

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.

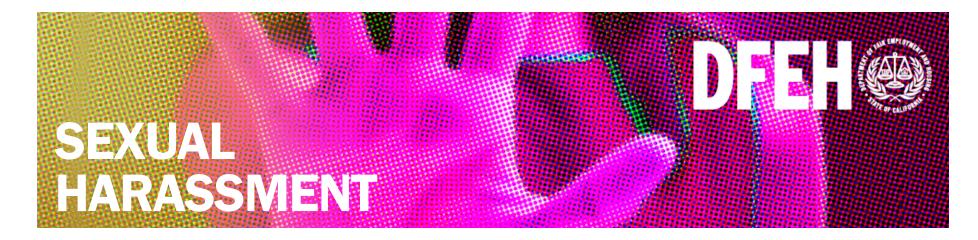
There are two types of sexual harassment

- **1.** "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.
- **2.** "Hostile work environment" sexual harassment occurs when unwelcome comments or conduct based on sex unreasonably interferes with your work performance or creates 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. A single act of harassment may be sufficiently severe to be unlawful.

Behaviors that may be sexual harassment

- 1. Unwanted sexual advances
- 2. 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
- **5.** Graphic comments, sexually degrading words, or suggestive or obscene messages or invitations
- 6. 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 three years* 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.

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 supervisor 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.

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

- **1.** Distribute copies of this document or an alternative writing that complies with Government Code 12950. This document may be duplicated in any quantity.
- **2.** Post a copy of the DFEH employment poster "California Law Prohibits Workplace Discrimination and Harassment."
- **3.** Develop 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.
- **4.** Distribute 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 acknowledgment 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.
- 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.
- **6.** In addition, employers who do business in California and employ 5 or more part-time or full-time employees must provide at least one hour of training regarding the prevention of sexual harassment, including harassment based on gender identity, gender expression, and sexual orientation, to each non-supervisory employee; and two hours of such training to each supervisory employee. All employees must be trained by January 1, 2021. Beginning January 1, 2021, new supervisory employees must be trained within six months of assuming their supervisory position, and new non-supervisory employees must be trained within six months of hire. Employees must be retrained once every two years. Please see Gov. Code 12950.1 and 2 CCR 11024 for further information.

CIVIL REMEDIES

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

To schedule an appointment, contact the Communication Center below.

If you have a disability that requires a reasonable accommodation, the DFEH can assist you by scribing your intake by phone or, for individuals who are Deaf or Hard of Hearing or have speech disabilities, through the California Relay Service (711), or you can contact us below.

CONTACT US

Toll Free: (800) 884-1684 TTY: (800) 700-2320 contact.center@dfeh.ca.gov www.dfeh.ca.gov

* Effective 1/1/2020. DFEH-185P-ENG / December 2019

The Labor Commissioner's Office

EMPLOYERS MUST PROVIDE THIS INFORMATION TO NEW WORKERS WHEN HIRED AND TO OTHER WORKERS WHO ASK FOR IT

RIGHTS OF VICTIMS OF DOMESTIC VIOLENCE, SEXUAL ASSAULT, STALKING, CRIMES THAT CAUSE PHYSICAL INJURY OR MENTAL INJURY, AND CRIMES INVOLVING A THREAT OF PHYSICAL INJURY; AND OF PERSONS WHOSE IMMEDIATE FAMILY MEMBER IS DECEASED AS A DIRECT RESULT OF A CRIME

Your Right to Take Time Off:

- You have the right to take time off from work to obtain relief from a court, including obtaining a restraining order, to protect you and your children's health, safety or welfare.
- If your company has 25 or more workers, you can take time off from work to get medical
 attention for injuries caused by crime or abuse, receive services from a domestic
 violence shelter, program, rape crisis center, or victim services organization or agency
 as a result of the crime or abuse, receive psychological counseling or mental health
 services related to an experience of crime or abuse, or participate in safety planning
 and take other actions to increase safety from future crime or abuse.
- You may use accrued paid sick leave or vacation, personal leave, or compensatory time off that is otherwise available for your leave unless you are covered by a union agreement that says something different. Even if you don't have paid leave, you still have the right to time off.
- In general, you don't have to give your employer proof to use leave for these reasons.
- If you can, you should tell your employer before you take time off. Even if you cannot tell your employer beforehand, your employer cannot discipline you if you give proof explaining the reason for your absence within a reasonable time. Proof can be a police report, a court order, a document from a licensed medical professional, a victim advocate, a licensed health care provider, or counselor showing that you were undergoing treatment for domestic violence related trauma, or a written statement signed by you, or an individual acting on your behalf, certifying that the absence is for an authorized purpose.

Your Right to Reasonable Accommodation:

You have the right to ask your employer for help or changes in your workplace to make sure you are safe at work. Your employer must work with you to see what changes can be made. Changes in the workplace may include putting in locks, changing your shift or phone number, transferring or reassigning you, or help with keeping a record of what happened to you. Your employer can ask you for a signed statement certifying that your request is for a proper purpose, and may also request proof showing your need for an accommodation. Your employer cannot tell your coworkers or anyone else about your request.

Your Right to Be Free from Retaliation and Discrimination:

Your employer cannot treat you differently or fire you because:

- You are a victim of domestic violence, sexual assault, stalking, a crime that caused physical injury or mental injury, or a crime involving threat of physical injury; or are someone whose immediate family member is deceased as a direct result of a crime.
- You asked for leave time to get help.
- You asked your employer for help or changes in the workplace to make sure you are safe at work.

You can file a complaint with the Labor Commissioner's Office against your employer if he/she retaliates or discriminates against you.

For more information, contact the California Labor Commissioner's Office. We can help you by phone at 213-897-6595, or you can find a local office on our website: www.dir.ca.gov/dlse/DistrictOffices.htm. If you do not speak English, we will provide an interpreter in your language at no cost to you. This Notice explains rights contained in California Labor Code sections 230 and 230.1. Employers may use this Notice or one substantially similar in content and clarity.

Labor Commissioner's Office Victims of Domestic Violence, Sexual Assault and Stalking Notice

3/2021



About California Paid Family Leave

California's Paid Family Leave program was created for those moments that matter. Benefits are available to care for a seriously ill family member, to bond with a new child, or to participate in a qualifying military event.

Facts About California Paid Family Leave

- Provides up to eight weeks of partial wage replacement benefits. Leave doesn't have to be taken all at once.
- Provides approximately 60 to 70 percent of your weekly salary.
- Funded through your State Disability Insurance tax withholding, noted as "CASDI" on paystubs, or a qualifying voluntary plan paid into in the past 5 to 18 months.
- To bond with a new child, leave can be taken anytime within the first 12 months of a child entering your family.
- Citizenship and immigration status do not affect eligibility.

What if My Claim Is Denied?

If your claim is denied, you have the right to:

- Know the reason for denial.
- Appeal decisions about your eligibility for benefits.
 Visit <u>Appeals</u> (edd.ca.gov/Disability/Appeals.htm) for information.

All claim information is confidential except for purposes allowed by law.



Paid Family Leave

Be there for the moments that matter.

1-877-238-4373 **English** Spanish 1-877-379-3819 1-866-692-5595 Cantonese Vietnamese 1-866-692-5596 Armenian 1-866-627-1567 Punjabi 1-866-627-1568 1-866-627-1569 **Tagalog** TTY 1-800-445-1312

Visit a Paid Family Leave or State Disability Insurance Office (edd.ca.gov/Disability/ Contact_SDI.htm) near you to obtain claim forms, receive information, or speak to a representative.

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:

- Take time off from work to care for a seriously ill family member, to bond with a new child or to participate in a qualifying military event.
- Be covered by State Disability Insurance or a voluntary plan in lieu of State Disability Insurance.
- Have earned at least \$300 in the past 5 to 18 months.
- Submit your claim no later than 41 days after you begin your family leave. Do not file before your first day of leave.

How Are Benefit Amounts Calculated?

Benefits are 60 to 70 percent of your highest quarterly earnings 5 to 18 months before your claim begins.

Estimate your benefits at <u>Disability Insurance and Paid Family Leave Calculator</u> (edd.ca.gov/PFL_Calculator).

Does Paid Family Leave Provide Job Protection?

California Paid Family Leave does not provide job protection. Job protection may be provided if you qualify under other laws:

- Federal <u>Family and Medical Leave Act</u> (dol.gov/agencies/whd/fmla).
- California Family Rights Act. <u>Department of Fair</u> <u>Employment and Housing</u> (dfeh.ca.gov).
- New Parent Leave Act. <u>Department</u> of Fair Employment and Housing (dfeh.ca.gov).

Notify your employer of your plan to take leave and the reason for taking leave according to your company's policy.

How Do I Apply for Benefits?

You can apply for Paid Family Leave benefits using SDI Online (edd.ca.gov/SDI_Online).

To file by mail, you must complete and submit a Claim for Paid Family Leave (PFL) Benefits (DE 2501F) form. Learn more at File a Paid Family Leave Claim by Mail (edd.ca.gov/disability/How_to_File_a_PFL_Claim_by_Mail.htm).

Caregiving Claims

Provide medical certification for your seriously ill family member who requires your care. This certification needs to be from their licensed health professional. You must also provide information about the family member you are caring for and their signature.

Bonding Claims

Provide documents that show your relationship to your child. This can be a copy of your child's birth certificate, adoptive placement agreement, or foster care placement record.

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

Military Assist Claims

Military assist claims require two types of supporting documents. This can be proof of covered active duty or call to covered active duty and documentation of the qualifying event.

Voluntary Plans

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

DI Office Locations and Mailing Addresses

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

- 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)

- - California State Government Employees (PO Box 2168, Stockton, CA 95201-2168)
- Van Nuys15400 Sherman Way, Rm. 500 (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. TTY users, please call the California Relay Service at 711.



DISABILITY INSURANCE PROVISIONS





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 State Disability Insurance (edd.ca.gov/disability), or contact the Employment Development Department (EDD) DI customer service at 1-800-480-3287 or EDD employment tax customer service at 1-888-745-3886.

DI Plans

- State Plan. The DI state plan is covered in this brochure.
- Voluntary Plan (VP). A private plan, which may be substituted for the State Plan. Voluntary Plans are established if the employer and majority of employees agree to do so. VP information and filing a claim is 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 under SDI. 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 differences in eligibility requirements from those listed in this pamphlet.

For additional information or to apply for coverage, contact the EDD DI customer service at 1-800-480-3287, the EDD employment tax customer service at 1-888-745-3886, or visit State Disability Insurance (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.
- Online: <u>State Disability Insurance</u> (edd.ca.gov/disability).
- By phone: 1-800-480-3287.
- By mail: EDD, Disability Insurance, PO Box 989777, West Sacramento, CA 95798-9777.
- California state government employees covered by SDI should call 1-866-352-7675.
- 2. If filing through SDI Online, complete all required fields. SDI Online will provide a receipt number once the 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.
- 3. Have your physician/practitioner complete 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 medical or osteopathic physician and surgeon.
- Nurse practitioner.
- Physician assistant.
- Chiropractor.
- Dentist.Podiatrist.
- Optometrist.
- Designated psychologist.
- Authorized medical officer of a United States governmental 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

- If you are eligible to receive benefits, you have two payment options: by EDD Debit CardSM through Bank of America, or by a check. You do not have to accept the EDD Debit Card. Please allow 7 to 10 days for delivery of checks in the mail.
- 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 eligibility information 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, 2021, uses a base period of October 1, 2019, through September 30, 2020.)
- April, May, or June, your base period is the 12 months ending last December 31. (Example: A claim beginning June 20, 2021, uses a base period of January 1, 2020, through December 31, 2020.)
- July, August, or September, your base period is the 12 months ending last March 31. (Example: A claim beginning September 27, 2021, uses a base period of April 1, 2020, through March 31, 2021.)
- October, November, or December, your base period is the 12 months ending last June 30. (Example: A claim beginning November 2, 2021, uses a base period of July 1, 2020, through June 30, 2021.)

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. Your DI benefits may be affected if your employer continues to pay you wages during your DI claim. 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 SDI 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 (UI) 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.

Your Rights

- 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

- Complete your claim and other forms correctly 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 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** (for TTY users 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 UI program by visiting <u>Unemployment Insurance</u> (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 listed at Service Locator (careeronestop.org/LocalHelp/service-locator.aspx) 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. <u>Social Security Administration</u> (ssa.gov) or by phone at 1-800-772-1213 (TTY 1-800-325-0778).

If you need time off work for a family leave, PFL provides benefits to:

- Care for a seriously ill family member (child, parent, parent-in-law, grandparent, grandchild, sibling, spouse, or registered domestic partner).
- Bond with a new child entering the family (through birth, adoption, or foster care placement).
- Participate in a qualifying event resulting from a family member's (spouse, registered domestic partner, parent, or child) military deployment to a foreign country.

Contact the EDD PFL program by visiting <u>State Disability Insurance</u> (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).



FOR YOUR BENEFIT:

California's Programs for the Unemployed

Unemployment Insurance
Disability Insurance
Paid Family Leave
Workforce Services

For Your Benefit: California's Programs for the Unemployed

This publication provides information about programs offered by the Employment Development Department (EDD) for unemployed Californians This is for general information only and it is not a legal document.

This is for general information only and it is not a legal document.
Additional information is available by visiting the <u>EDD online</u> (edd.ca.gov).
Unemployment Insurance (UI)
State Disability Insurance (SDI)
Paid Family Leave (PFL)
Workforce Services
How to Get Help

Unemployment Insurance (UI)

UI is paid for by your employer and provides partial wage replacement when you are unemployed and meet all eligibility requirements.

Who Should File a UI Claim

You may file a claim for UI benefits if you are out of work or your hours have been reduced.

To be eligible for UI benefits, you must have earned enough wages during the base period to establish a claim, and be:

- Totally or partially unemployed.
- Unemployed through no fault of your own.
- Physically able to work.
- Available for work.
- Ready and willing to accept work immediately.
- Actively looking for work.

When to File

You may apply for benefits as soon as you are unemployed or your work hours are reduced. Your claim will begin on the Sunday of the week in which you file your claim.

All claims have a one-week, unpaid waiting period. The waiting period does not begin until you file a claim, certify for benefits, and meet all eligibility requirements.

What You Need to File

To file a claim, you need to provide your:

- Name, (including all names you used while working) and Social Security number.
- Mailing and residence address (if different) and phone number.
- Last employer's complete name, address (mailing and physical location), and phone number.
- Last day worked and the reason you're no longer working (laid off, quit, fired, or left work because of a trade dispute).
- Work history during the 18 months prior to filing your claim, including out-of-state employment. Include all employers' names, dates employed, and wages earned.
- State-issued driver license number or identification card number.
- Citizenship status and if you have the legal right to work in the
 United States. If you indicate you're registered with the United States
 Citizenship and Immigration Services (USCIS, formerly INS) and
 authorized to work in the United States, you'll be asked for the title of
 your employment authorization document and information from the
 USCIS document, such as the Alien Registration Number, card number,
 and/or expiration date.

Note: Your last employer's name and address are very important, regardless of how long you worked for the employer(s). If you worked part-time, provide the number of hours you worked each week.

If you served in the military in the last 18 months, you will need to provide information from your DD214 Member Copy 4.

If you worked for the federal government during the last 18 months, you will need to provide information from your *Notice to Federal Employees About Unemployment Insurance*, Standard Form 8.

Warning

Making a false statement or withholding information to receive benefits can be a felony. Penalties may include fines, a loss of benefits, and/or criminal prosecution. See additional information on fraud and penalties on page 12.

Employer Notification

Your last employer is notified when you file a UI claim. Although your eligibility is determined by the EDD, employers fund the UI program and are required by law to provide any information that may affect your eligibility to receive benefits.

Types of Claims

The claim you file depends on the type of employer you worked for and the state(s) where you worked.

You will file a:

- Regular California claim if you only worked in California, even if you now live outside of California.
- Federal claim if your employment was in civilian work for the federal government.
- Military claim if you served as a member of the United States Armed Forces.
- Combined wage claim if you earned wages in California and in at least one other state during the last 18 months.
- Interstate claim if you now reside in California and only worked in another state during the last 18 months. File your claim directly with the other state, the District of Columbia, Puerto Rico, or Canada. If you worked in the U.S. Virgin Islands, contact the EDD at 1-800-300-5616.

How to File

You may file a UI claim using one of the following methods:

• Online

UI OnlineSM is the fastest and most convenient way to file your UI claim. Visit <u>UI Online</u>SM (edd.ca.gov/UI_Online) to get started.

Phone

Speak to an EDD representative Monday through Friday between 8 a.m. and 12 noon (Pacific Time), except on state holidays. Refer to page 19 for a list of UI phone numbers.

Fax or Mail

When filing a claim with UI Online some customers will be instructed to fax or mail their UI application to the EDD. If this occurs, the paper *Unemployment Insurance Application* (DE 1101I) will display for you to complete and submit.

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

Beginning Date of Claim

Your claim begins on the Sunday of the week in which you file your claim.

Ending Date of Claim

Your claim ends on the Saturday, 52 weeks after your claim begins. If you exhaust your benefits prior to this date, you cannot file another California claim until the benefit year of the claim ends.

If you worked in another state during the last 18 months, you may be eligible to file a new claim in that state.

Minimum Earnings to Establish a Valid Claim

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 1.25 times your highest quarter earnings in your total base period.

For example: If you have \$900 earnings in your highest quarter, you would also be required to have earned a total of \$1,125 in the base period $($900 \times 1.25 = $1,125)$.

How UI Benefits are Calculated

The quarter in which you were paid the highest wages during the base period determines your weekly benefit amount (WBA). The WBA ranges from \$40 to \$450 per week.

The maximum benefit amount is 26 times the weekly benefit amount or one-half of the total base period wages, whichever is less.

Refer to the **Unemployment Insurance Benefit Table** on page 16 to estimate your WBA.

Base Period

There are two types of base periods used to establish a claim: the standard base period and the alternate base period.

Standard Base Period (SBP)

The SBP is the first four of the last five completed calendar quarters prior to the beginning date of the claim.

Refer to the chart below. The shaded area represents a standard base period. The non-shaded area represents the quarter the claim is filed.

OCT NOV DEC	JAN FEB MAR	APR MAY JUNE	JULY AUG SEPT		JAN FEB MAR	←		claim ns in:
	JAN FEB MAR	APR MAY JUNE	JULY AUG SEPT	OCT NOV DEC		APR MAY JUNE	▲	
·		APR MAY JUNE	JULY AUG SEPT	OCT NOV DEC	JAN FEB MAR		JULY AUG SEPT	↓
			JULY AUG SEPT	OCT NOV DEC	JAN FEB MAR	APR MAY JUNE		OCT NOV DEC

Alternate Base Period (ABP)

If you do not have sufficient wages in the standard base period, you may qualify to file a claim using the ABP.

The ABP is the last four completed calendar quarters prior to the beginning date of the claim.

The EDD will automatically file an ABP claim on your behalf if you're not eligible for a SBP claim.

You may be asked to provide additional wage information so the EDD can correctly calculate your benefit amount. If you receive an *Affidavit of Wages* (DE 23A), provide the requested documents and return to the EDD.

Note: The ABP can **only** be used when there are not enough wages earned in the standard base period to establish a claim.

Refer to the chart below. The shaded area represents the ABP. The non-shaded area represents the quarter the claim is filed.

JAN FEB MAR	APR MAY JUNE	JULY AUG SEPT	OCT NOV DEC	JAN FEB MAR	←		claim ns in:
	APR MAY JUNE	JULY AUG SEPT	OCT NOV DEC	JAN FEB MAR	APR MAY JUNE	*	
		JULY AUG SEPT	OCT NOV DEC	JAN FEB MAR	APR MAY JUNE	JULY AUG SEPT	\
			OCT NOV DEC	JAN FEB MAR	APR MAY JUNE	JULY AUG SEPT	OCT NOV DEC

Waiting Period

Unemployment Insurance claims have a mandatory, one week, unpaid waiting period. This waiting period generally takes effect on the first eligible week of a claim and prior to benefits being paid. Do not wait to file your claim because the waiting period cannot be served until a claim has been filed.

How to Certify for Benefits

To serve your waiting period and receive benefit payments, you must meet all eligibility requirements and certify for benefits every two weeks.

There are three ways to certify for benefits:

 UI OnlineSM: (edd.ca.gov/UI Online) This is the fastest way to certify for benefits and report work and wages. To use UI Online, you must create a secure login through Benefit Programs Online and complete a onetime registration for UI Online.

For added convenience, UI Online MobileSM is available for mobile devices.

- EDD Tele-Cert^{5M}: 1-866-333-4606 Certify over the phone by calling 1-866-333-4606. Select option 2 and follow all instructions. To access EDD Tele-Cert you must create a PIN.
- Mail: Complete, sign, and mail the Continued Claim (DE 4581) form to the EDD.

Note: For faster processing, certify through UI Online or EDD Tele-Cert.

Payments

Payments are issued after you certify for benefits and continue to meet all eligibility requirements for every week you claim benefits.

You have an option in how you receive your benefit payments. The EDD issues benefit payments by the EDD Debit CardSM or by check. The EDD Debit Card is the fastest and most secure way to receive your benefits. However, you do not have to accept. Once, your claim is filed, contact the EDD if you wish to receive your benefits by paper check.

The EDD Debit Card is valid for three years and used for all Disability Insurance (DI), Paid Family Leave (PFL), and Unemployment Insurance (UI) benefits.

If you have an EDD Debit Card from a previous DI, PFL, or UI claim that is still valid, you will not be mailed a new card until the card has expired. If you need a replacement card, contact Bank of America EDD Debit Card Customer service by calling 1-866-692-9374 or 1-866-656-5913 (TTY).

For more information, visit <u>Bank of America EDD Debit Card</u> (bankofamerica.com/EDDCard).

Tax Requirements

UI benefits are subject to federal income tax, but exempt from California state income tax. Each time you certify for benefits, you can choose to withhold the 10 percent federal income tax from your weekly benefit payment. Otherwise, you may be required to pay the tax at the end of the year, when you file your tax return.

Each January, the EDD mails a Form 1099G to individuals who received UI benefits during the previous calendar year. Use the form to report important tax information on your federal tax return. You can access Form 1099G information for up to the past five years and/or request duplicate copies through UI Online or by calling 1-866-401-2849.

Child Support Obligations

Your UI benefits may be reduced if you're required to pay child support payments to a court, District Attorney's office, or other child support enforcement agency.

Report Earnings

You are required to report **all** work, wages, and other income to the EDD during the week they were earned, not when you receive your pay. Failure to properly report your earnings can result in overpayments and penalties.

Types of income to report:

- Piece work
- Idle time pay
- lury fees
- Commissions
- Witness fees
- Reuse pay
- Holiday pay
- Holding fees
- Residuals
- Awards

- Vacation pay
- In-lieu-of-notice pay
- Bonuses
- Tips
- Self-employment income
- Strike benefits/picket pay
- Standby pay
- Bereavement
- Back-pay
- Paid sick leave
- Workers' Compensation pension, retirement, annuity

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.

Pension or Retirement Pay

UI benefits may be reduced if you are receiving a pension, retirement pay, annuity, or other similar payment based on your previous work.

Social Security benefits are not deductible from UI benefits and do not need to be reported to the EDD.

Part-Time Work

If you work less than full-time, you are required to report that work to the EDD. However, you may still be eligible for partial UI benefits. The first \$25 or 25 percent of your gross total earnings for the week (whichever is greater) will not be counted toward your benefit amount. The amount remaining will be deducted from your weekly benefit amount.

Example 1:

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 from your weekly benefit amount. You would receive \$45 (\$50 minus \$5) in UI benefits.

Example 2:

Your weekly benefit amount is \$400. You earn \$200. You must report \$200; however, the first 25 percent (\$50) is not counted, leaving \$150 to deduct from your weekly benefit amount. You would receive \$250 (\$400 minus \$150) in UI benefits.

How Your Eligibility is Determined

To be eligible, you must be:

- Out of work through no fault of your own.
- Physically able to work.
- Ready to accept work.
- Actively looking for work.

If you were laid off, you're considered to be out of work through no fault of your own.

If you quit your last job, were fired, or unemployed due to a strike or lockout, the EDD will schedule a phone interview with you to collect information on the reason you're no longer working. Your UI benefits cannot be paid until your phone interview is complete, you certify for benefits, and the EDD determines your eligibility.

You have the right to request more time to gather information, contact witnesses, or obtain the advice of a representative. If the eligibility issue involves an employer, the EDD may contact the employer.

If you are sent a written request for more information and you respond by mail, the EDD interviewer will use the information provided to determine your eligibility.

If you're denied benefits for any reason throughout your claim, including insufficient wages to establish a claim, a written *Notice of Determination* (DE 1080CZ) will be mailed to you explaining the reason along with your appeal rights.

Important: Your benefits can be delayed or denied if you're not available for the interview or do not submit the required information. The EDD will make a decision of eligibility based on the information available.

Appeals Process

If you're denied UI benefits, you have the legal right to appeal the decision by completing and mailing the *Appeal Form* (DE 1000M). To be considered timely, it must be mailed within 30 calendar days from the mailing date of the *Notice of Determination* (DE 1080CZ). If you miss the 30-day deadline, you may still appeal, but you must show good cause for the delay.

Your appeal will be heard by an independent administrative law judge. Hearings are informal, but all testimony is taken under oath and is subject to cross-examination. The office of appeal will notify you of when and where the hearing will be held.

Before the hearing, you have the right to review all records affecting your appeal. Those records are provided by California Unemployment Insurance Appeals Board (CUIAB). You can request records from the EDD to prepare for your hearing.

At the hearing, you may be represented by yourself, a union official, an attorney, or anyone else you select. You may bring any relevant documentation you may have to support your case.

After the hearing, you are mailed the administrative law judge's decision. If you're not satisfied, you may submit a second level appeal to the CUIAB.

For information on how the UI code is applied, including current case studies, see the online <u>Benefit Determination Guide</u> (edd.ca.gov/uibdg).

Important: You are required to continue to certify for benefits while your claim is under appeal. If the original decision is reversed, the EDD can quickly issue all back payments to you. **Failure to comply could result in your benefits being denied or delayed.**

Canceling a Claim

You may cancel a claim if you meet **all** of the following criteria:

- No benefits have been paid.
- You're not disqualified for benefits due to an eligibility issue.
- An overpayment has not been established on the claim.
- You notify the EDD before the 52-week benefit year ends.

Once a claim is canceled, it cannot be re-established with the same beginning date. You must file a new claim, which will have a later beginning date.

Workers Not Covered by Unemployment Insurance

The following groups of workers are not normally covered:

- Elected officials.
- Self-employed, unless participating in elective coverage.
- 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 by 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

Under certain conditions, employers of the individuals whose services are not covered may elect to cover those services. If you're not sure whether you're eligible for these benefits, contact the EDD.

Request a Claim Print Out

You may request a print out of your claim through one of the following methods:

- Create an account by visiting <u>UI Online</u> (edd.ca.gov/UI_Online).
 Select Claim History and print.
- Call the EDD at 1-800-300-5616.

Special Programs

California Training Benefits (CTB)

If you're attending school or training while receiving UI benefits, you may qualify for CTB.

If eligible, you can further your education, upgrade your skills, and/or learn a new trade while attending an EDD-approved training or school program to be more competitive in today's labor market.

While in school or training, you'll be exempt from the requirements to be available for work, actively seek work, and accept work. You may also be eligible for additional weeks of benefits. Learn more online by visiting California Training Benefits (edd.ca.gov/unemployment/California_Training_Benefits.htm).

Note: The EDD does **not** cover any educational or training-related expenses such as tuition, fees, books, supplies, or transportation. However, there are state, federal, or employer programs that may fund your school or training.

Training Extension (TE)

A TE provides additional benefits to individuals who have been approved for CTB, while completing school or training. Only one TE is allowed for each CTB-approved training period.

If interested, you must contact the EDD to inquire about a TE before receiving the 16th week of UI benefits. For claims that have less than 16 weeks of benefits, you **must** contact the EDD before the claim reaches a zero balance.

Disaster Unemployment Assistance (DUA)

The federal DUA program provides financial assistance to individuals whose employment or self-employment has been lost or interrupted as a direct result of a major disaster and who are **not** eligible for regular UI benefits. These benefits are available only when the President of the United States declares a major disaster and makes this special assistance available.

If DUA benefits are available, information will be posted on the <u>EDD</u> website (edd.ca.gov).

Trade Adjustment Assistance (TAA)/Re-employment Trade Adjustment Assistance (RTAA)

The TAA program is a federally funded program that provides training and training-related benefits and services to workers who are certified by the U.S. Department of Labor as having lost their jobs, or had their hours and wages reduced, as a result of increased imports from, or a shift in production to, a foreign country.

The RTAA program provides wage subsidies to individuals age 50 or older who return to work paying less than their former trade impacted employment.

Extended Benefits

Extended benefits are available to workers who have exhausted regular unemployment insurance benefits when the 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.

Railroad Unemployment Benefits

Railroad workers may claim benefits under the U.S. Railroad Unemployment Insurance Act. This program is administered by the U.S. Railroad Retirement Board (RRB).

To file a claim, call the toll-free number at 1-877-772-5772 between 9 a.m. and 3:30 p.m., Monday through Friday to speak to an RRB representative or file online by visiting RRB (rrb.gov).

Unemployment Insurance Fraud Prevention and Detection

The EDD takes the security of personal and confidential information very seriously. Therefore, all data submitted to us is encrypted. Additional safeguards are built in to further protect your personal information from imposter fraud and 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 the EDD suspects that there may be identity issues, you'll receive a written request to validate the information provided. We'll also contact your former employer(s) and governmental entities to verify the documents and any information you supply.

For more information, download the <u>Protect Your Identity and Stop Unemployment Insurance Imposter Fraud (DE 2360EE) (PDF)</u> brochure (edd.ca.gov/pdf_pub_ctr/de2360ee.pdf).

To report UI fraud, visit <u>Ask EDD</u> (askedd.edd.ca.gov) and select **Report Fraud** to submit a Fraud Reporting Form online, or call the EDD toll-free fraud hotline at 1-800-229-6297.

Penalties

Making a false statement or withholding information to receive benefits can be a felony. Penalties may include a loss of benefits, a false statement disqualification, and/or criminal prosecution.

A false statement disqualification denies benefits from 2 to 23 weeks. The disqualification stays on your record for three years or until served, whichever comes first. To serve false statement weeks, you must continue to certify for UI benefits, and meet all other eligibility requirements. You will not be paid during this time.

Benefit Audits

The EDD conducts audits by cross-referencing employer information with UI claim information to determine if a claimant properly reported all work, wages and other income to the EDD while collecting for UI benefits. Overpayments and penalties collected from these audits ensure the solvency of the UI Trust Fund and help reduce UI taxes.

Social Security Number Verification

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

Your eligibility for benefits may be affected if:

- The SSN provided is assigned to a different name or belongs to another individual.
- The SSN is not valid.
- The SSN was never issued by the SSA.
- The wages in the base period belong to another individual.
- 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 may be asked to submit a complete copy of your Annual Social Security Statement. To obtain a copy of your complete Social Security Statement visit the <u>SSA</u> online (ssa.gov).

A copy of your Social Security card will not satisfy this requirement.

State Disability Insurance (SDI)

SDI is comprised of Disability Insurance (DI) and Paid Family Leave (PFL). The program is funded entirely by California workers through employee payroll deductions, noted as CASDI on paystubs.

Exceptions:

- Employees of local public entities (except workers in district hospitals) are not covered by SDI unless the employer elects such coverage.
- Employees of the state or state-funded institutions of higher education may, through their collective bargaining units, elect to be covered by SDI.
- Self-employed individuals may elect to be covered by SDI.

Please note: Citizenship and immigration status do not affect eligibility for SDI.

Disability Insurance (DI)

DI provides short-term, partial wage replacement benefits to eligible workers who are unable to work due to a non-work-related illness, injury, or pregnancy.

When to submit a claim: Submit your claim no earlier than nine days after the first day your disability begins, but no later than 49 days after your disability begins or you may lose benefits.

For faster processing, file your claim using SDI Online.

Exception: If a claim is filed for the same or related cause or condition within 60 days of the initial claim, there will be no new waiting period.

To file a claim or learn more, visit <u>State Disability Insurance</u> (edd.ca.gov/disability). EDD staff are available from Monday through Friday between 8 a.m. and 5 p.m. (Pacific Time), except on state holidays.

Refer to page 19 for a list of DI phone numbers.

Paid Family Leave (PFL)

PFL provides short-term, partial wage replacement benefits to eligible workers who need to take time off work to care for a seriously ill child, parent, parent-in-law, grandparent, grandchild, sibling, spouse, or registered domestic partner. Benefits are available to parents who need time to bond with a new child entering their family either by birth, adoption, or foster care placement. Benefits are also available for individuals who need time off work to participate in a qualifying event resulting from a spouse, registered domestic partner, parent, or child's military deployment to a foreign country.

When to submit a claim: Submit your claim no earlier than the first day your family leave begins, but no later than 41 days after your family leave begins or you may lose benefits.

For faster processing, file your claim using SDI Online.

To file, or learn more visit <u>Paid Family Leave</u> (edd.ca.gov/Disability/Paid_Family_Leave.htm).

EDD staff are available from Monday through Friday between 8 a.m. and 5 p.m. (Pacific Time), except on state holidays.

Refer to page 19 for a list of PFL phone numbers.

Workforce Services

The EDD provides a range of employment and training services in partnership with state and local agencies and organizations, through the America's Job Center of CaliforniaSM (AJCC). These services benefit job seekers and employers at no cost.

Through the AJCC, the EDD provides job seekers with job search and résumé workshops, interview techniques, job fairs and referrals, training, and much more. Employers can use our series to help recruit candidates for open positions, train current employees, and organize job fairs and workshops. For more information, find your nearest AJCC by using the online Office Locator (edd.ca.gov/Office_Locator).

CalJOBSSM

CalJOBS is California's online resource to help job seekers and employers navigate the EDD's workforce services. The system allows users to easily search for jobs, build résumés, access career resources, find qualified candidates for employment, and gather information on education and training programs.

Job Seekers can:

- Create a résumé or upload multiple résumés.
- Search and apply for job openings.
- Set up alerts for job openings.
- Research employers.
- Make customized résumés viewable to employers.

Note: Registering for a CalJOBS account and posting a résumé is an eligibility requirement for many UI claimants. To register, visit <u>CalJOBS</u>SM (caljobs.ca.gov).

Migrant and Seasonal Farmworkers (MSFW) Outreach Program

The MSFW Outreach program assists farmworkers unfamiliar with the services provided at the America's Job Center of CaliforniaSM with information about job search assistance, skills development, referral to supportive services, unemployment and disability insurance, farmworker rights labor-law information, and career guidance, all at no cost.

Services for Veterans

The EDD provides assistance to veterans to help them achieve their employment and training goals. Services include labor market information, veteran 24-hour priority hold on all job listings, customized job search assistance, job fairs, workshops, employer recruitments, and other resources.

Youth Employment Opportunity Program (YEOP)

The YEOP provides special service to help youth, ages 15 through 25, achieve their educational and vocational goals. Services include peer advising, referrals to supportive services, workshops, job referrals and placement assistance, and referrals to training and community outreach efforts.

For more information on the programs and services listed above, visit <u>Jobs and Training</u> online (edd.ca.gov/Jobs_and_Training).

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

Amount of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount
\$ 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	113	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	160
1,768.00 - 1,806.99	69	2,964.01 - 2,990.00	115	4,160.01 - 4,186.00	161
1,807.00 - 1,832.99	70	2,990.01 - 3,016.00	116	4,186.01 - 4,212.00	162
1,833.00 - 1,846.00	71	3,016.01 - 3,042.00	117	4,212.01 - 4,238.00	163
1,846.01 - 1,872.00	72	3,042.01 - 3,068.00	118	4,238.01 - 4,264.00	164
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	120	4,290.01 - 4,316.00	166
1,924.01 - 1,950.00	75	3,120.01 - 3,146.00	121	4,316.01 - 4,342.00	167
1,950.01 - 1,976.00	76	3,146.01 - 3,172.00	122	4,342.01 - 4,368.00	168
1,976.01 - 2,002.00	77	3,172.01 - 3,198.00	123	4,368.01 - 4,394.00	169
2,002.01 - 2,028.00	78	3,198.01 - 3,224.00	124	4,394.01 - 4,420.00	170
2,028.01 - 2,054.00	79	3,224.01 - 3,250.00	125	4,420.01 - 4,446.00	171
2,054.01 - 2,080.00	80	3,250.01 - 3,276.00	126	4,446.01 - 4,472.00	172
2,080.01 - 2,106.00	81	3,276.01 - 3,302.00	127	4,472.01 - 4,498.00	173
2,106.01 - 2,132.00		3,302.01 - 3,328.00	128	4,498.01 - 4,524.00	174
2,132.01 - 2,158.00		3,328.01 - 3,354.00	129	4,524.01 - 4,550.00	175
2,158.01 - 2,184.00		3,354.01 - 3,380.00	130	4,550.01 - 4,576.00	176
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 of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount
\$ 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 - 7,098.00	273
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
5,174.01 - 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
5,304.01 - 5,330.00	205	6,500.01 - 6,526.00	251	7,696.01 - 7,722.00	297
5,330.01 - 5,356.00	206	6,526.01 - 6,552.00	252	7,722.01 - 7,748.00	298
5,356.01 - 5,382.00	207	6,552.01 - 6,578.00	253	7,748.01 - 7,774.00	299
5,382.01 - 5,408.00	208	6,578.01 - 6,604.00	254	7,774.01 - 7,800.00	300
5,408.01 - 5,434.00	209	6,604.01 - 6,630.00	255	7,800.01 - 7,826.00	301
5,434.01 - 5,460.00	210	6,630.01 - 6,656.00	256	7,826.01 - 7,852.00	302
5,460.01 - 5,486.00	211	6,656.01 - 6,682.00	257	7,852.01 - 7,878.00	303
5,486.01 - 5,512.00	212	6,682.01 - 6,708.00	258	7,878.01 - 7,904.00	304
5,512.01 - 5,538.00	213	6,708.01 - 6,734.00	259	7,904.01 - 7,930.00	305
5,538.01 - 5,564.00	214	6,734.01 - 6,760.00	260	7,930.01 - 7,956.00	306
5,564.01 - 5,590.00	215	6,760.01 - 6,786.00	261	7,956.01 - 7,982.00	307
5,590.01 - 5,616.00	216	6,786.01 - 6,812.00	262	7,982.01 - 8,008.00	308
5,616.01 - 5,642.00	217	6,812.01 - 6,838.00	263	8,008.01 - 8,034.00	309
5,642.01 - 5,668.00	218	6,838.01 - 6,864.00	264	8,034.01 - 8,060.00	310
5,668.01 - 5,694.00	219	6,864.01 - 6,890.00	265	8,060.01 - 8,086.00	311
5,694.01 - 5,720.00	220	6,890.01 - 6,916.00	266	8,086.01 - 8,112.00	312
5,720.01 - 5,746.00	221	6,916.01 - 6,942.00	267	8,112.01 - 8,138.00	313
5,746.01 - 5,772.00	222	6,942.01 - 6,968.00	268	8,138.01 - 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 of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount
\$ 8,190.01 - 8,216.00	\$316	\$ 9,386.01 - 9,412.00	\$362	\$10,582.01 - 10,608.00	\$408
8,216.01 - 8,242.00	317	9,412.01 - 9,438.00	363	10,608.01 - 10,634.00	409
8,242.01 - 8,268.00	318	9,438.01 - 9,464.00	364	10,634.01 - 10,660.00	410
8,268.01 - 8,294.00	319	9,464.01 - 9,490.00	365	10,660.01 - 10,686.00	411
8,294.01 - 8,320.00	320	9,490.01 - 9,516.00	366	10,686.01 - 10,712.00	412
8,320.01 - 8,346.00	321	9,516.01 - 9,542.00	367	10,712.01 - 10,738.00	413
8,346.01 - 8,372.00	322	9,542.01 - 9,568.00	368	10,738.01 - 10,764.00	414
8,372.01 - 8,398.00	323	9,568.01 - 9,594.00	369	10,764.01 - 10,790.00	415
8,398.01 - 8,424.00	324	9,594.01 - 9,620.00	370	10,790.01 - 10,816.00	416
8,424.01 - 8,450.00	325	9,620.01 - 9,646.00	371	10,816.01 - 10,842.00	417
8,450.01 - 8,476.00	326	9,646.01 - 9,672.00	372	10,842.01 - 10,868.00	418
8,476.01 - 8,502.00	327	9,672.01 - 9,698.00	373	10,868.01 - 10,894.00	419
8,502.01 - 8,528.00	328	9,698.01 - 9,724.00	374	10,894.01 - 10,920.00	420
8,528.01 - 8,554.00	329	9,724.01 - 9,750.00	375	10,920.01 - 10,946.00	421
8,554.01 - 8,580.00	330	9,750.01 - 9,776.00	376	10,946.01 - 10,972.00	422
8,580.01 - 8,606.00	331	9,776.01 - 9,802.00	377	10,972.01 - 10,998.00	423
8,606.01 - 8,632.00	332	9,802.01 - 9,828.00	378	10,998.01 - 11,024.00	424
8,632.01 - 8,658.00	333	9,828.01 - 9,854.00	379	11,024.01 - 11,050.00	425
8,658.01 - 8,684.00	334	9,854.01 - 9,880.00	380	11,050.01 - 11,076.00	426
8,684.01 - 8,710.00	335	9,880.01 - 9,906.00	381	11,076.01 – 11,102.00	427
8,710.01 - 8,736.00	336	9,906.01 - 9,932.00	382	11,102.01 – 11,128.00	428
8,736.01 - 8,762.00	337	9,932.01 - 9,958.00	383	11,128.01 – 11,154.00	429
8,762.01 - 8,788.00	338	9,958.01 - 9,984.00	384	11,154.01 – 11,180.00	430
8,788.01 - 8,814.00	339	9,984.01 – 10,010.00	385	11,180.01 – 11,206.00	431
8,814.01 - 8,840.00	340	10,010.01 - 10,036.00	386	11,206.01 – 11,232.00	432
8,840.01 - 8,866.00	341	10,036.01 - 10,062.00	387	11,232.01 – 11,258.00	433
8,866.01 - 8,892.00	342	10,062.01 - 10,088.00	388	11,258.01 – 11,284.00	434
8,892.01 - 8,918.00	343	10,088.01 - 10,114.00	389	11,284.01 – 11,310.00	435
8,918.01 - 8,944.00	344	10,114.01 - 10,140.00	390	11,310.01 – 11,336.00	436
8,944.01 - 8,970.00	345	10,140.01 - 10,166.00	391	11,336.01 – 11,362.00	437
8,970.01 - 8,996.00	346	10,166.01 – 10,192.00	392	11,362.01 – 11,388.00	438
8,996.01 - 9,022.00	347	10,192.01 – 10,218.00	393	11,388.01 – 11,414.00	439
9,022.01 - 9,048.00	348	10,218.01 – 10,244.00	394	11,414.01 – 11,440.00	440
9,048.01 - 9,074.00	349	10,244.01 – 10,270.00	395	11,440.01 – 11,466.00	441
9,074.01 - 9,100.00	350	10,270.01 – 10,296.00	396	11,466.01 – 11,492.00	442
9,100.01 - 9,126.00	351	10,296.01 – 10,322.00	397	11,492.01 – 11,518.00	443
9,126.01 - 9,152.00	352	10,322.01 – 10,348.00	398	11,518.01 – 11,544.00	444
9,152.01 - 9,178.00	353	10,348.01 – 10,374.00	399	11,544.01 – 11,570.00	445
9,178.01 - 9,204.00		10,374.01 – 10,400.00	400	11,570.01 – 11,596.00	446
9,204.01 - 9,230.00		10,400.01 - 10,426.00	401	11,596.01 – 11,622.00	447
9,230.01 - 9,256.00		10,426.01 – 10,452.00	402	11,622.01 – 11,648.00	448
9,256.01 - 9,282.00		10,452.01 – 10,478.00	403	11,648.01 – 11,674.00	449
9,282.01 - 9,308.00		10,478.01 – 10,504.00	404	11,674.01 – and over	450
9,308.01 - 9,334.00		10,504.01 – 10,530.00	405		
9,334.01 - 9,360.00		10,530.01 – 10,556.00	406		
9,360.01 - 9,386.00	361	10,556.01 – 10,582.00	407		

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STATE OF CALIFORNIA

LABOR AND WORKFORCE DEVELOPMENT AGENCY

EMPLOYMENT DEVELOPMENT DEPARTMENT

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