



UNEMPLOYMENT INSURANCE FOR PART-TIME FACULTY

Spring 2020

Presenter: Marianne Reynolds,
California Teachers Association Staff

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

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).

COVID-19

All claims from March 29 to July 25, 2020 will include an additional \$600 every week

- EDD will automatically add \$600 every week certified to eligible claimants from March 29 to July 25, 2020. These funds are part of the Federal Pandemic Additional Compensation (PAC). You don't need to be out of work due to COVID-19.

The new Pandemic Unemployment Assistance (PUA) program helps unemployed Californians who are business owners, self-employed, independent contractors, have limited work history, and others not usually eligible for regular state UI benefits who are out of business or services are significantly reduced as a direct result of the pandemic.

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.

MEETING ELIGIBILITY REQUIREMENTS

- You must:
 - Have received enough wages during the base period to establish a claim.
 - 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.
 - During COVID-19, ok to answer “no.”
 - Meet eligibility requirements each week benefits are claimed.

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 at the first district; then, after each district's last final—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 exact! If you report the wrong dates, you can be penalized because EDD checks with the district(s).
- On the EDD website, read the section “Apply for UI Benefits” to help you gather all the materials you need.

UNDER-EMPLOYMENT

- Under-employment occurs when you receive Unemployment 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 putting down 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.

COVID-19

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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.

APPLYING

- Apply on the day of your last final exam 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).
- Apply online at:

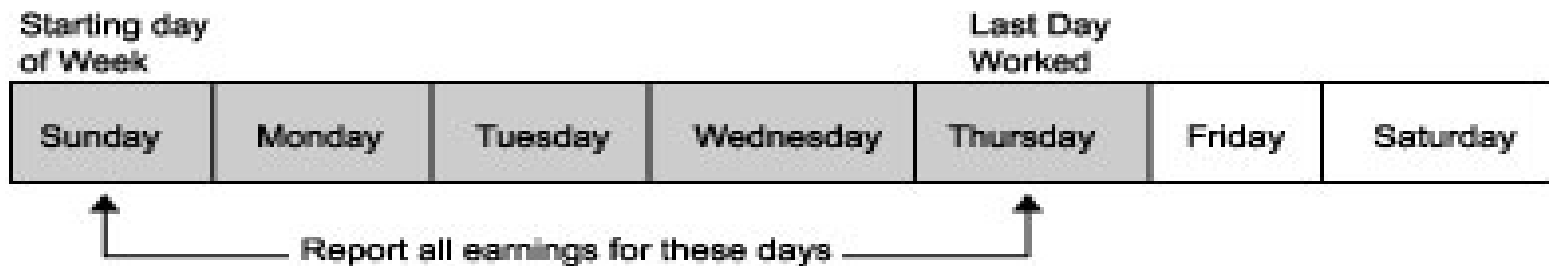
www.edd.ca.gov



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 (Fisherman) (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

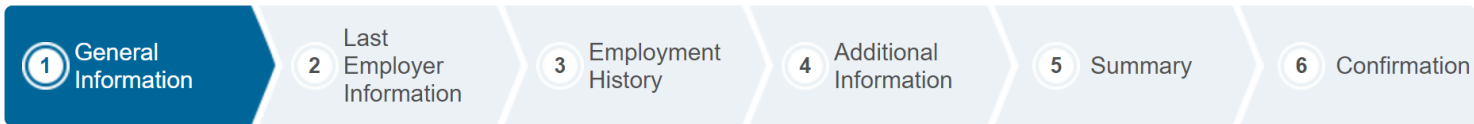
Note: The answers you give to the questions on the application must be true and correct. You may be subject to penalties if you make a false statement or withhold information.

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➔ Applicant Information



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

Provide the Social Security number that was issued to you by the Social Security Administration.

If you were assigned an ECN (9-digit number beginning with 999 or 990) by the EDD, provide that ECN under question 1 and provide your SSN under question 2.

*Indicates required field

1. *Social Security number (SSN) or EDD Client Number (ECN)

..... Unhide

1a. Confirm the last 4 digits of your SSN. ?

.... Unhide

1b. Was this Social Security number issued to you or issued on your behalf by the Social Security Administration? ?

Yes No

2. If you have used any other Social Security numbers, list them. ?

Unhide

Unhide

3. *Date of Birth

12/17/1971 (MM/DD/YYYY)

4. *Gender

Female Male

5. Applicant Name ?

*First Name: Dan

Middle Initial: D

*Last Name: Lion

Yes No

6. *Is this the name that appears on your Social Security card?

7. If you have used any other names, list them. ?

First Name

Last Name

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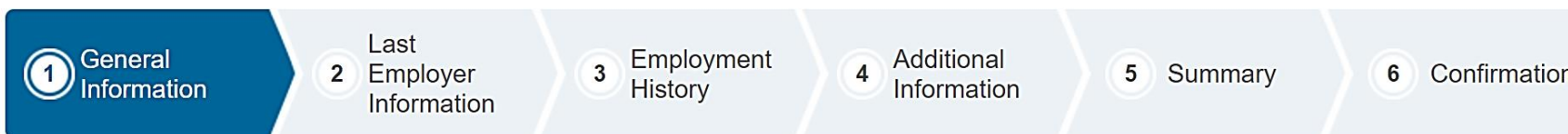
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California Employment Development Department

➔ Driver License or ID Card Information



Provide your Driver License or Identification card number, even if it is from a state other than California.

If you have not been issued a Driver License or ID card answer "no" to question 1.

*Indicates required field

1. *Do you have a state issued Driver License or ID card? [?](#)

Yes No

1a. Select the issuing state or entity.

CA - California ▼

1b. Enter Driver License or ID card number. [?](#)

C1769090

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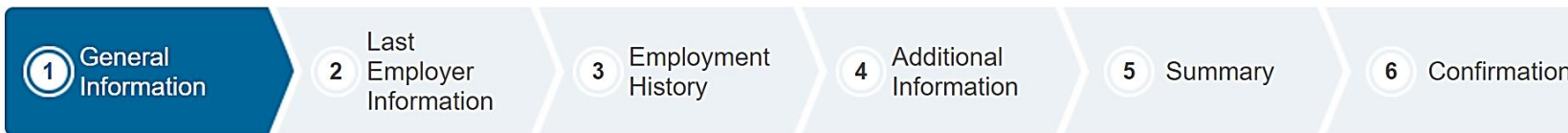
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California Employment Development Department

➔ Prior Claim Information



Provide the filing date of any claims that you have filed within the last two years.

This includes Unemployment Insurance (UI) Disability Insurance and Paid Family Leave (DI/PFL).

Provide the month and year that you filed a claim, whether you were paid or not.

*Indicates required field

1. *Between 04/30/2018 - 04/29/2020 did you file a claim(s), reopen a claim(s), or collect benefits under the Unemployment Insurance (UI), Disability Insurance (DI) or Paid Family Leave (PFL) program(s)? Yes No

Provide the most recent transaction date(s) you had with UI, DI, or PFL.

1a. ?	Claim Type Unemployment Insurance ▼	Claim Month May ▼	Claim Year 2019 ▼
1b.	-Select One- ▼	-Select One- ▼	-Select One- ▼

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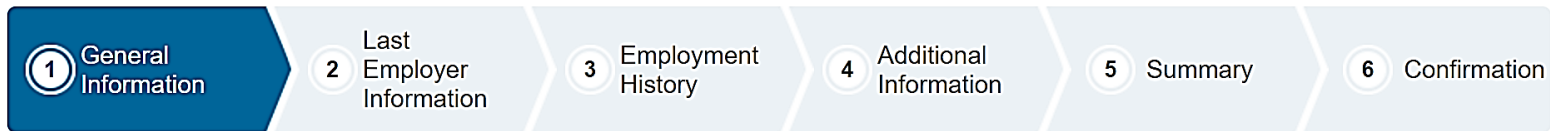
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California Employment Development Department

➔ Contact Information



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: ? United States ▼

*Number, Street, and Apartment/Unit or PO Box Number: ? 4545 Spring Drive

*City: Orange

*State: CA - California ▼

*ZIP Code: 92868

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. ?

-Select One- ▼

4. Phone Number ?

7145551212

4a. Phone Type

Cell Phone ▼

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➔ Citizenship & Statistical Information

1 General Information

2 Last Employer Information

3 Employment History

4 Additional Information

5 Summary

6 Confirmation

*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 
2. *Are you a Veteran? Yes No
3. *What race or ethnic group do you identify with?
4. *Do you have a disability? 
5. *Preferred spoken/written language?

Spoken Language:

Written Language:

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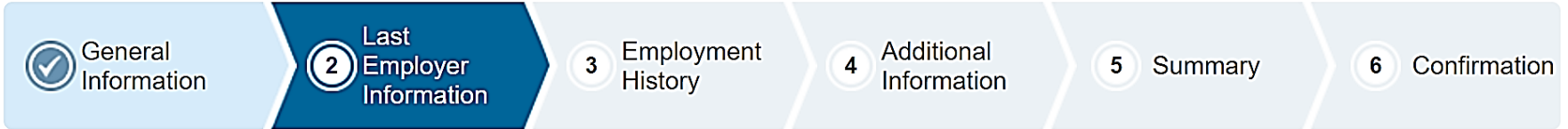
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California Employment Development Department

➔ Last Employer Information



Provide additional details in the Last Employer Information section and select Next.

*Indicates required field

Last Employer

Employer Name	Employer Mailing Address	Employer Physical Address	Action
Marcel Marceau College	1111 Shhh Drive Quiet, CA 92866 Phone Number: 7142234542	1111 Shhh Drive Quiet, CA 92866 Phone Number: 7142234542	Modify Delete

Not your department chair. Should be an administrator.

Last Employer

Employer Name	Employer Mailing Address	Employer Physical Address	Action
Marcell Marceau College	1111 Shhh Drive Quiet, CA 92866 Phone Number: 7142234542	1111 Shhh Drive Quiet, CA 92866 Phone Number: 7142234542	Modify Delete

Last Employer Information

1. *What is the first and last name of your immediate supervisor? Fred Flint

2. *Last Date Worked 04/29/2020 (MM/DD/YYYY)

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.

	Amount	From Date
4a. <input type="checkbox"/> Holiday Pay		
4b. <input type="checkbox"/> Vacation Pay		
4c. <input type="checkbox"/> Severance Pay		
4d. <input type="checkbox"/> In-Lieu-Of-Notice Pay		
4e. <input type="checkbox"/> Other Pay		

4e.1. Explain Other Pay.

4e.1. Explain Other Pay.

Separation Explanation dropdown menu:

- Select One-
- Related to the coronavirus (COVID-19)
- Assignment completed
- Bad/inclement 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)

This is the reason.

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COVID-19

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→ Employment Information

1 General Information

2 Last Employer Information

3 Employment History

4 Additional Information

5 Summary

6 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 Marcel Marceau College as your last employer. If you worked for Marcel Marceau College from 01/01/2019 to 03/31/2020, add additional information below.

Add Employment Information

Add additional employer information if applicable.

1. *Did you work for any employer from 01/01/2019 to 03/31/2020?

Yes No

If Yes, select the Add Employer button and add the employer details for each employer you've worked for.

CLICK HERE

Add Employer

Employer Details



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:

*Mailing Address:

*City:

*State:

*ZIP Code:

(MM/DD/YYYY)

(MM/DD/YYYY)

Part Time Full Time

2. *First day you worked for this employer?

3. *Last day you worked for this employer?

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

5. How much did you earn per hour?

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

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

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

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

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

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

Gross wages earned from 04/01/2019 to 06/30/2019:

Gross wages earned from 01/01/2019 to 03/31/2019:

Base Wages

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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. 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

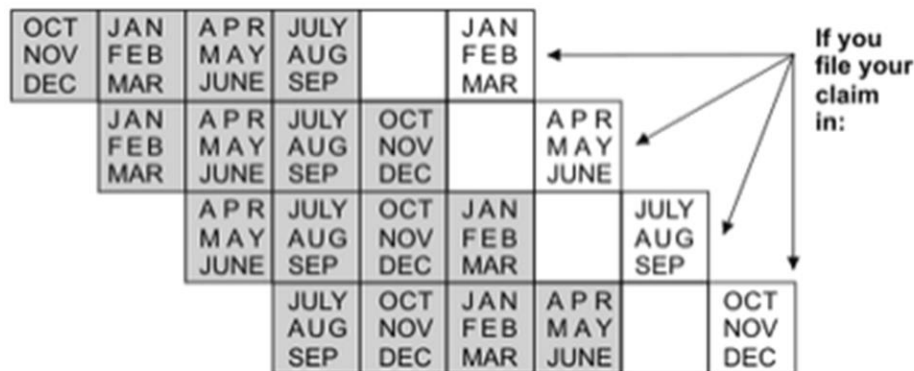
December

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 at the end of Spring 2020 semester, you will need total earnings from ALL jobs going back to January 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.



→ Employment Information

- 1 General Information
- 2 Last Employer Information
- 3 Employment History
- 4 Additional Information
- 5 Summary
- 6 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 Marcel Marceau College as your last employer. If you worked for Marcel Marceau College from 01/01/2019 to 03/31/2020, add additional information below.

Add Employment Information

Add additional employer information if applicable.

1. *Did you work for any employer from 01/01/2019 to 03/31/2020? Yes No
 If Yes, select the Add Employer button and add the employer details for each employer you've worked for.

Employer Name	Employer Details
Marcel Marceau College	Modify Delete

Add Employer

Employment History

1. From 01/01/2019 to 03/31/2020, did you work for any other employers not listed above? Yes No
2. From 01/01/2019 to today, which employer did you work for the longest? [?](#)
- 2a. How long did you work for that employer? [?](#)
- Years:
- Months:
- 2b. Select the industry that best describes this employer. [?](#)
- 2c. What type of business did that employer operate? (For example: retail furniture sales, legal services, software manufacturing, road construction, etc.) [?](#)
- Add Business Type
- 2d. What kind of work did you do for that employer? [?](#)
- Add Work Type

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Save as Draft

Cancel

Next



→ 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:

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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Save



→ Work Type



Search for the type of work you performed with the employer you worked for the longest in the past 18 months.

Once you choose the type of work select Save.

*Indicates required field

*Work Type:

Search Results

1 2

Select	Work Type	Description
<input type="radio"/>	FACULTY MEMBER, COLLEGE OR UNIVERSITY	HEALTH ASSESSMENT AND TREATMENT TEACHERS, POSTSECONDARY
<input checked="" type="radio"/>	FACULTY MEMBER, COLLEGE OR UNIVERSITY	ART, DRAMA, AND MUSIC TEACHERS, POSTSECONDARY



➔ School Employee Information

✓ General Information

✓ Last Employer Information

✓ Employment History




4 Additional Information

5 Summary

6 Confirmation

Answer the school employee question(s).

*Indicates required field

1. *Did you work for or provide services to or on behalf of any educational institution between 01/01/2019 to today? 
- 1a. Are you applying for Unemployment Insurance benefits because you are currently in a recess period or on a school break? 
- 1b. Has your employer given you reasonable assurance (a verbal, written, or implied agreement), that you will return to work after the recess period or school break ends? 
- Yes No
- Yes No
- Yes No

Even if you have a schedule for next semester, it is NOT reasonable assurance!

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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.”



Availability Information



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? ?

Add Work Type

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

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? If you are impacted by the COVID-19 pandemic, click No. ?

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? ?

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

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

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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Cancel

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➔ Additional Information

✓ General Information

✓ Last Employer Information

✓ Employment History




4 Additional Information

5 Summary

6 Confirmation

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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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.



➔ 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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→ 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) or EDD Client Number (ECN) | ***** |
| | 1a. Confirm the last 4 digits of your SSN. | 1264 |
| | 1b. Was this Social Security number issued to you or issued on your behalf by the Social Security Administration? | Yes |
| 2. | If you have used any other Social Security numbers, list them. | |
| 3. | Date of Birth | 12/17/1971 |
| 4. | Gender | Male |
| 5. | Applicant Name | |
| | | First Name: Dan |
| | | Middle Initial: D |
| | | Last Name: Lion |
| 6. | Is this the name that appears on your Social Security card? | Yes |
| 7. | If you have used any other names, list them. | |

Driver License or ID Card Information

Edit

- | | | |
|----|---|-----------------|
| 1. | Do you have a state issued Driver License or ID card? | Yes |
| | 1a. Select the issuing state or entity. | CA - California |
| | 1b. Enter Driver License or ID card number. | C1769090 |

Prior Claim Information

Edit

1. Between 04/30/2018 - 04/29/2020 did you file a claim(s), reopen a claim(s), or collect benefits under the Unemployment Insurance (UI), Disability Insurance (DI) or Paid Family Leave (PFL) program(s)? **Yes**

Provide the most recent transaction date(s) you had with UI, DI, or PFL.

	Claim Type	Claim Month	Claim Year
1a.	Unemployment Insurance	May	2019
1b.			

Contact Information

Edit

1. What is your mailing address?

Location: **United States**

Number, Street, and Apartment/Unit or PO Box Number: **4545 Spring Drive**

City: **Orange**

State: **CA - California**

ZIP Code: **92868**

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 **7145551212**
- 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
Marcel Marceau College	1111 Shhh Drive Quiet, CA 92866 Phone Number: 7142234542	1111 Shhh Drive Quiet, CA 92866 Phone Number: 7142234542

Last Employer Information

[Edit](#)

1. What is the first and last name of your immediate supervisor?

Bip Clown

2. Last Date Worked

04/29/2020

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 04/26/2020: \$
Monday 04/27/2020: \$ **195**
Tuesday 04/28/2020: \$ **195**
Wednesday 04/29/2020: \$ **195**
Thursday 04/30/2020: \$
Friday 05/01/2020: \$
Saturday 05/02/2020: \$
Total gross earnings: \$ **585.00**

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: **School employee between semesters or terms, likely to return**

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			

Add Employment Information

Edit

1. Did you work for any employer from 01/01/2019 to 03/31/2020? **Yes**
If Yes, select the Add Employer button and add the employer details for each employer you've worked for.

Employer Name

Marcel Marceau College

1. Employer Information

Employer Name: **Marcel Marceau College**
Mailing Address: **1111 Shhh Drive**
City: **Quiet**
State: **CA**
ZIP Code: **92866**

2. First day you worked for this employer? **02/01/2017**
3. Last day you worked for this employer? **04/29/2020**
4. Did you work full time or part time? **Part 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 04/01/2020 to 06/30/2020: **2340**
Gross wages earned from 01/01/2020 to 03/31/2020: **4095**
Gross wages earned from 10/01/2019 to 12/31/2019: **5850**
Gross wages earned from 07/01/2019 to 09/30/2019: **3510**
Gross wages earned from 04/01/2019 to 06/30/2019: **2340**
Gross wages earned from 01/01/2019 to 03/31/2019: **4095**

Employment History

Edit

1. From 01/01/2019 to 03/31/2020, did you work for any other employers not listed above? **No**
2. From 01/01/2019 to today, which employer did you work for the longest? **Marcel Marceau College**
2a. How long did you work for that employer?
Years: **3**
Months: **3**
2b. Select the industry that best describes this employer. **City/County/School District/Special District**
2c. What type of business did that employer operate? (For example: retail furniture) **Education**

School Employee Information

Edit

1. Did you work for or provide services to or on behalf of any educational institution between 01/01/2019 to today? **Yes**
1a. Are you applying for Unemployment Insurance benefits because you are currently in a recess period or on a school break? **Yes**
1b. Has your employer given you reasonable assurance (a verbal, written, or implied agreement), that you will return to work after the recess period or school break ends? **No**

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? If you are impacted by the COVID-19 pandemic, click No. | 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? | IVCPTFA |
| 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? | 7145605463 |
| 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](#)

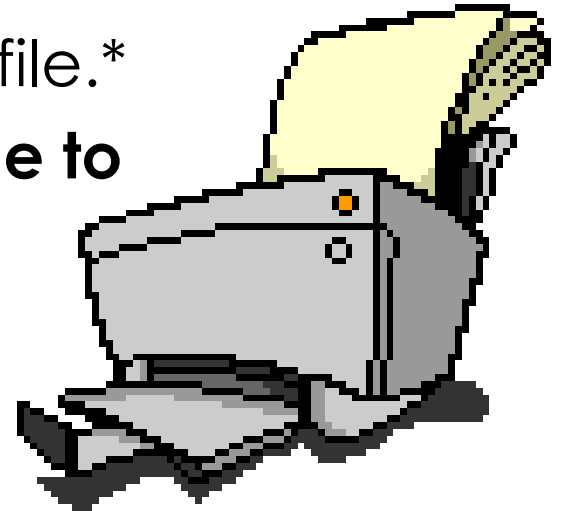
- | | |
|--|----|
| 1. Are you unemployed as a direct result of a recent disaster (for example: COVID-19, earthquake, flood, mudslide, or fire) in California? | No |
|--|----|

[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 NOT JUST MISS IT!** If you know that you will not be available, call EDD 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.

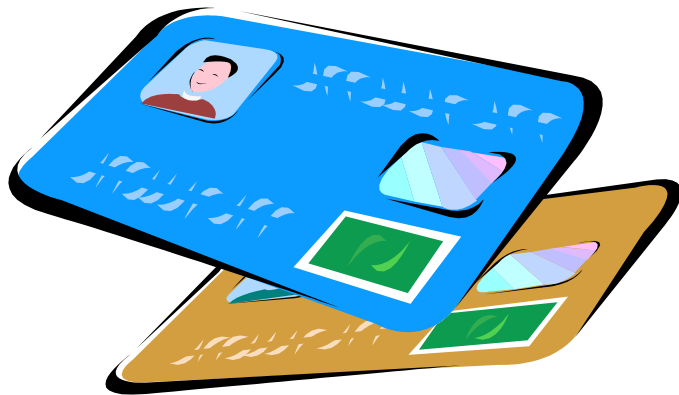


NOW WHAT? REOPENING A CLAIM

- 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
 - 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.

The presenter is not an official representative of EDD and does not have the authority to speak on behalf of EDD.

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