BEHAVIORS THAT MAY BE SEXUAL HARASSMENT:

THE MISSION OF THE DEPARTMENT OF FAIR EMPLOYMENT AND HOUSING IS TO PROTECT THE PEOPLE OF CALIFORNIA FROM UNLAWFUL DISCRIMINATION IN EMPLOYMENT, HOUSING AND PUBLIC ACCOMMODATIONS, AND FROM THE PERPETRATION OF ACTS OF HATE VIOLENCE AND HUMAN TRAFFICKING.

DEPARTMENT OF FAIR EMPLOYMENT AND HOUSING

SEXUAL HARASSMENT



Unwanted sexual advances

Offering employment benefits in exchange for sexual favors

Leering; gestures; or displaying sexually suggestive objects, pictures, cartoons, or posters

4 Derogatory comments, epithets, slurs, or jokes

Graphic comments, sexually degrading words, or suggestive or obscene messages or invitations

Physical touching or assault, as well as impeding or blocking movements

Actual or threatened retaliation for rejecting advances or complaining about harassment is also unlawful.

Employees or job applicants who believe that they have been sexually harassed or retaliated against may file a complaint of discrimination with DFEH within one year of the last act of harassment or retaliation. DFEH serves as a neutral fact-finder and attempts to help the parties voluntarily resolve disputes. If DFEH finds sufficient evidence to establish that discrimination occurred and settlement efforts fail, the Department may file a civil complaint in state or federal court to address the causes of the discrimination and on behalf of the complaining party. DFEH may seek court orders changing the employer's policies and practices, punitive damages, and attorney's fees and costs if it prevails in litigation. Employees can also pursue the matter through a private lawsuit in civil court after a complaint has been filed with DFEH and a Right-to-Sue Notice has been issued.

FOR MORE INFORMATION

Department of Fair Employment and Housing Toll Free: (800) 884-1684 TTY: (800) 700-2320 Online: www.dfeh.ca.gov

Also find us on:







If you have a disability that prevents you from submitting a written pre-complaint form on-line, by mail, or email, the DFEH can assist you by scribing your pre-complaint by phone or, for individuals who are Deaf or Hard of Hearing or have speech disabilities, through the California Relay Service (711), or call us through your VRS at (800) 884-1684 (voice).

To schedule an appointment, contact the Communication Center at (800) 884-1684 (voice or via relay operator 711) or (800) 700-2320 (TTY) or by email at contact.center@dfeh.ca.gov.

The DFEH is committed to providing access to our materials in an alternative format as a reasonable accommodation for people with disabilities when requested.

Contact the DFEH at (800) 884-1684 (voice or via relay operator 711), TTY (800) 700-2320, or contact.center@dfeh.ca.gov to discuss your preferred format to access our materials or webpages.

DFEH-185-ENG / April 2017

THE FACTS

Sexual harassment is a form of discrimination based on sex/gender (including pregnancy, childbirth, or related medical conditions), gender identity, gender expression, or sexual orientation. Individuals of any gender can be the target of sexual harassment. Unlawful sexual harassment does not have to be motivated by sexual desire. Sexual harassment may involve harassment of a person of the same gender as the harasser, regardless of either person's sexual orientation or gender identity.

THERE ARE TWO TYPES OF SEXUAL HARASSMENT

- "Quid pro quo" (Latin for "this for that") sexual harassment is when someone conditions a job, promotion, or other work benefit on your submission to sexual advances or other conduct based on sex.
- "Hostile work environment" sexual harassment occurs when unwelcome comments or conduct based on sex unreasonably interfere with your work performance or create an intimidating, hostile, or offensive work environment. You may experience sexual harassment even if the offensive conduct was not aimed directly at you.

The harassment must be severe or pervasive to be unlawful. That means that it alters the conditions of your employment and creates an abusive work environment. A single act of harassment may be sufficiently severe to be unlawful.

CIVIL REMEDIES:



ALL EMPLOYERS MUST TAKE THE FOLLOWING ACTIONS TO PREVENT HARASSMENT AND CORRECT IT WHEN IT OCCURS:

- Damages for emotional distress from each employer or person in violation of the law
- 2 Hiring or reinstatement
- 3 Back pay or promotion
- Changes in the policies or practices of the employer

EMPLOYER RESPONSIBILITY & LIABILITY

All employers, regardless of the number of employees, are covered by the harassment provisions of California law. Employers are liable for harassment by their supervisors or agents. All harassers, including both supervisory and non-supervisory personnel, may be held personally liable for harassment or for aiding and abetting harassment. The law requires employers to take reasonable steps to prevent harassment. If an employer fails to take such steps, that employer can be held liable for the harassment. In addition, an employer may be liable for the harassment by a non-employee (for example, a client or customer) of an employee, applicant, or person providing services for the employer. An employer will only be liable for this form of harassment if it knew or should have known of the harassment, and failed to take immediate and appropriate corrective action.

Employers have an affirmative duty to take reasonable steps to prevent and promptly correct discriminatory and harassing conduct, and to create a workplace free of harassment.

A program to eliminate sexual harassment from the workplace is not only required by law, but it is the most practical way for an employer to avoid or limit liability if harassment occurs.

- Distribute copies of this brochure or an alternative writing that complies with Government Code 12950.
 This pamphlet may be duplicated in any quantity.
- Post a copy of the Department's employment poster entitled "California Law Prohibits Workplace Discrimination and Harassment."
- Oevelop a harassment, discrimination, and retaliation prevention policy in accordance with 2 CCR 11023. The policy must:
 - Be in writing.
 - List all protected groups under the FEHA.
 - Indicate that the law prohibits coworkers and third parties, as well as supervisors and managers with whom the employee comes into contact, from engaging in prohibited harassment.
 - Create a complaint process that ensures confidentiality to the extent possible; a timely response; an impartial and timely investigation by qualified personnel; documentation and tracking for reasonable progress; appropriate options for remedial actions and resolutions; and timely closures.
 - Provide a complaint mechanism that does not require an employee to complain directly to their immediate supervisor. That complaint mechanism must include, but is not limited to including: provisions for direct communication, either orally or in writing, with a designated company representative; and/or a complaint hotline; and/or access to an ombudsperson; and/or identification of DFEH and the United States Equal Employment Opportunity Commission as additional avenues for employees to lodge complaints.
 - Instruct supervisors to report any complaints of misconduct to a designated company representative, such as a human resources

- manager, so that the company can try to resolve the claim internally. Employers with 50 or more employees are required to include this as a topic in mandated sexual harassment prevention training (see 2 CCR 11024).
- Indicate that when the employer receives allegations of misconduct, it will conduct a fair, timely, and thorough investigation that provides all parties appropriate due process and reaches reasonable conclusions based on the evidence collected.
- Make clear that employees shall not be retaliated against as a result of making a complaint or participating in an investigation.
- Oistribute its harassment, discrimination, and retaliation prevention policy by doing one or more of the following:
 - Printing the policy and providing a copy to employees with an acknowledgement form for employees to sign and return.
- Sending the policy via email with an acknowledgment return form.
- Posting the current version of the policy on a company intranet with a tracking system to ensure all employees have read and acknowledged receipt of the policy.
- Discussing policies upon hire and/or during a new hire orientation session.
- Using any other method that ensures employees received and understand the policy.
- (5) If the employer's workforce at any facility or establishment contains ten percent or more of persons who speak a language other than English as their spoken language, that employer shall translate the harassment, discrimination, and retaliation policy into every language spoken by at least ten percent of the workforce.
- In addition, employers who do business in California and employ 50 or more part-time or full-time employees must provide at least two hours of sexual harassment training every two years to each supervisory employee and to all new supervisory employees within six months of their assumption of a supervisory position.

DI Office Locations and Mailing Addresses

. 645 Salem Street (PO Box 8190, Chico, CA 95927-8190)

Chino Hills... 15315 Fairfield Ranch Road, Ste. 100 (PO Box 60006, City of Industry, CA 91716-0006)

Fresno 2550 Mariposa Mall, Rm. 1080A (PO Box 32, Fresno, CA 93707-0032)

Long Beach ... 4300 Long Beach Blvd., Ste. 600 (PO Box 469, Long Beach, CA 90801-0469)

Los Angeles 888 S. Figueroa Street, Ste. 200 (PO Box 513096, Los Angeles, CA 90051-1096)

Oakland .. . 7677 Oakport Street, Ste. 325 (PO Box 1857, Oakland, CA 94606-1857)

...... 5009 Broadway (PO Box 13140, Sacramento, CA 95813-3140)

San Bernardino 371 West 3rd Street (PO Box 781, San Bernardino, CA 92402-0781)

San Diego ... 9246 Lightwave Avenue, Bldg. A, Ste. 300 (PO Box 120831, San Diego, CA 92112-0831)

San Francisco 745 Franklin Street, Rm. 300 (PO Box 193534, San Francisco, CA 94119-3534)

.. 297 West Hedding Street San Jose (PO Box 637, San Jose, CA 95106-0637)

Santa Ana ... 605 West Santa Ana Blvd., Bldg. 28, Rm, 735 (PO Box 1466, Santa Ana, CA 92702-1466)

... 128 East Ortega Street (PO Box 1529, Santa Barbara, CA 93102-1529)

Santa Rosa

... 3127 Transworld Dr., Ste. 150 Stockton (PO Box 201006, Stockton, CA 95201-9006)

> California State Government Employees (PO Box 2168, Stockton, CA 95201-2168)

... 15400 Sherman Way, Rm. 500 Van Nuys (PO Box 10402, Van Nuys, CA 91410-0402)



STATE OF CALIFORNIA

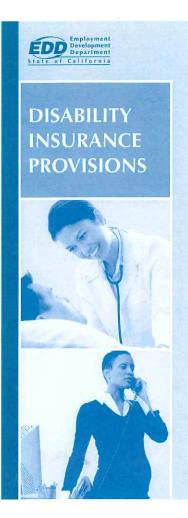
LABOR AND WORKFORCE DEVELOPMENT AGENCY

EMPLOYMENT DEVELOPMENT DEPARTMENT

This pamphlet is for general information only, and does not have the force and effect of the law, rule or regulation.

The EDD is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Requests for services, aids, and/or alternate formats need to be made by calling DI at 1-866-490-8879 (voice), or through the California Relay Services at 711.

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Disability is an illness or injury, either physical or mental, which prevents customary work. Disability includes elective surgery, pregnancy, childbirth, or related medical conditions.

Disability Insurance (DI) is a component of the State Disability Insurance (SDI) program, designed to partially replace wages lost due to a non-work-related disability (see "Other Programs," for jobrelated disabilities).

SDI contributions are paid by California workers covered by the SDI program. Contribution rates may vary from year to year. For current rates, visit the DI website at www.edd.ca.gov/disability, or contact the Employment Development Department (EDD) Disability Insurance customer service at 1-800-480-3287 or EDD employment tax customer service at 1-888-745-3886.

- . State Plan. The DI state plan is covered in this brochure.
- · Voluntary Plan (VP). A private plan, approved by the Director of the EDD, which may be substituted for the State Plan, Voluntary Plans may be established if the employer and majority of employees agree to do so. VP information and filing a claim may be done through your employer. If you are covered by a VP, the provisions of this brochure may not apply to you. Obtain information about your coverage and file a VP claim through your employer.
- · Elective Coverage (EC). Employers and selfemployed persons, including general partners, may elect coverage. The method of computing benefits for EC participants is not the same as for mandatory rate payers. The cost of participating, which is set annually, can be obtained from your local EDD Employment Tax Customer Service Office.

EC claims are filed in the same manner as State Plan claims; however, there are some differences in eligibility requirements from those listed in this pamphlet.

· For additional information or to apply for coverage, contact EDD DI customer service at 1-800-480-3287, EDD employment tax customer service at 1-888-745-3886, or visit our website at www.edd.ca.gov/disability.

How to Claim State Plan Benefits

- 1. Use SDI Online to securely file for benefits or request a paper claim form online.
- · By Internet: www.edd.ca.gov/disability.
- By phone: 1-800-480-3287.
- · By mail: EDD, Disability Insurance, PO Box 989777, West Sacramento, CA 95798-9777.
- In person by visiting any of the DI offices listed under "DI Office Locations."
- California state government employees. covered by SDI should call 1-866-352-7675.
- 2. When filing using SDI Online, complete all required fields. A receipt number will be generated when your claim is submitted. If using a paper Claim for Disability Insurance (DI) Benefits (DE 2501) form, complete and sign Part A-Claimant's Statement, Print clearly, and verify your answers are complete and correct as errors delay payment.
- the Part B Physician/Practitioner's Certificate online or use the paper claim form. If filing online, your physician/practitioner will need your receipt number to complete the Part B -Physician/Practitioner's Certificate. Usually a claim cannot begin more than seven days before you were examined by or under the care of a physician/practitioner. Certification may be made by a licensed

3. Have your physician/practitioner complete

- medical or osteopathic physician and surgeon, nurse practitioner, physician assistant, chiropractor, dentist, podiatrist, optometrist, designated psychologist, or an authorized medical officer of a United States government facility. Certification may also be made by a licensed nurse-midwife or licensed midwife for disabilities related to normal pregnancy or childbirth.
- 4. File online or submit your paper claim form within 49 days from the date your disability begins. If your claim is late, you may lose benefits unless your explanation of the delay is accepted as reasonable.

How Benefits Are Paid

- SDI benefits are paid electronically or by mail. You do not need to appear in person to apply or receive benefits.
- Benefits are paid via the EDD Debit CardSM.
 The EDD Debit CardSM works like other debit cards, giving you access to funds 24 hours a day, 7 days a week, and can be used everywhere Visa* debit cards are accepted. When your claim is received, you may be contacted through SDI Online, by phone, or by mail for additional information. Most properly completed claims are processed within 14 days.
- The first seven days of your DI claim are a non-payable waiting period. If a claim is filed for the same or related cause or condition within 60 days of the initial claim, it will be processed as a continuation of the initial claim for which a waiting period was already served. There will not be a new waiting period in such cases.

Benefits are paid as quickly as possible after all information to determine eligibility is received. If you meet all eligibility requirements, benefits will be authorized. If you are eligible for further benefits, you will be authorized for additional benefits electronically or sent a Claim For Continued Disability Benefits (DE 2500A) certification form for you to complete for the next benefit period. Usually these benefit periods are for two-week intervals. However, DI pays benefits based on daily eligibility within a seven-day calendar week. Partial weeks are paid at a daily rate. This rate is one-seventh of your weekly benefit amount. Please allow 10 days from the date you mail or electronically submit a certification for receipt of payment.

How Your Benefit Rate is Determined

Benefit amounts are based on wages paid during a specific 12-month base period, determined by the date your claim begins. Consider when to start your claim since this may affect your weekly benefit rate, your maximum benefit amount, and the period of your benefit eligibility.

Only base period wages subject to the SDI contributions can be used in computing your benefits. To qualify, you must have earned at least \$300 during your base period. The month your claim begins determines which four consecutive quarters are used.

If your claim begins in:

- January, February, or March, your base period is the 12 months ending last September 30. (Example: A claim beginning February 14, 2017, uses a base period of October 1, 2015, through September 30, 2016.)
- April, May, or June, your base period is the 12 months ending last December 31. (Example: A claim beginning June 20, 2017, uses a base period of January 1, 2016, through December 31, 2016.)
- July, August, or September, your base period is the 12 months ending last March 31. (Example: A claim beginning September 27, 2017, uses a base period of April 1, 2016, through March 31, 2017.)
- October, November, or December, your base period is the 12 months ending last June 30. (Example: A claim beginning November 2, 2017, uses a base period of July 1, 2016, through June 30, 2017.)

Exceptions: If your claim is determined to be invalid, but you were unemployed and seeking work for 60 days or more in any quarter of your base period, you may be able to substitute wages paid in prior quarters.

You may be entitled to substitute wages paid in prior quarters to either validate your claim or increase your benefit amount, if during your base period you:

- · Were in the military service.
- Received workers' compensation benefits.
- Did not work because of a labor dispute.

If your situation fits any of the above, include a letter and supporting documentation with your claim form.

Wage Continuation. If your employer continues to pay you wages during your DI claim, your DI benefits may be affected. DI benefits plus wages cannot exceed your regular weekly wage. DI benefits are not affected by vacation pay you may receive.

Maximum Benefits. The maximum benefit amount is 52 times the weekly rate, but not more than your total base period wages. Exception: For employers and self-employed individuals who elect 5DI-coverage, the maximum benefit amount is 39 times the weekly rate.

Additionally, benefits are payable only for a limited period to a resident in an alcoholic recovery home or drug-free residential facility that is both licensed and certified by the state in which the facility is located. However, disabilities related to or caused by acute or chronic alcoholism or drug abuse, being medically treated, do not have this limitation.

Pregnancy. As with any medical condition, your disability period begins the first day you are unable to do your regular or customary work. DI benefits are based on the period of time your physician/ practitioner certifies you are unable to do your regular or customary work. Do not send in your claim for pregnancy-related DI benefits until the date your physician/practitioner certifies you are unable to work.

NOTE: For information on Paid Family Leave (PFL) bonding benefits, see the "Other Programs" section of this brochure.

You May Not be Eligible for Benefits

- If you are receiving Unemployment Insurance or PFL benefits.
- If you are not working or looking for work at the time your disability begins.
- If you are in custody due to conviction of a crime
- If your full wages are paid.
- If you are receiving workers' compensation at a weekly rate equal to or greater than the DI rate.
 If workers' compensation benefits are paid at a lower rate than your DI rate, you may be paid the difference.
- For the amount of time a claim is late (without good cause).
- If you make a false statement or fail to report a material fact. (A 30 percent penalty may be assessed if benefits are overpaid because you willfully withheld a material fact or made a false statement.)
- If you fail to attend an independent medical examination when requested. (Fees for such examinations are paid by the EDD.)

The California Unemployment Insurance Code provides for penalties consisting of fines, imprisonment, and loss of benefit rights for fraud against the SDI program.

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Your Rights. You are entitled to:

- Know the reason and basis for any decision that affects your benefits.
- Appeal any decision about your eligibility for benefits. (Appeals must be sent to the DI office in writing.)
- Request an appeal hearing before an Administrative Law Judge (ALJ). You may further appeal the ALJ's decision to the California Unemployment Insurance Appeals Board and the courts.
- Privacy all claim information will be kept confidential except for the purposes allowed by law.

Your Obligations. Your responsibilities:

- Complete your claim and other forms correctly, completely, and truthfully.
- Submit your claim and other forms according to time limits on forms. If your claim is submitted late and you believe you have a good reason for being late, you should include a written explanation of the reason(s) with the form.
- Contact DI if you do not understand a question or how to answer it.
- Include your name and claim identification number on letters to DI.

Contact DI

- By email at https://askedd.edd.ca.gov.
- · By phone at:
 - English 1-800-480-3287
 - Spanish 1-866-658-8846
- By U.S. mail addressed to PO Box 13140, Sacramento, CA 95813-3140. If you do not have a current claim, you may write to any DI office. Note: Do not mail claim forms to this PO Box.
- By TTY (teletypewriter for deaf, hearingimpaired, and speech-impaired persons only) at 1-800-563-2441.
- In person by visiting any of the DI offices listed under "DI Office Locations."

Other Programs

If you are injured on the job or become ill as a result of your occupation, notify your employer.

If you are able and available to work but unemployed, contact the Unemployment Insurance program of the EDD through the website at www.edd.ca.gov/unemployment, or by phone at 1-800-300-5616 (TTY 1-800-815-9387).

If you need help in finding work, job training, retraining, or other services in order to return to work, visit your local America's Job Center of CaliforniaSM formerly known as One-Stop Career Centers listed at www.servicelocator.org, or in the white pages of your phone directory.

If your disability is permanent or is expected to continue for a year or more, contact the U.S. Social Security Administration at www.ssa.gov, or by phone at 1-800-772-1213 (TTY 1-800-325-0778).

If you take time off work to care for a family member or if you take time off from work to bond with a new child, including newly adopted, newly placed foster children, or those of your registered domestic partner, contact the EDD PFL program at www.edd.ca.gov/disability, or by phone at 1-877-238-4373, or through the California Relay Service at 711.

Note: A PFL bonding claim form will be sent automatically with the final benefit payment to new mothers receiving DI benefits.

If you are a victim of a crime, contact the California Victim Compensation program at 1-800-777-9229 (TTY 1-800-735-2929). You may also contact your county Victim/Witness Assistance Center.

Questions about spousal or parental support obligations should be directed to the district attorney's office for the county that issued the court order.

Questions about child support obligations should be directed to the Department of Child Support Services at 1-866-901-3212 (TTY 1-866-399-4096).



About California Paid Family Leave

There may be times in the life of a working person when there is a need to care for a loved one. Whether you are a working parent bonding with a new child or you are caring for a seriously ill family member, California's Paid Family Leave was created for these times.

Fast Facts About California Paid Family Leave

- Provides up to six weeks of partially paid leave to bond with a new child (either by birth, adoption, or foster care placement) or to care for a seriously ill family member (child, spouse, parent, parent-in-law, grandparent, grandchild, sibling, or registered domestic partner).
- Provides approximately 55 percent of your salary during your leave. (The wage replacement rate will increase in January 2018.)
- Funded through your State Disability Insurance tax withholding so you are most likely eligible for leave if you've paid into State Disability Insurance ("CASDI" on paystubs) or a qualifying voluntary plan.
- Must be used within 12 months of a child entering your family.
- Does not provide job protection. You may have your job protected under other laws, such as the federal Family and Medical Leave Act (FMLA) or the California Family Rights Act (CFRA).

CALIFORNIA PAID FAMILY LEAVE

moments matter.

In California, it's the law.

Paid Family Leave benefits: Giving Californians the time they need to be there for the moments that matter.

 English
 1-877-238-4373

 Spanish
 1-877-379-3819

 Cantonese
 1-866-692-5595

 Vietnamese
 1-866-692-5596

 Armenian
 1-866-627-1567

 Punjabi
 1-866-627-1568

 Tagalog
 1-866-627-1569

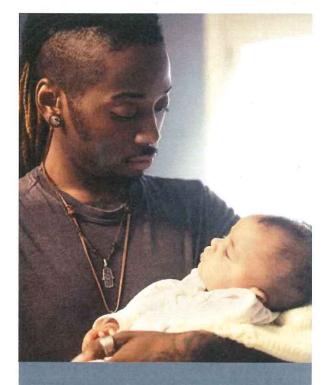
TTY: 1-800-445-1312 (This number does not accept voice calls.)

PFL Claim Forms should be mailed to: PO Box 989315 West Sacramento, CA 95798-9315



For more information, visit CaliforniaPaidFamilyLeave.com

The EDD is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Requests for services, aids, and/or alternate formats need to be made by calling 1-866-490-8879 (voice). TTY users, please call the California Relay Service at 711.



CALIFORNIA PAID FAMILY LEAVE

Helping
Californians
be present for
the moments
that matter.



Do I Qualify For California Paid Family Leave?

To qualify for Paid Family Leave benefits, **you must meet** the following requirements:

- Be covered by State Disability Insurance (or a voluntary plan in lieu of State Disability Insurance) and have earned at least \$300 in your base period from which deductions were withheld. The length of time worked at your current job does not affect eligibility.
- Submit your claim no sooner than 9 days, but no later than 49 days after your family leave begins.
- If required by your employer, use up to two weeks of any earned but unused vacation leave or paid time off prior to receiving benefits.
- Serve a 7-day, unpaid waiting period before benefits begin for each claim within the 12-month period. (The waiting period is being eliminated in January 2018.)
- For caregiving claims only: Supply medical certification showing that the care recipient has a serious health condition and requires your care.
- For bonding claims only: Provide documents to support a claim for bonding with a new biological, adopted, or foster child.

You may not be eligible for benefits if:

- You are receiving Disability Insurance, Unemployment Insurance, or workers' compensation benefits.
- You are not working or looking for work at the time you begin your family care leave.
- · You are not losing wages.
- You are in custody due to conviction of a crime.

You are entitled to:

- Know the reason and basis for decisions affecting your benefits.
- Appeal decisions about your eligibility for benefits.
 Visit edd.ca.gov/Disability/Appeals.htm for information about appeals.
- Confidentiality and privacy of your claim information, except for the purposes allowed by law.



How Are Benefit Amounts Calculated?

California Paid Family Leave provides approximately 55 percent of your salary (from \$50 up to \$1.173 weekly). Your employer may allow you to use vacation, sick, paid time off, or other leave to supplement your PFL benefits to receive up to 100 percent pay. In January 2018, the wage replacement rate increases to approximately 60 to 70 percent of your salary.

The benefit amount is calculated from your highest quarterly earnings over the past 5 to 18 months. The Employment Development Department has an online calculator at **edd.ca.gov/PFL_Calculator** that can help you estimate your weekly benefit amount.

Job Protection

protection or return to work rights. However, job protection may be provided if your employer has to follow the federal FMLA or the CFRA. Also, notify your employer of the reason for taking leave according to your company's leave policy.

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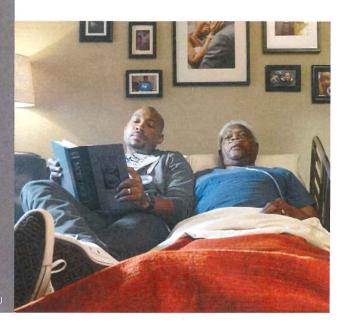
Apply For Benefits

Apply for Paid Family Leave benefits online using SDI Online. Employers and physicians/practitioners can also submit claim information through SDI Online. Visit *edd.ca.gov/Disability* for more information. You may also file using a paper form. Visit *edd.ca.gov/Forms* to request a paper *Claim for Paid Family Leave (PFL) Benefits*, DE 2501F form.

For bonding claims, be sure to provide a proof of relationship document with your claim. For caregiving claims, be sure to provide a physician/practitioner's certification.

If you are currently receiving Disability Insurance pregnancy-related benefits, it is not necessary to request a Paid Family Leave claim form. Claim filing information will be sent through your SDI Online account or via mail when your pregnancy-related disability claim ends.

If you are covered by a voluntary plan, contact your employer to obtain information about your coverage and instructions on how to apply for benefits.





FOR YOUR BENEFIT

CALIFORNIA'S PROGRAMS FOR THE UNEMPLOYED

UNEMPLOYMENT INSURANCE
DISABILITY INSURANCE
PAID FAMILY LEAVE
WORKFORCE SERVICES

This pamphlet is for general information only and does not have the force and effect of law, rule, or regulation.

for the Unemployed
The purpose of this pamphlet is to inform you about programs offered by the Employment Development Department (EDD) for the benefit of unemployed Californians.
To learn more about services provided by the EDD, access the EDD home page at www.edd.ca.gov . You may submit questions electronically through "Contact EDD" located at the bottom of the EDD home page.
Unemployment Insurance
Disability Insurance
Paid Family Leave
Workforce Services

Unemployment Insurance

Unemployment Insurance (UI) is an insurance program that is paid for by your employer. It provides you with an income when you are out of work through no fault of your own.

Who Should File

You may file a claim for UI benefits if you are no longer working or your hours are reduced. To be eligible to receive UI benefits, you must be out of work due to no fault of your own and be physically able to work, ready to accept work, and looking for work.

When to File a UI Claim

You may apply for benefits as soon as you are unemployed or your hours are reduced. Your claim will be filed the Sunday of the week you file. All claims have a one-week, unpaid waiting period. The waiting period does not begin until the claim is filed.

What you Need to File

To determine if you are eligible to receive UI benefits, you will be asked a variety of questions, such as information about your past employers and the reason you are currently out of work. To ensure your claim is filed as quickly as possible, you should have the following information available:

- Your name, (including all names you used while working) and Social Security number (SSN).
- Your mailing and residence address (including ZIP code) and phone number (including area code).
- Last employer information, including: name, address (mailing and physical location), and phone number. We will also need the ZIP code for both addresses (mailing and physical location), the area code for your last employer's phone number, and last day worked.
- 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 to us must be sent to your last employer. If you quit, were fired, or left work because of a trade dispute, you will be scheduled to a determination phone interview. The information we obtain during the interview will help us decide your eligibility to receive benefits.
- Information on all employers you worked for during the 18 months prior to filing your claim, including name, period of employment, wages earned, and how you were paid, including employers you worked for in other states.
- If you served in the military in the last 18 months, information from your DD214 Member copy 4.

- If you worked for the federal government during the last 18 months, information from your *Notice to Federal Employees About Unemployment Insurance*, Standard Form 8.
- Your citizenship status and whether you have the legal right to work in the United States. Individuals who indicate they are registered with the United States Citizenship and Immigration Services (USCIS, formerly INS) and authorized to work in the United States will be asked for the title of their employment authorization document and information from the USCIS document, such as the Alien Identification Number, Card Number and/or expiration date.
- State-issued driver license number or identification card number.

Note: Your last employer's name and address are very important, regardless of how long you worked for this employer or whether this last job was in your usual line of work. List the last employer you worked for no matter how long you worked for this employer and the date you last worked. If you are working part time, be sure to tell us you are still working and give us the number of hours you are working each week.

Penalties

If you willfully give false information or withhold information to claim benefits, you will be assessed a false statement disqualification by the EDD. A false statement disqualification is a penalty that denies you benefits from two to 23 weeks. The penalty stays on your record for three years or until served, whichever comes first. To serve the penalty weeks, you must continue to certify for UI benefits, and be otherwise eligible for benefits each week claimed.

It is illegal to willfully make false statements or knowingly fail to report all facts to receive benefits. Making a false statement or withholding information to receive benefits can be a felony. A person convicted under Section 2101 of the Unemployment Insurance Code will lose the right to collect benefits for 52 weeks. Penalties may include both fines and criminal prosecution.

How to File

You may file a UI claim by using one of the methods listed below:

Online

File online with eApply4UI. This is the fastest way to file a new UI claim. It is convenient, secure, and available in English and Spanish 24 hours a day, 7 days a week. Access eApply4UI on the EDD website at www.edd.ca.gov/eapply4ui.

The fastest and most convenient way to reopen an existing claim is through your UI OnlineSM account. Log on to your UI OnlineSM account and select the "Reopen Your Claim" tab and answer all of the questions.

Phone

File by contacting a customer service representative at one of the numbers listed below:

EDD UI Toll-Free Phone Numbers:

English	1-800-300-5616	Mandarin	1-866-303-0706
Spanish	1-800-326-8937	Vietnamese	1-800-547-2058
C antonese	1-800-547-3506	TTY	1-800-815-9387

Customer service representatives assist with UI claim filing, UI claim information calls, and calls about missed appointments, appeals, and overpayments, Monday through Friday between 8 a.m. and 12 noon (Pacific Time). Mondays and Tuesdays are the busiest days. For faster service, you may wish to call Wednesday through Friday. However, to file a claim, you must call by Friday of the week in which you become unemployed or there is a reduction in your work hours to receive credit for that week. The EDD is closed on state holidays.

For deaf, hard of hearing, and speech disabled there are UI phone services available Monday through Friday, 8 a.m. to 5 p.m. (Pacific Time) except state holidays. To speak to a UI customer service representative, call the EDD direct on a teletypewriter/teletype device (TTY/TDD) at 1-800-815-9387 (non voice). If using the California relay services or a nationwide service, give the EDD phone number, 1-800-300-5616 (voice) to the relay operator to speak to a UI customer service representative.

Interactive Voice Response (IVR)

The Interactive Voice Response (IVR) System provides UI payment and general information 24 hours a day, 7 days a week. The UI payment information includes the date your last payment was issued, the amount paid, period of time paid, and balance remaining on your claim. To access your payment information, you will be asked to enter your SSN and Personal Identification Number (PIN), on your phone keypad. You will need to establish a PIN the first time you use the IVR to access your payment information. The EDD's IVR System provides step-by-step instructions to guide you to services you want, in English and Spanish. For faster access to payment information, call the EDD Automated Self-Service, toll-free number at 1-866-333-4606, 24 hours a day, 7 days a week, including holidays.

Fax or Mail

When accessing eApply4UI at https://eapply4ui.edd.ca.gov some customers will be instructed to fax or mail their UI application to the EDD. When this occurs, the paper *Unemployment Insurance Application* (DE 1101I) will display.

For faster and more secure processing, complete the form online, print, and fax to the number listed on the form. If mailing your UI application, use the address on the form and allow additional time for processing.

Fraud Prevention and Detection

The EDD recognizes your concerns about imposter fraud and the threat of identity theft. Imposter fraud occurs when someone intentionally files a UI claim using another person's employment or personal information. The EDD actively investigates cases of imposter fraud and is committed to protecting the identities of legitimate claimants. If you file a UI claim and there is reason to suspect the UI claim may have identity or imposter issues, you may receive a *Request for Identity Verification*, DE 1326C, requesting you to validate the information provided when you filed for UI benefits. The EDD will also contact employer(s) and governmental entities to verify the documents and any information you supply.

For more information about what steps you can take to protect your identity and prevent imposter fraud, download the *Protect Your Identity* and Stop Unemployment Insurance Imposter Fraud, DE 2360EE, brochure from the EDD website at www.edd.ca.gov/pdf_pub_ctr/de2360ee.pdf.

To report UI fraud, submit a Fraud Reporting Form online from the EDD website at https://askedd.edd.ca.gov/frmfraudstart.htm, and select the category "Reporting Fraud," or call the EDD toll-free Fraud Hotline at 1-800-229-6297.

Types of Claims

The claim you file will depend on the type of employer you worked for and where you worked.

You will file:

- A regular California claim if you worked in California in a job covered by the UI law even if you now reside outside California.
- A federal claim if your employment was in civilian work for the federal government (benefit costs are paid from federal funds).
- A military claim if your employment was as a member of the Armed Forces (benefit costs are paid from federal funds).
- A combined wage claim if you have earnings in California and at least one other state during the last 18 months. This type of claim could increase your UI benefits.
- An interstate claim against another state if you worked and had earnings in a state other than California during the last 18 months, but you now reside in California. You may contact the other state, the District of Columbia, Puerto Rico, or Canada directly by phone or on the Internet to file your claim against them. If you worked in the Virgin Islands, contact the EDD toll-free number at 1-800-300-5616 to file your interstate claim against them.

Beginning Date of Claim

The benefit year of your claim begins on the Sunday of the week in which you file and ends Saturday, 52 weeks after you filed. During the benefit year of the claim, you certify for benefits on a biweekly basis and will be paid UI benefits, if you meet all eligibility criteria. You will be paid unless you stop certifying for benefits for whatever reason, until the balance runs out, the benefit year on the claim ends, or until you no longer meet all UI eligibility criteria, whichever comes first. You cannot file another new California claim until the benefit year of the claim ends, even if you have received all of your benefits and are still unemployed. If you have worked in another state during the last 18 months, you may be entitled to a new claim in that state.

How Your UI Benefits are Determined

Your UI weekly benefit, called the weekly benefit amount and the total benefits available in your claim, called your maximum benefit amount, are both based on the wages you earned in the base period of your claim.

Your base period is a 12-month period of time. Each base period has four quarters of three months each. There are two types of base periods that may be used to establish a claim: The **Standard Base Period** and the **Alternate Base Period**.

Standard Base Period

The **Standard Base Period** is the **FIRST** four of the last five completed calendar quarters prior to the beginning date of the claim.

For information on what your standard base period may be when you file your claim, refer to the chart below. The shaded area represents the base period. The non-shaded area represents the month when the claim is filed.

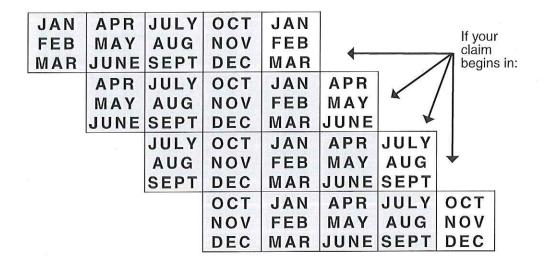
OCT	JAN	APR	JULY		JAN]		If yo	ur
NOV	FEB	MAY	AUG		FEB	←		clain	n
DEC	MAR	JUNE	SEPT		MAR			begi	ns i
	JAN	APR	JULY	OCT		APR		/	
	FEB	MAY	AUG	NOV		MAY			
	MAR	JUNE	SEPT	DEC		JUNE	K		
		APR	JULY	OCT	JAN		JULY		
		MAY	AUG	NOV	FEB		AUG	₩	
		JUNE	SEPT	DEC	MAR		SEPT		
			JULY	OCT	JAN	APR		OCT	
			AUG	NOV	FEB	MAY		NOV	
			SEPT	DEC	MAR	JUNE		DEC	

Alternate Base Period

If you do not have sufficient wages in the Standard Base Period to establish a claim, the EDD will consider whether you qualify to file a claim using the Alternate Base Period. The Alternate Base Period can **only** be used to file a UI claim when there are not enough wages earned in the Standard Base Period to file a monetarily valid UI claim.

The **Alternate Base Period** is the **LAST** four completed calendar quarters prior to the beginning date of the claim.

For information on what your **Alternate** Base Period* may be when you file your claim, refer to the chart below. The shaded area represents the base period. The non-shaded area represents the month when the claim is filed.



*An Alternate Base Period claim can only be filed when there are not enough wages earned in the Standard Base Period to file a valid claim.

How Much UI Pays

For your claim to be valid, you must have at least \$1,300 in earnings in one quarter of your base period or at least \$900 in earnings in the highest quarter and total base period earnings of 1.25 times your high quarter earnings. You can receive a minimum of \$40 to a maximum of \$450 a week. The quarter in which you were paid the highest wages determines the weekly benefit amount you will receive. The maximum benefit amount is 26 times the weekly benefit amount or one-half of the total base period wages, whichever is less. The following table will help you figure your award:

Unemployment Insurance Benefit Table For New Claims with a Beginning Date of January 2, 2005 or After

Amount of Weekly Wages in Benefit Highest Quarter Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount
9.3				
\$ 900.00 - 948.99 \$ 40	\$ 2,210.01 - 2,236.00) \$86 \$	3,406.01 - 3,432.00	\$132
949.00 - 974.99 41	2,236.01 - 2,262.00) 87	3,432.01 - 3,458.00	133
975.00 - 1,000.99 42	2,262.01 - 2,288.00	88	3,458.01 - 3,484.00	134
1,001.00 - 1,026.99 43	2,288.01 - 2,314.00) 89	3,484.01 - 3,510.00	135
1,027.00 - 1,052.99 44	2,314.01 - 2,340.00	90	3,510.01 - 3,536.00	136
1,053.00 - 1,078.99 45	2,340.01 - 2,366.00) 91	3,536.01 - 3,562.00	137
1,079.00 - 1,117.99 46	2,366.01 - 2,392.00) 92	3,562.01 - 3,588.00	138
1,118.00 - 1,143.99 47	2,392.01 - 2,418.00) 93	3,588.01 - 3,614.00	139
1,144.00 - 1,169.99 48	2,418.01 - 2,444.00) 94	3,614.01 - 3,640.00	140
1,170.00 - 1,195.99 49	2,444.01 - 2,470.00) 95	3,640.01 - 3,666.00	141
1,196.00 - 1,221.99 50	2,470.01 - 2,496.00) 96	3,666.01 - 3,692.00	142
1,222.00 - 1,247.99 51	2,496.01 - 2,522.00) 97	3,692.01 - 3,718.00	143
1,248.00 - 1,286.99 52	2,522.01 - 2,548.00	98	3,718:01 - 3,744.00	144
1,287.00 - 1,312.99 53	2,548.01 - 2,574.00) 99	3,744.01 - 3,770.00	145
1,313.00 - 1,338.99 54	2,574.01 - 2,600.00	100	3,770.01 - 3,796.00	146
1,339.00 - 1,364.99 55	2,600.01 - 2,626.00	101	3,796.01 - 3,822.00	147
1,365.00 - 1,403.99 56	2,626.01 - 2,652.00	102	3,822.01 - 3,848.00	148
1,404.00 - 1,429.99 57	2,652.01 - 2,678.00	103	3,848.01 - 3,874.00	149
1,430.00 - 1,455.99 58	2,678.01 - 2,704.00) 104	3,874.01 - 3,900.00	150
1,456.00 - 1,494.99 59	2,704.01 - 2,730.00	105	3,900.01 - 3,926.00	151
1,495.00 - 1,520.99 60	2,730.01 - 2,756.00	106	3,926.01 - 3,952.00	152
1,521.00 - 1,546.99 61	2,756.01 - 2,782.00	107	3,952.01 - 3,978.00	153
1,547.00 - 1,585.99 62	2,782.01 - 2,808.00	108	3,978.01 - 4,004.00	154
1,586.00 - 1,611.99 63	2,808.01 - 2,834.00	109	4,004.01 - 4,030.00	155
1,612.00 - 1,637.99 64	2,834.01 - 2,860.00	110	4,030.01 - 4,056.00	156
1,638.00 - 1,676.99 65	2,860.01 - 2,886.00	111	4,056.01 - 4,082.00	157
1,677.00 - 1,702.99 66	2,886.01 - 2,912.00	112	4,082.01 - 4,108.00	158
1,703.00 - 1,741.99 67	2,912.01 - 2,938.00		4,108.01 - 4,134.00	159
1,742.00 - 1,767.99 68	2,938.01 - 2,964.00	114	4,134.01 - 4,160.00	
1,768.00 - 1,806.99 69	2,964.01 - 2,990.00		4,160.01 - 4,186.00	
1,807.00 - 1,832.99 70	2,990.01 - 3,016.00		4,186.01 - 4,212.00	
1,833.00 - 1,846.00 71	3,016.01 - 3,042.00		4,212.01 - 4,238.00	
1,846.01 - 1,872.00 72	3,042.01 - 3,068.00		4,238.01 - 4,264.00	
1,872.01 - 1,898.00 73	3,068.01 - 3,094.00	119	4,264.01 - 4,290.00	165
1,898.01 - 1,924.00 74	3,094.01 - 3,120.00		4,290.01 - 4,316.00	
1,924.01 - 1,950.00 75	3,120.01 - 3,146.00		4,316.01 - 4,342.00	
1,950.01 – 1,976.00 76	3,146.01 - 3,172.00		4,342.01 - 4,368.00	
1,976.01 - 2,002.00 77	3,172.01 - 3,198.00		4,368.01 - 4,394.00	
2,002.01 - 2,028.00 78	3,198.01 - 3,224.00		4,394.01 - 4,420.00	
2,028.01 - 2,054.00 79	3,224.01 - 3,250.00		4,420.01 - 4,446.00	
2,054.01 - 2,080.00 80	3,250.01 - 3,276.00		4,446.01 - 4,472.00	
2,080.01 - 2,106.00 81	3,276.01 - 3,302.00		4,472.01 - 4,498.00	
2,106.01 - 2,132.00 82	3,302.01 - 3,328.00		4,498.01 - 4,524.00	
2,132.01 - 2,158.00 83	3,328.01 - 3,354.00		4,524.01 - 4,550.00	
2,158.01 - 2,184.00 84	3,354.01 - 3,380.00		4,550.01 - 4,576.00	
2,184.01 - 2,210.00 85	3,380.01 - 3,406.00	131	4,576.01 - 4,602.00	177

Unemployment Insurance Benefit Table For New Claims with a Beginning Date of January 2, 2005 or After

Amount Wages i		Amount o Wages ir		Amount o Wages ir	,
Highest Qu				Highest Qua	
\$ 4,602.01 -	4,628.00 \$178	\$ 5,798.01 -	5,824.00 \$224	\$ 6,994.01 -	7,020.00 \$270
4,628.01 -	4,654.00 179	5,824.01 -	5,850.00 225	7,020.01 -	7,046.00 271
4,654.01 -	4,680.00 180	5,850.01 -	5,876.00 226	7,046.01 -	7,072.00 272
4,680.01 -	4,706.00 181	5,876.01 -	5,902.00 227	7,072.01 -	
4,706.01 -	4,732.00 182	5,902.01 -	5,928.00 228	7,098.01 -	7,124.00 274
4,732.01 -	4,758.00 183	5,928.01 -	5,954.00 229	7,124.01 -	7,150.00 275
4,758.01 -	4,784.00 184	5,954.01 -	5,980.00 230	7,150.01 -	7,176.00 276
4,784.01 -	4,810.00 185	5,980.01 -	6,006.00 231	7,176.01 -	7,202.00 277
4,810.01 -	4,836.00 186	6,006.01 -	6,032.00 232	7,202.01 -	7,228.00 278
4,836.01 -	4,862.00 187	6,032.01 -	6,058.00 233	7,228.01 -	7,254.00 279
4,862.01 -	4,888.00 188	6,058.01 -	6,084.00 234	7,254.01 -	7,280.00 280
4,888.01 -	4,914.00 189	6,084.01 -	6,110.00 235	7,280.01 -	7,306.00 281
4,914.01 -	4,940.00 190	6,110.01 -	6,136.00 236	7,306.01 -	7,332.00 282
4,940.01 -	4,966.00 191	6,136.01 -	6,162.00 237	7,332.01 -	7,358.00 283
4,966.01 -	4,992.00 192	6,162.01 -	6,188.00 238	7,358.01 -	7,384.00 284
4,992.01 -	5,018.00 193	6,188.01 -	6,214.00 239	7,384.01 -	7,410.00 285
5,018.01 -	5,044.00 194	6,214.01 -	6,240.00 240	7,410.01 -	7,436.00 286
5,044.01 -	5,070.00 195	6,240.01 -	6,266.00 241	7,436.01 -	7,462.00 287
5,070.01 -	5,096.00 196	6,266.01 -	6,292.00 242	7,462.01 -	7,488.00 288
5,096.01 -	5,122.00 197	6,292.01 -	6,318.00 243	7,488.01 -	7,514.00 289
5,122.01 -	5,148.00 198	6,318.01 -	6,344.00 244	7,514.01 -	7,540.00 290
5,148.01 -	5,174.00 199	6,344.01 -	6,370.00 245	7,540.01 -	7,566.00 291
	5,200.00 200	6,370.01 -	6,396.00 246	7,566.01 –	7,592.00 292
5,200.01 -	5,226.00 201	6,396.01 -	6,422.00 247	7,592.01 -	7,618.00 293
5,226.01 –	5,252.00 202	6,422.01 -	6,448.00 248	7,618.01 –	7,644.00 294
5,252.01 -	5,278.00 203	6,448.01 -	6,474.00 249	7,644.01 –	7,670.00 295
5,278.01 –	5,304.00 204	6,474.01 –	6,500.00 250	7,670.01 –	7,696.00 296
	5,330.00 205		6,526.00 251	7,696.01 –	7,722.00 297
	5,356.00 206		6,552.00 252		7,748.00 298
	5,382.00 207	8	6,578.00 253		7,774.00 299
	5,408.00 208		6,604.00 254		7,800.00 300
	5,434.00 209		6,630.00 255		7,826.00 301
	5,460.00 210		6,656.00 256		7,852.00 302
	5,486.00 211		6,682.00 257		7,878.00 303
	5,512.00 212		6,708.00 258	10	7,904.00 304
	5,538.00 213	CONTRACTOR CONTRACTOR CONTRACTOR	6,734.00 259		7,930.00 305
	5,564.00 214		6,760.00 260		7,956.00 306
	5,590.00 215	6,760.01 -		THE RESIDENCE HOLD CONTRACTOR	7,982.00 307
	5,616.00 216	6,786.01 –	6,812.00 262		8,008.00 308
	5,642.00 217	6,812.01 -	6,838.00 263		8,034.00 309
	5,668.00 218	6,838.01 –	6,864.00 264		8,060.00 310
	5,694.00 219	6,864.01 –	6,890.00 265	.5	8,086.00 311
	5,720.00 220	6,890.01 –	6,916.00 266		8,112.00 312
	5,746.00 221	6,916.01 –			8,138.00 313
	5,772.00 222		6,968.00 268		8,164.00 314
5,772.01 –	5,798.00 223	6,968.01 –	6,994.00 269	8,164.01 –	8,190.00 315

Unemployment Insurance Benefit Table For New Claims with a Beginning Date of January 2, 2005 or After

Amount Wages Highest Q	in Benefit	Wages in	Benefit	Amount of Wages in Highest Quarter	Weekly Benefit Amount
¢ 0 100 01	8,216.00 \$316	¢ 0 296 01	9,412.00 \$362	¢10 E92 01 10 4	00.00 \$400
	8,242.00 317		9,438.00 363	\$10,582.01 - 10,6 10,608.01 - 10,6	
		70			
	8,268.00 318		9,464.00 364	10,634.01 - 10,6 10,660.01 - 10,6	
	8,294.00 319 8,320.00 320		9,490.00 365 9,516.00 366	10,686.01 – 10,6	
	8,346.00 321		9,542.00 367	10,712.01 – 10,7	
8,346.01 -		Secretary Actions on the Control of	9,568.00 368	10,738.01 – 10,7	
8,372.01 -		9,568.01 -	9,594.00 369	10,764.01 - 10,7	
8,398.01 -		9,594.01 -	9,620.00 370	10,790.01 – 10,8	
	8,450.00 325		9,646.00 371	10,816.01 – 10,8	
	8,476.00 326		9,672.00 372	10,842.01 – 10,8	
	8,502.00 327		9,698.00 373	10,868.01 – 10,8	
	8,528.00 328		9,724.00 374	10,894.01 – 10,9	
STATE OF THE PROPERTY OF THE PROPERTY OF	8,554.00 329		9,750.00 375	10,920.01 – 10,9	
557	8,580.00 330	9,750.01 -	9,776.00 376	10,946.01 – 10,9	
8,580.01 –		9,776.01 -	9,802.00 377	10,972.01 – 10,9	
M	8,632.00 332		9,828.00 378	10,998.01 – 11,0	
	8,658.00 333		9,854.00 379	11,024.01 – 11,0	
	8,684.00 334		9,880.00 380	11,050.01 – 11,0	
	8,710.00 335		9,906.00 381	11,076.01 – 11,1	
	8,736.00 336		9,932.00 382	11,102.01 - 11,1	
52	8,762.00 337		9,958.00 383	11,128.01 - 11,1	
8,762.01 -			9,984.00 384	11,154.01 – 11,1	
8,788.01 -			0,010.00 385	11,180.01 - 11,2	
8,814.01 -	8,840.00 340	10,010.01 - 1	0,036.00 386	11,206.01 – 11,2	32.00 432
8,840.01 -	8,866.00 341	10,036.01 - 1	0,062.00 387	11,232.01 - 11,2	58.00 433
8,866.01 -	8,892.00 342	10,062.01 - 1	0,088.00 388	11,258.01 - 11,2	84.00 434
8,892.01 -	8,918.00 343	10,088.01 - 1	0,114.00 389	11,284.01 - 11,3	10.00 435
8,918.01 -	8,944.00 344	10,114.01 - 1	0,140.00 390	11,310.01 - 11,3	36.00 436
8,944.01 -	8,970.00 345	10,140.01 - 1	0,166.00 391	11,336.01 – 11,3	62.00 437
8,970.01 -	8,996.00 346	10,166.01 – 1	0,192.00 392	11,362.01 - 11,3	88.00 438
8,996.01 -	9,022.00 347	10,192.01 – 1	0,218.00 393	11,388.01 - 11,4	14.00 439
9,022.01 -	9,048.00 348	10,218.01 - 1	0,244.00 394	11,414.01 – 11,4	40.00 440
9,048.01 -	9,074.00 349	10,244.01 – 1	0,270.00 395	11,440.01 – 11,4	66.00 441
9,074.01 -	9,100.00 350	10,270.01 – 1	0,296.00 396	11,466.01 – 11,4	92.00 442
9,100.01 -	9,126.00 351	10,296.01 – 1	0,322.00 397	11,492.01 – 11,5	18.00 443
9,126.01 -	9,152.00 352	10,322.01 – 1	0,348.00 398	11,518.01 – 11,5	44.00 444
9,152.01 -	9,178.00 353	10,348.01 – 1	0,374.00 399	11,544.01 – 11,5	
	9,204.00 354		0,400.00 400	11,570.01 – 11,5	
	9,230.00 355		0,426.00 401	11,596.01 – 11,6	
	9,256.00 356		0,452.00 402	11,622.01 – 11,6	
	9,282.00 357		0,478.00 403	11,648.01 – 11,6	
	9,308.00 358		0,504.00 404	11,674.01 – and	d over 450
	9,334.00 359		0,530.00 405		
	9,360.00 360		0,556.00 406		
9,360.01 –	9,386.00 361	10,556.01 – 1	0,582.00 407		

Waiting Period

The first week after you file your claim is normally the waiting period and benefits cannot be paid for that week.

Do not wait to file because the waiting period is not paid. The waiting period cannot begin until the claim is filed and you certify for the waiting period week.

In order to serve a waiting period, you must certify for benefits using one of the following methods: UI OnlineSM, EDD Tele-CertSM, or by mailing in the paper *Continued Claim form*, DE 4581.

Certifying for Benefits

After you have filed a UI claim, you must certify every two weeks that you are continuing to meet eligibility requirements to be paid benefits. The EDD will mail you a paper *Continued Claim form*, DE 4581, for you to certify by mail, but the EDD recommends that you certify online using UI OnlineSM at **www.edd.ca.gov/ui_online**, because it is a fast, convenient, and secure way to certify.

You may also certify by phone using the EDD Tele-CertSM at 1-866-333-4606. For more information on EDD Tele-CertSM, visit http://www.edd.ca.gov/unemployment/EDD_Tele-Cert.htm.

Payments

- You must meet UI eligibility requirements to be paid benefits.
- To meet the eligibility requirements, you must certify for benefits using one of the following methods: UI OnlineSM, EDD Tele-CertSM, or by mailing in the paper Continued Claim form, DE 4581.
- Payments are issued after you certify for benefits using one of the three methods of certification.
- No payments are made in advance.
- The first payment on a new California claim will usually be issued within three weeks after filing.
- You will normally be paid every two weeks. A new EDD Debit CardSM is issued when your first UI payment is issued. The card is valid for three years. Subsequent benefit payments are issued to the same card.
- Eligibility requirements for UI benefits have not changed and claimants must continue to meet all eligibility requirements in order to receive payment. For more information on the EDD Debit CardSM, visit www.edd.ca.gov/unemployment.

Reporting Earnings

All work and earnings must be reported in the week you work, even if you have not collected or received payment from the employer. Some types of income to report are:

Piece work

Idle time pay

Jury fees Commissions

Witness fees Reuse pay

Holiday pay

Holding fees
Pay Residuals (ask for form DE 4005)

Paid sick leave

Pension, retirement, annuity

Vacation pay

In-lieu-of-notice pay

Bonuses

Tips

Self-employment income

Strike benefits/picket pay

Stand-by-pay

Bereavement pay

Back-pay award

Workers' Compensation

Note:

You must report board, lodging, meals, or any other payment you receive instead of money when you work. If you are unsure about how to report wages, contact the EDD.

Part-Time Work

If you work less than full-time, you may still be eligible for UI benefits. The first \$25 or 25 percent of your gross total earnings for the week (whichever is greater) will not be counted. The amount remaining will be deducted from your weekly benefit amount. For example:

Your weekly benefit amount is \$50. You earn \$30. You must report the \$30, however, the first \$25 is not counted, leaving \$5 to deduct. You receive \$45 (\$50 minus \$5).

Your weekly benefit amount is \$115. You work less than full-time and earn \$124. You must report the \$124; however, the first \$31 (25 percent of \$124) is not counted, leaving \$93 to deduct. You receive \$22 (\$115 minus \$93).

If you receive any type of payment from a former employer and do not know if you should report the payment, contact the EDD and ask. You can also report the payment and give an explanation on your claim form. The EDD will determine whether or not the payments are deductible.

Eligibility

When you file a UI claim, the EDD will ask you a number of questions to determine your eligibility to receive benefits. Your eligibility for UI benefits is based upon the reason you are no longer working for your last employer.

If you are laid off, you are considered to be out of work through no fault of your own. If you quit your last job or if you were discharged, the EDD will need to determine if you left work for compelling reasons or if you were let go from work for reasons other than willful misconduct. If it is determined you are out of work through no fault of your own, you must meet continuing eligibility. When you certify for weekly benefits, each week you will be asked eligibility questions. When it appears that you may not meet the eligibility requirements of the law, you will receive a written notification of the date and time for a determination interview with the EDD. For some eligibility issues, you may be mailed a request for written information instead of being scheduled for an eligibility phone interview.

Employer Notification

Your last employer is notified when you file a claim. Also, any employer who contributed to your unemployment claim is notified when you are issued your first UI payment. An employer is required by law to furnish the EDD with any information that may affect your eligibility to receive benefits.

Verification of Social Security Number

The EDD may require you to verify your Social Security number (SSN) as being the one issued to you by the Social Security Administration (SSA).

Your eligibility for benefits may be affected if the information available to the EDD indicates any of the following:

- The SSN presented may belong to another individual.
- The SSN is not valid.
- The SSN was never issued by the SSA.
- The wages shown in the base period of the claim may belong to another individual.

Some of the most common errors associated with SSNs are:

- The SSN being used is incorrect. You may have forgotten the number or transposed the number when you provided it to your employer.
- The name at the SSA is different than the one you used to file your claim. You may have changed your name and not notified the SSA.
- The date of birth at the SSA is different than the date of birth you gave when you filed your claim.

If the EDD requires you to verify your SSN, you must submit a complete copy of your Social Security Statement, which you receive annually from the Social Security Administration. A copy of your Social Security card will not satisfy this requirement.

To access a copy of your complete Social Security Statement or locate your nearest SSA office, access the SSA website at www.ssa.gov.

Phone Interviews

Eligibility Phone Interviews

The EDD will contact you when there is a question regarding your eligibility if you:

- Quit your last job.
- Were fired from your last job.
- Are out of work due to a lockout or a strike.
- Quit, or are not able to work due to lack of child care.
- Are unable to work during normal working hours due to illness or injury.
- Are attending school during normal working hours.
- Did not have transportation.
- Did not look for work.
- Worked and/or earned wages that may reduce your UI benefits.
- Are receiving a pension.
- Are receiving workers' compensation.
- Mailed in a claim form late.
- Certify late using UI OnlineSM or EDD Tele-CertSM.
- Requested to have the beginning date of your claim backdated.
- Refused a job.
- Gave incorrect information or withheld information.

- Failed to participate in re-employment services.
- Are a school employee filing a claim during a school recess.
- Are a professional athlete filing a claim during the off-season.

Phone Interview/Contact by Mail

To resolve eligibility issues, the EDD will schedule you for a phone interview or contact you by mail for additional information. Failure to be available for a scheduled determination interview or failure to respond to the EDD request for information may result in a denial of UI benefits. If you are scheduled for a phone interview, the EDD will mail you a notice advising you of the date and time the phone interview will take place. An EDD interviewer will call you during this scheduled interview time. You have the right to request more time if you need to get more information, contact witnesses, or obtain the advice of a representative. If the eligibility issue involves an employer, the EDD interviewer may contact the employer for additional information.

The EDD interviewer will ask you questions, document the information gathered, and make a decision of eligibility.

If you are sent a written request for information and you respond by mail, the EDD interviewer will use the information provided by you to make a decision of eligibility.

If you are eligible, your payment will be authorized on the EDD Debit CardSM. If UI benefits are denied, you will be mailed a disqualification notice. The notice advises you of the reason for our decision and gives you appeal rights.

Important: If the EDD schedules a phone interview, or mails you a written request for information, you must continue to certify for benefits by using UI OnlineSM, EDD Tele-CertSM, or by mailing in your paper *Continued Claim form*, DE 4581. If you are determined to be eligible for UI benefits, we cannot issue you a payment until you certify for the week.

Appeals

You or the employer have 30 calendar days to appeal after a written notice is issued to you. Your appeal must be in writing and should state the reasons for your appeal. If you miss the 30-day deadline, you may still appeal but you must show good cause for the delay.

Before the hearing, you have the right to review all records affecting the appeal. Those records will be provided by the California Unemployment Insurance Appeals Board (CUIAB). For your appeal, you may represent yourself or you may be represented by someone such as a union official, an attorney, or anyone else you select.

Your appeal hearing is heard by an independent administrative law judge. The hearings are informal but all testimony is taken under oath and is subject to cross-examination. You will be notified when and where the hearing will be held.

If you are not satisfied with the administrative law judge's decision, you may appeal to the CUIAB.

Your rights to further appeal will be explained in the written decision that will be mailed to you.

When the appeal is pending, you must still continue to certify for UI benefits through UI OnlineSM, EDD Tele-CertSM, or by mailing in the paper *Continued Claim form*, DE 4581, for each week that you want to receive UI benefits.

Cancelling a Claim

You have the option of cancelling a California UI claim after you have been mailed your *Notice of Unemployment Insurance Award*, DE 429Z. You can only cancel a UI claim if no benefits have been paid, no notice of disqualification has been mailed to you, and/or no overpayment has been established on the claim. If a claim is cancelled, that claim cannot be reopened, but you can file a new UI claim with a later date. If the original claim is not cancelled, another California claim cannot be filed for 52 weeks from the start date of the claim.

Requesting Copies of Your Unemployment Insurance Documents If, for personal business reasons, you need copies of UI claim documents, contact the EDD.

Workers Not Covered

The following groups of workers are not normally covered by UI:

- Elected officials.
- Self-employed.
- Students enrolled and regularly attending classes at the school or education institution where employed.

- Members of a Limited Liability Company (LLC) that are treated as a partnership for federal income tax reporting purposes.
- A student's spouse who is working for an educational institution in an employment program provided for the purpose of financially aiding the student.
- Parents employed by their children.
- Husbands and wives employed by each other.
- Certain state-licensed salespersons paid only commissions.
- Caddies and jockeys.

If you do not know whether you are covered, do not waive your rights. Contact the EDD for more information.

Elective Coverage

Employers who employ individuals whose services are excluded from covered employment may, under certain conditions, elect to cover those services. If you are not sure whether you are eligible for these benefits, you should contact the EDD.

Pension or Retirement Pay

Your UI benefits may be affected if you are receiving a pension, retirement pay, annuity, or other similar payment based on your previous work. Your right to benefits will be determined by the EDD after your claim is filed.

Child Support Obligations

Your UI benefits may be affected if you are required to pay child support payments to a court, District Attorney's office, or other child support enforcement agency. Your entitlement to benefits will be determined after your claim is filed.

Extended Benefits

Extended benefits only become available when the insured unemployment rate equals or exceeds a certain percentage established by state and/or federal law or when the federal government approves special extended benefit legislation.

Generally, to be eligible for extended benefits you must have received all the benefits payable on your last regular claim. In addition, you must meet all eligibility criteria. You cannot establish an extended benefit claim if you can file another valid claim under any state or federal law.