unemployment Insurance claim in California during the last 12 months? ☐ Yes ☒ No

**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.**

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## California Employment Development Department

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### Verify Your Identity

You will first need to verify your identity on the ID.me site to file your claim online.

If you are unable to verify with ID.me, you will need to file your claim by [phone](#), [mail](#), or [fax](#).



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## Sign in to ID.me

[Or create an ID.me account](#)



Email

Enter your email

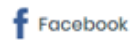
Password

Enter your password

Sign in to ID.me

[Forgot password](#)

Or sign in with



Facebook



Google



LinkedIn

[View more options >](#)

## SECURE YOUR ACCOUNT



With multi-factor authentication (MFA), even if someone guesses your password, they won't be able to sign in as you.

Choose an option below to set up multi-factor authentication



### Text Message or Phone Call

Get a 6-digit code by text message or phone call.

Select



### Push Notification

Approve sign-ins via push notifications sent to the ID.me Authenticator mobile app.

Select



### Code Generator Application

Generate verification codes via code generator apps like ID.me Authenticator.

Select



### FIDO U2F Security Key

Use a security key (a small device that connects to your computer's USB port).

Select



### Mobile YubiKey

Enroll a YubiKey security key for secure mobile authentication.

Select

**SELECT YOUR PREFERRED METHOD  
&  
FOLLOW INSTRUCTIONS  
BASED ON YOUR SELECTION**





### STOP AND READ

This site is to verify your identity to access your state's website for unemployment assistance.

**If you are not filing for unemployment, STOP.**

Criminals are misleading people with scams like fraudulent job offers, winning money, or dating sites in order to try to take over people's identity.

If you were sent to this site for any reason other than government unemployment assistance, [click here](#). Otherwise click below to continue.

**I am filing for unemployment**



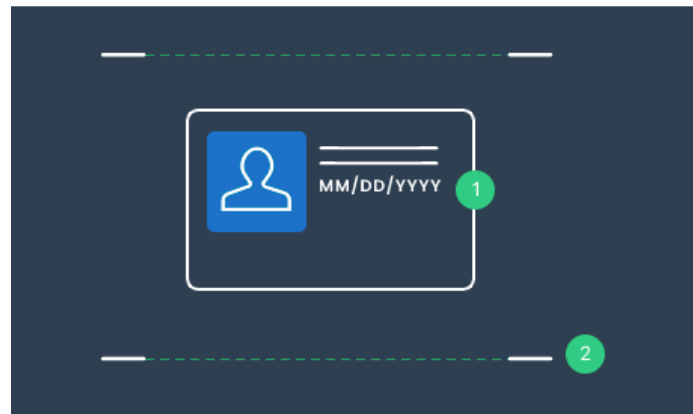
## VERIFY YOUR IDENTITY



### Choose how to submit photos

In order to verify your identity, please make sure:

- 1) Your document is up to date and valid
- 2) Your document is clear and readable
- 3) You take the photo on a well-lit flat surface



Take a photo with my device

YOUR MOBILE PHONE MUST HAVE A CAMERA AND A  
WEB BROWSER.

OR



Upload a photo



+





## VERIFY YOUR IDENTITY



### Take photos with your phone

Enter your mobile phone number, and we'll text you a link to take photos of your document.

Enter your mobile phone number

 (925) 759-

YOUR MOBILE PHONE MUST HAVE A CAMERA AND A WEB BROWSER.

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WAITING FOR YOUR PHOTOS...



We sent a text message to  
**+1 925-759-3827**

Please click the link in the text message and  
follow the instructions to take your photos.

**This screen will automatically refresh  
once your photos are received.**

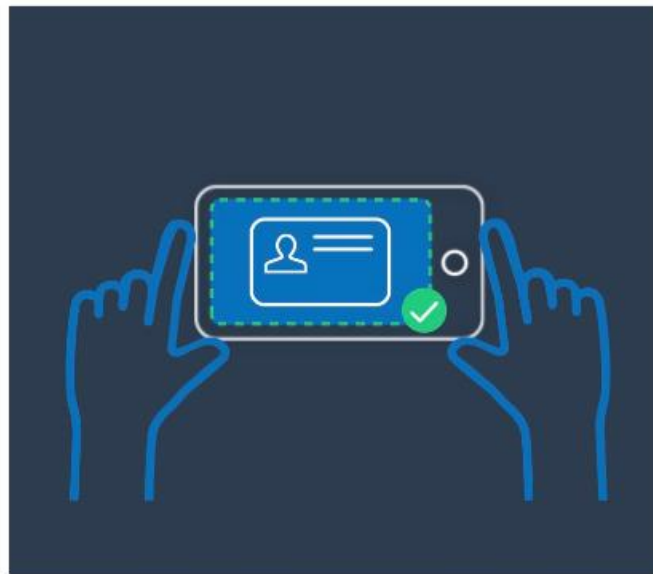


Didn't receive the text message? [Send it again](#)

verify.id.me

ID.me

TAKE PHOTOS WITH YOUR PHONE



Quick Tip

Place document on a flat, uncluttered surface, use landscape orientation and ensure your document photo is clear and readable.

I'm ready to take a photo

**FOLLOW INSTRUCTIONS  
FOR TAKING  
AND  
SUBMITTING  
PICTURE OF FRONT  
AND  
BACK OF YOUR LICENSE**



## VERIFY YOUR IDENTITY



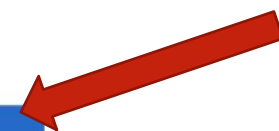
### Follow the steps below

- 1) Grant permission to use your webcam
- 2) Click "scan my face" to begin video selfie
- 3) Liveness detection will commence with a series of colorful flashing lights
- 4) Your results will be displayed

**FOLLOW INSTRUCTIONS  
FOR TAKING  
VIDEO SELFIE**

**Note:** This technology is compliant with W3C accessibility standards for users with photosensitive considerations (photosensitive epilepsy).

Start video selfie



### VERIFY YOUR IDENTITY



### Enter your Social Security number

The Social Security number is used as a unique identifier to confirm identity. This will not affect your credit score.

Social Security Number \*

#####

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**ENTER YOUR SOCIAL  
SECURITY NUMBER  
THEN CLICK ON CONTINUE**





## VERIFY YOUR IDENTITY



### Confirm your information

We will securely use the following information to verify your identity against trusted sources.

What does this mean? ^

#### Personal Information

First Name ROXANE

Middle Name [REDACTED]

Last Name [REDACTED]

Gender female

Date of birth 12/ [REDACTED]

#### Home address

EDIT

Street 185 S [REDACTED]

City ORANGE

State CA

Zip Code 92866

#### Phone number

EDIT

Mobile Phone 925-759 [REDACTED]



The information I've provided is correct, and I accept the use of [Fair Credit Reporting Act](#) data to verify my identity.

What is The Federal Fair Credit Reporting Act? ^

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**CLICK TO CONFIRM  
YOUR INFO IS CORRECT  
THEN CLICK ON CONTINUE**

rify.id.me/en/d4e44bf1119b497d8faf569a456510a9/identity/identity\_license/99d8608820aa4f619a1:



### VERIFY YOUR IDENTITY

Your information is being checked for authenticity.  
This can take up to 10 seconds.

.

Waiting for processing to complete ...

∨ [English](#)

[What is ID.me?](#) | [Terms of Service](#) | [Privacy Policy](#)

## AUTHORIZE CALIFORNIA EDD

**WE'VE VERIFIED YOUR IDENTITY!**

Before we send you back to California EDD, we need your permission to share your verified identity information.

Please note that only information obtained from the verification process will be shared.

California EDD will receive:

- |                     |               |
|---------------------|---------------|
| ✓ Birth Date        | ✓ Last Name   |
| ✓ City              | ✓ Middle Name |
| ✓ Email             | ✓ Postal Code |
| ✓ First Name        | ✓ State       |
| ✓ Full SSN          | ✓ Street      |
| ✓ Group Association |               |

**Allow**

Deny

**CLICK ON CONTINUE  
AND YOU WILL BE ROUTED  
BACK TO THE EDD  
“Log in to Benefit Programs Online”  
page**

ID.me

+

Employment  
Development  
Department  
State of California

## COMPLETE YOUR SIGN IN



Confirm your phone number

Please check your phone for the 6-digit code that we just sent to you at (\*\*\*) \*\*\*-827.

Enter the 6-digit code

Didn't receive the code? [Send it again](#)

Continue

If you've changed phone numbers or carriers from when you previously set up multi-factor authentication, please [update your settings here](#).

**ENTER CONFIRMATION  
CODE SENT TO YOU VIA TEXT  
THEN CLICK ON CONTINUE**

ID.me

+

**EDD** Employment  
Development  
Department  
State of California




### STOP AND READ

This site is to verify your identity to access your state's website for unemployment assistance.

**If you are not filing for unemployment, STOP.**

Criminals are misleading people with scams like fraudulent job offers, winning money, or dating sites in order to try to take over people's identity.

If you were sent to this site for any reason other than government unemployment assistance, [click here](#). Otherwise click below to continue.



**I am filing for unemployment**

▼ [English](#)



California

# Employment Development Department

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## ➔ Applicant Information

1 General Information

2 Last Employer Information

3 Employment History

4 Additional Information

5 Summary

6 Confirmation

To begin filing your claim, you will need to provide additional identification information.

\*Indicates required field

1. Social Security number (SSN)
2. Date of Birth
3. Applicant Name

XXX-XX-1264 ☐ Unhide

12/17/

First Name: ROXANE

Middle Initial: J

Last Name: S

4. \*Gender
5. If you have used any other names, list them. ?

**CLICK ON GENDER  
THEN CLICK ON  
CONTINUE**

☐ Female ☐ Male

First Name

Last Name

Cancel

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# California Employment Development Department

## Contact Information

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Last  
Employer  
Information

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Provide your personal contact information, including, your mailing address. If you have a Post Office (PO) Box or Private Mail Box (PMB), you must also provide your residence address.

\*Indicates required field

1. What is your mailing address?

\*Location:

\*Number, Street, and Apartment/Unit or PO Box Number:

\*City:

\*State:

\*ZIP Code:

2. \*Is your residence address the same as your mailing address?

☒ Yes ☐ No

3. If you do not live in California, select the name of the county or county-equivalent (for example, parish, borough, census area, independent city, etc.) where you live.

4. Phone Number

4a. Phone Type

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## Citizenship & Statistical Information

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\*Indicates required field

### Citizenship Information


Provide information about your citizenship. If you are not a U.S. citizen or national you will need to provide your work authorization information.

1. \*Are you a U.S. Citizen or National?

☒ Yes ☐ No

### Statistical Information

Provide general statistical information and select your preferred method to receive spoken or written communication.

1. \*Education 


Masters or Doctorate Degree ▼

2. \*Are you a Veteran?

☐ Yes ☒ No

3. \*What race or ethnic group do you identify with?

I Choose Not to Answer ▼

4. \*Do you have a disability? 

I Choose Not to Answer ▼

5. \*Preferred spoken/written language?

Spoken Language: English ▼

Written Language: English ▼

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## ➔ Last Employer Name



General  
Information



Last  
Employer  
Information



Employment  
History



Additional  
Information



Summary



Confirmation

The EDD considers your last employer to be the very last employer you performed work for regardless if it was a full-time, part-time, or a temporary employer.

If you worked for a temporary agency, a labor contractor, an agent for actors or actresses, or an employer where wages are reported under a corporate name, your wages may have been reported under that employer name. If you worked for In-Home Supportive Services (IHSS), the welfare recipient for whom you provided the in-home supportive service is your employer, not the county.



You may refer to your check stub(s) or W-2(s) to obtain the name of your last employer.


### List of Employers

Our records indicate you worked for the employer(s) listed below within the last 18 months. Select your last employer from the list below.

If your last employer is not listed on the page(s) provided, select Last Employer Not Listed.

If there are multiple pages select the numbers below to view additional employers.

Employer Legal Name  

Doing Business As (DBA) 

☒ CALIFORNIA TEACHERS ASSOCIATION

☐ Last Employer Not Listed

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## ➔ Last Employer Details

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- Change your answer to question 2 to No and provide your employer's worksite or physical address. A PO Box or PMB address is listed as your employer's mailing address.

Your last employer's mailing address has been pre-populated based on the information provided to the EDD by the employer you selected, you will not be able to modify this information. Provide the additional last employer details.

If you selected an IHSS recipient as your last employer, provide the recipient's name and mailing address as your last employer.

\*Indicates required field

### Last Employer Details

#### 1. Last employer selected

\*Legal Name of Last Employer: CALIFORNIA TEACHERS ASSOCIATION

Mailing Address:

\*Number and Street/PO Box and Number: PO BOX 921

\*City: BURLINGAME

\*State: CA

\*Zip Code: 94011

Phone Number of Last Employer: 6505526500

2. \*Is the worksite or physical address of your last employer the same as the mailing address? ☐ Yes ☒ No

If No, what is the worksite or physical address and phone number of your very last employer?

Number and Street: 281 N Rampart Street

City: Orange

State: CA - California

Zip Code: 92868

Phone Number at This Address: 7149788061

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## Last Employer

Employer Name	Employer Mailing Address	Employer Physical Address
CALIFORNIA TEACHERS ASSOCIATION	PO BOX 921 BURLINGAME, CA 94011 Phone Number: 6505526500	261 N Rampart Street Orange, CA 92868 Phone Number: 7149738861

Modify Delete

## Last Employer Information

1. \*What is the first and last name of your immediate supervisor? ⓘ
2. \*Last Date Worked ⓘ

Fred Flint

12/10/2020 (MM/DD/YYYY)

2a. Enter your daily gross wages earned from Sunday to your Last Date Worked, whether you have been paid or not ⓘ

**Note:** Do NOT include Holiday Pay, Vacation Pay, Severance Pay, In-Lieu-Of-Notice Pay or Other Pay, including, but not limited to, bonus pay or commission pay. Report these payments in Question 4 below.

Sunday 12/06/2020	\$	
Monday 12/07/2020	\$	195
Tuesday 12/08/2020	\$	195
Wednesday 12/09/2020	\$	195
Thursday 12/10/2020	\$	195
Friday 12/11/2020	\$	
Saturday 12/12/2020	\$	
Total gross earnings:	\$	780.00

3. \*Reason No Longer Working. ⓘ

**Important!**

Your last employer will be contacted to verify the reason you are no longer working. Providing false information is considered fraud and may result in penalties.

Separation Category: Laid Off/No Work

Separation Explanation: Assignment completed

4. If you received, or if you expect to receive, any payments from your very last employer or any payment below. ⓘ

4a. ☐ Holiday Pay ⓘ

Amount From Date

4b. ☐ Vacation Pay ⓘ

4c. ☐ Severance Pay ⓘ

4d. ☐ In-Lieu-Of-Notice Pay

4e. ☐ Other Pay ⓘ

4e.1. Explain Other Pay.

Select One:  
Related to the coronavirus (COVID-19)  
Assignment completed  
Bad/increment weather  
Business closed/Plant shutdown (temporarily or permanently)  
Business relocated/Business outsourced  
No work available/Not enough work  
No work due to earthquake/flood/fire/drought  
Position eliminated  
Professional athlete between sports seasons  
Reduction in workforce  
School employee between semesters or terms, likely to return  
School employee between semesters or terms, NOT likely to return  
Season ended  
Temporary layoff  
Vacation/Holiday shutdown (temporary)  
Work is slow.

(Maximum 150 Characters)

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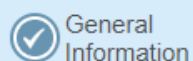
Save as Draft

Cancel

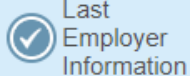
Next

Not your department chair. Should be an administrator.

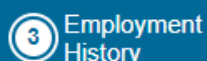
This is the reason.



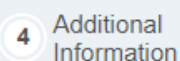
General  
Information



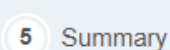
Last  
Employer  
Information



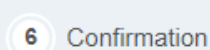
Employment  
History



Additional  
Information



Summary



Confirmation

Provide your employment information for the last 18 months.

If you worked for a temporary agency, a labor contractor, an agent for actors, or an employer where wages are reported under a corporate name, your wages may have been reported under that employer or payroll company. If necessary, refer to your check stub(s) or W-2(s) to obtain the name(s) of your employer.

**NOTE:** Failure to report all employers, periods of employment, and total wages may result in your benefits being delayed or denied. Provide as much accurate information as possible for each employer.

\*Indicates required field

### Last Employer

You previously provided CALIFORNIA TEACHERS ASSOCIATION as your last employer. If you worked for CALIFORNIA TEACHERS ASSOCIATION from 07/01/2019 to 09/30/2020, add additional information below.

### Update Employment Information

Select Yes to all the employers you worked for during 07/01/2019 to 09/30/2020.

For every employer you worked for select Update or Modify to provide additional information.

Employer Legal Name	Doing Business As (DBA) ?	*Did you work for this employer?	Employer Details	Status
CALIFORNIA TEACHERS ASSOCIATION	CALIFORNIA TEACHERS ASSOCIATION	<input checked="" type="radio"/> Yes <input type="radio"/> No	Update	Incomplete

### Add Employment Information

Add additional employer information if applicable.



## Employer Details

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- Did you work full time or part time? is required.

Provide additional information for this employer.

Some sections may be pre-populated with information provided directly from your employer.

\*Indicates required field

### 1. Employer Information

\*Employer Name: CALIFORNIA TEACHERS A

\*Mailing Address: PO BOX 921

\*City: BURLINGAME

\*State: CA

\*ZIP Code: 94011

2. \*First day you worked for this employer?

06/08/2020 (MM/DD/YYYY)

3. \*Last day you worked for this employer?

12/10/2020 (MM/DD/YYYY)

4. \*Did you work full time or part time?

☒ Part Time ☐ Full Time

5. How much did you earn per hour?

65

6. \*On average how many hours did you work per week?

9

7. Provide wages earned from the employer listed above for the following quarters:

Gross wages earned from 10/01/2020 to 12/31/2020: 2340

Gross wages earned from 07/01/2020 to 09/30/2020: 4095

Gross wages earned from 04/01/2020 to 06/30/2020: 5850

Gross wages earned from 01/01/2020 to 03/31/2020: 3510

Gross wages earned from 10/01/2019 to 12/31/2019: 2340

Gross wages earned from 07/01/2019 to 09/30/2019: 4095

Base Wages

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## ➔ Employer Business Type



Select the business category operated by the employer you worked for the longest in the past 18 months.

Once you choose the business type select Save.

\*Indicates required field

\*Business Category: SERVICES

### Category Results

Select	Business Type
<input type="radio"/>	Amusement & Recreation, Except Motion Pictures
<input type="radio"/>	Automotive Repair & Parking
<input type="radio"/>	Business
<input checked="" type="radio"/>	Education
<input type="radio"/>	Engineering, Accounting, Research, Management & Related Services.
<input type="radio"/>	Health
<input type="radio"/>	Hotels, Rooming Houses, Camps & Other Lodging Places
<input type="radio"/>	Legal
<input type="radio"/>	Membership Organization
<input type="radio"/>	Misc.Repair
<input type="radio"/>	Motion Pictures
<input type="radio"/>	Museums, Art Galleries, Botanical & Zoological Gardens
<input type="radio"/>	Personal Services Laundry & Cleaning, Beauty & Barber Shops, Etc.
<input type="radio"/>	Private Households
<input type="radio"/>	Services Not Elsewhere Classified
<input type="radio"/>	Social services

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## → Availability Information

✓ General Information

✓ Last Employer Information

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Answer the questions about your work-related skills and availability then select Next.

\*Indicates required field

1. \*What type of work do you normally perform? ?

FACULTY  
MEMBER,

Add Work Type

2. \*What other type of work can you perform? ?

FACULTY  
MEMBER,

Add Work Type

3. \*Is the type of work you normally perform seasonal? ?

☐ Yes ☒ No

4. \*Do you expect to return to work for a former employer?

☐ Yes ☒ No

5. \*Do you have a date to start work? ?

☐ Yes ☒ No

6. \*Are you ready and willing to accept work that matches your work skills and educational background? (Example: If offered a job, would you be able to accept it?)

☒ Yes ☐ No

7. \*Are you currently self-employed (have your own business or work as an independent contractor) or plan to become self-employed? ?

☐ Yes ☒ No

8. \*Are you a member of a union or a non-union trade association? ?

☒ Yes ☐ No

8a. \*What is the name of your union or non-union trade association? ?

LBUFA

8b. \*What is your union local number? (Enter zero "0" for non-union trade association.) ?

1234

8c. What is the phone number of your union or non-union trade association? ?

7144561245

8d. \*Does your union or non-union trade association look for work for you? ?

☐ Yes ☒ No

8e. \*Does your union or non-union trade association control your hiring? ?

☐ Yes ☒ No

8f. \*Are you registered with your union or non-union trade association as out of work?

☐ Yes ☒ No

8g. \*Are you going to receive strike benefits?

☐ Yes ☒ No

The purpose of this question is to determine if you belong to a union that controls your hiring. You do not.

"Are you returning to work?"  
NO, you have no reasonable assurance!

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## California Employment Development Department

### ➔ Additional Information



Answer the questions and select Next to continue.

\*Indicates required field

1. \*Are you receiving, or will you receive within the next two weeks, a pension or retirement that is **not** Social Security or Railroad Retirement, which is based on your own work or wages? ☐ Yes ☒ No
2. \*Are you receiving or do you expect to receive workers' compensation? ☐ Yes ☒ No
3. \*Are you currently attending or have a scheduled start date to attend school or training? ☐ Yes ☒ No
4. \*Are you now or have you been in the last 18 months an officer of a corporation, officer of a union, or the sole or major stockholder of a corporation? ☐ Yes ☒ No
5. \*Did you serve as elected public official or Governor-exempt appointee in the last 18 months? ☐ Yes ☒ No

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## California Employment Development Department

### ➔ Disaster Information



Answer the disaster-related question(s) and select Next to continue.

\*Indicates required field

1. \*Are you unemployed as a direct result of a recent disaster (for example: COVID-19, earthquake, flood, mudslide, or fire) in California? ☐ Yes ☒ No

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# BASE WAGES

- **Wages to Establish a Claim**
- Employers report wages to the Department for each employee. The department uses this information to decide if an individual earned enough wages in a base period to establish a UI claim. A base period is a specific 12-month period. For example, if a claimant files a claim that begins in April, May, or June, the claim is calculated based on wages paid to the claimant between January 1 and December 31 of the prior year.
- The minimum weekly benefit amount is \$40 and the maximum weekly benefit amount is \$450 (+\$300 until September 6). For more information about how the Department calculates a UI claim, review, [How Unemployment Benefits are Computed \(DE 8714AB\)](#), [A Guide to Benefits and Employment Services \(DE 1275A\)](#), and the [California Employer's Guide \(DE 44\)](#).

# DETERMINING BENEFIT MUST HAVE EARNED AT LEAST \$1300 IN ONE QUARTER

If your claim begins in:

January-February-March

April-May-June

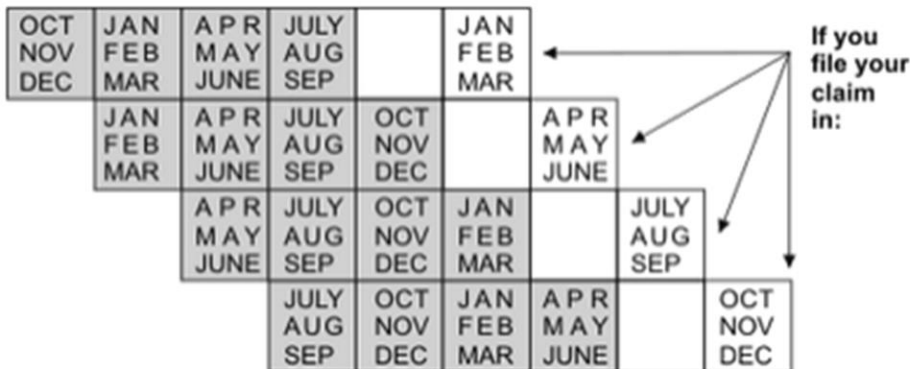
July-August-September

October-November-December

Your Standard Base Period is the prior 12 months,  
ending the last day of:  
September  
December  
March  
June

The diagram below reflects the same information as above.

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



If you are applying early 2021, you will need total earnings from ALL jobs going back to Oct. 1, 2019.





# REPORT ANY WAGES YOU ARE EARNING

You must report your gross wages (before your taxes are taken out) for each week you work and certify for benefits, even if you don't get paid until later.

Be sure to accurately report on **all** earnings during your weekly claim certification.

If you collect more UI benefits than you are eligible for because you fail to report earnings, you may be committing fraud and may be prosecuted.

# REASONABLE ASSURANCE? NO!

## Cervisi Decision

*Cervisi v. California Unemployment Insurance Appeals Board* (1989) 256 Cal.Rptr.142.

The *Cervisi* decision states, “an assignment that is contingent on enrollment, funding, or program changes is not a ‘reasonable assurance’ of employment.”



# **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.



## Unemployment Insurance Application Summary

-  General Information
-  Last Employer Information
-  Employment History
-  Additional Information
- 5** Summary
- 6** Confirmation

Your application for Unemployment Insurance has not yet been submitted.

Review the information in each section for accuracy. For changes or corrections, select Edit.

You will **not** be able to change your answers once you select Submit.

To complete the application process, select Submit.

\*Indicates required field

### Applicant Information

[Edit](#)

1. Social Security number (SSN) XXX-XX-XXXX
2. Date of Birth 12/17/
3. Applicant Name  
First Name: ROXANE  
Middle Initial: J  
Last Name: SC.....
4. Gender Female
5. If you have used any other names, list them.

### Contact Information

[Edit](#)

1. What is your mailing address?

Location: **United States**  
Number, Street, and Apartment/Unit or PO Box Number: **185 S**

City: **Orange**

State: **CA - California**

ZIP Code: **92668**

2. Is your residence address the same as your mailing address?

**Yes**

3. If you do not live in California, select the name of the county or county-equivalent (for example, parish, borough, census area, independent city, etc.) where you live.

4. Phone Number

**714551**

4a. Phone Type

**Cell Phone**

## Citizenship Information

[Edit](#)

1. Are you a U.S. Citizen or National?

**Yes**

## Statistical Information

[Edit](#)

1. Education

**Masters or Doctorate Degree**

2. Are you a Veteran?

**No**

3. What race or ethnic group do you identify with?

**I Choose Not to Answer**

4. Do you have a disability?

**I Choose Not to Answer**

5. Preferred spoken/written language?

Spoken Language: **English**

Written Language: **English**

## Last Employer

[Edit](#)

Employer Name	Employer Mailing Address	Employer Physical Address
CALIFORNIA TEACHERS ASSOCIATION	PO BOX 921 BURLINGAME, CA 94011 Phone Number: 6505526500	281 N Rampart Street Orange, CA 92868 Phone Number: 7149788861

## Last Employer Information

[Edit](#)

1. What is the first and last name of your immediate supervisor? Fred Flint
2. Last Date Worked 12/10/2020

2a. Enter your daily gross wages earned from Sunday to your Last Date Worked, whether you have been paid or not.

**Note:** Do NOT include Holiday Pay, Vacation Pay, Severance Pay, In-Lieu-Of-Notice Pay or Other Pay, including, but not limited to, bonus pay or commission pay. Report these payments in Question 4 below.

Sunday 12/06/2020: \$  
Monday 12/07/2020: \$ 195  
Tuesday 12/08/2020: \$ 195  
Wednesday 12/09/2020: \$ 195  
Thursday 12/10/2020: \$ 195  
Friday 12/11/2020: \$  
Saturday 12/12/2020: \$  
Total gross earnings: \$ 780

3. Reason No Longer Working.

**Important!**

Your last employer will be contacted to verify the reason you are no longer working. Providing false information is considered fraud and may result in penalties.

Separation Category: Laid Off/No Work

Separation Explanation: Assignment completed

4. If you received, or if you expect to receive, any payments from your very last employer or any other employer other than your regular wages, report the payment below.

	Amount	From Date	To Date
4a. Holiday Pay			
4b. Vacation Pay			
4c. Severance Pay			
4d. In-Lieu-Of-Notice Pay			
4e. Other Pay			

## Update Employment Information

[Edit](#)

Employer Legal Name	Doing Business As (DBA)	Did you work for this employer?
CALIFORNIA TEACHERS ASSOCIATION	CALIFORNIA TEACHERS ASSOCIATION	Yes

#### 1. Employer Information

Employer Name: CALIFORNIA TEACHERS ASSOCIATION

Mailing Address: PO BOX 921

City: BURLINGAME

State: CA

ZIP Code: 94011

- First day you worked for this employer? 06/08/2020
- Last day you worked for this employer? 12/10/2020
- Did you work full time or part time? Part Time
- How much did you earn per hour? 65
- On average how many hours did you work per week? 9
- Provide wages earned from the employer listed above for the following quarters:
  - Gross wages earned from 10/01/2020 to 12/31/2020: 2340
  - Gross wages earned from 07/01/2020 to 09/30/2020: 4095
  - Gross wages earned from 04/01/2020 to 06/30/2020: 5850
  - Gross wages earned from 01/01/2020 to 03/31/2020: 3510
  - Gross wages earned from 10/01/2019 to 12/31/2019: 2340
  - Gross wages earned from 07/01/2019 to 09/30/2019: 4095

#### Employment History

Edit

- From 07/01/2019 to 09/30/2020, did you work for any other employers not listed above? No
- From 07/01/2019 to today, which employer did you work for the longest? California Teachers Associatio
  - How long did you work for that employer?
    - Years: 1
    - Months: 2
  - Select the industry that best describes this employer. City/County/School District/Special District
  - What type of business did that employer operate? (For example: retail furniture sales, legal services, software manufacturing, road construction, etc.) Education
  - What kind of work did you do for that employer? FACULTY MEMBER, COLLEGE OR UNIVERSITY

## School Employee Information

[Edit](#)

1. Did you work for or provide services to or on behalf of any educational institution between 07/01/2019 to today?

## Availability Information

[Edit](#)

1. What type of work do you normally perform? FACULTY MEMBER, COLLEGE OR UNIVERSITY
2. What other type of work can you perform? FACULTY MEMBER, COLLEGE OR UNIVERSITY
3. Is the type of work you normally perform seasonal? No
4. Do you expect to return to work for a former employer? No
5. Do you have a date to start work? No
6. Are you ready and willing to accept work that matches your work skills and educational background? (Example: If offered a job, would you be able to accept it?) Yes
7. Are you currently self-employed (have your own business or work as an independent contractor) or plan to become self-employed? No
8. Are you a member of a union or a non-union trade association? Yes
  - 8a. What is the name of your union or non-union trade association? LBUFA
  - 8b. What is your union local number? (Enter zero "0" for non-union trade association.) 1234
  - 8c. What is the phone number of your union or non-union trade association? 71445
  - 8d. Does your union or non-union trade association look for work for you? No
  - 8e. Does your union or non-union trade association control your hiring? No
  - 8f. Are you registered with your union or non-union trade association as out of work? No
  - 8g. Are you going to receive strike benefits? No

## Additional Information

[Edit](#)

1. Are you receiving, or will you receive within the next two weeks, a pension or retirement that is not Social Security or Railroad Retirement, which is based on your own work or wages? No
2. Are you receiving or do you expect to receive workers' compensation? No
3. Are you currently attending or have a scheduled start date to attend school or training? No
4. Are you now or have you been in the last 18 months an officer of a corporation, officer of a union, or the sole or major stockholder of a corporation? No
5. Did you serve as elected public official or Governor-exempt appointee in the last 18 months? No

## Disaster Information

[Edit](#)

1. Are you unemployed as a direct result of a recent disaster (for example: COVID-19, earthquake, flood, mudslide, or fire) in California?

No

## Certification Preference

\*Only certify using UI Online or EDD Tele-Cert<sup>SM</sup>.

☒ Yes ☐ No

If you select yes, the EDD will not mail the paper continued form (DE 4581) to you. Customers on the Partial or Work Sharing claims are unable to certify for benefits online at this time but can access the many other features of UI Online.

Note: It may be necessary to send some documents via U.S. mail.

[Previous](#)[Save as Draft](#)[Cancel](#)[Submit](#)



-REVIEW  
--PRINT  
---SUBMIT

- Print a copy of the online form for your records and to refer to in any future correspondence with EDD.
- ~~Remember, there is a one week waiting period for which you will not receive benefits. That one week always begins the Sunday after you file.\*~~

**\*Waiting period waived at this time due to COVID 19.**



# NOW WHAT? PROCESS

- You will receive a Notice of Unemployment Insurance Claim Filed in the mail:
  - Check that the information is correct; you have 10 days to make any corrections.
- You will also receive a “Notice of Unemployment” Insurance Award . This notice will have:
  - the beginning and ending dates of your claim,
  - the maximum benefit amount you are entitled to,
  - the weekly amount you will receive.
- These are also available in your online EDD account.





# NOW WHAT?

## PHONE INTERVIEW

- This is standard practice
- You will receive a notice for the date and time of your phone interview; this is standard practice
  - A list of questions is provided on the back of the notice.
  - Keep your answers short!
  - Do NOT Lie—be honest and concise
  - Remember – you are not on semester break or recess; you simply don't have a job
- DO YOUR BEST TO NOT MISS THE CALL! If you know that you will not be available, call or email EDD from your EDD log-on and let them know.



# NOW WHAT? DENIALS

- If you are denied benefits, you have 20 days to appeal.
- Possible Reasons:
  - EDD was told by the employer that you would be returning the following semester.
  - Some dates on your form were not accurate.
- Remember Cervisi!
- Most claims are won at the first stage of appeal.




# UNEMPLOYMENT BENEFITS

- “I wish to appeal the determination to deny benefits based on the Cervisi Decision (Cervisi v. Unemployment Insurance Appeals Board-208 Cal. App. 3d 635; Cal. Rptr. 142 Feb. 1989) and the following grounds: I am a temporary hourly employee laid off because of lack of work. When I am employed, I am paid on an hourly basis. Any assignment I receive is contingent on funding, enrollment, and program changes. Consequently, as a temporary employee without an actual or implied contract, I do not have reasonable assurance of continued employment and am eligible for unemployment benefits.”
- Also send a copy of the Cervisi Decision with your appeal.



# UNEMPLOYMENT BENEFITS

## The Appeal Hearing:

- A copy of your appointment letter or load sheet for the present semester
  - Copies of offers of prior employment, which are useful because they demonstrate that appointment letters or load sheets usually go out at a late date and aid in establishing the uncertainty of your reappointment
- 
- Any documents or letters you might get from the department chair, other faculty, or the campus administration indicating the uncertainty of funding and/or enrollment levels for the coming semester
  - Evidence that you have attempted to secure teaching work during this period of employment such as letters or records of phone calls to other departments or colleges.



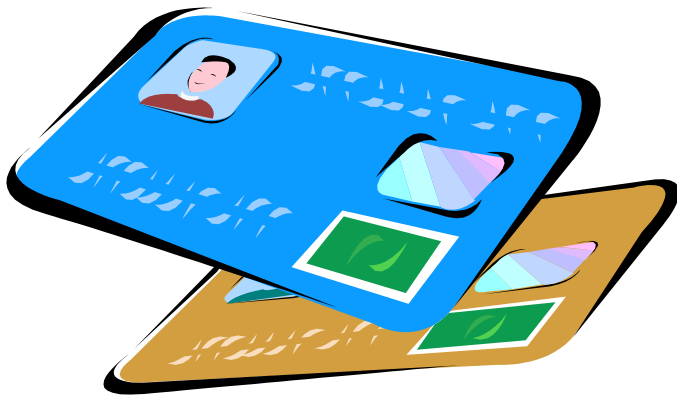
## NOW WHAT? REOPENING A CLAIM

- Once your claim is approved, it is open for a year from your date of submission or until you have exhausted the full benefit award.
  - You can reopen it to receive benefits during subsequent semester breaks (summer or winter).
  - Spring Break is NOT a semester break, so it does not qualify for EDD benefits.
  - Follow the instructions on the EDD website to reopen an existing claim.

# NOW WHAT?

## RECEIVING BENEFITS

- You will receive a debit card. You can transfer the award from it to your own bank account.
  - Any earnings per week must be submitted; follow the instructions with the debit card.
- When you return to work, and the amount of your pay is larger than your benefits, you can stop filling out the claim form.



- As long as your benefits are more than your pay, you can continue to collect unemployment. This is considered Under-employment.



# HELP IS ON THE WAY!

- Keep unemployment records together, from the date the claim opens to the date it closes.
- Keep all records in chronological order. This will help you if are denied and need to appeal.



- CCA Information
  - Cca4us.org:
    - click on “Issues & Action”
    - click on “Part-time Issues”
  - If you are denied benefits and are a CTA member
    - Contact your CTA Primary Contact Staff for assistance.

# DISCLAIMER

Has to be said:

The information in this presentation is subject to changes made by EDD that the author of the presentation is not aware of. The information herein was gathered from the EDD website and by doing a “sample” application.

No claim or promise of actual EDD award is implied by this presentation.

Viewers and users of this information should read the EDD website thoroughly, gather all information, check all dates and figures, and submit questions to EDD.

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