For Self-Employed and Contract Workers
Step-by-step guide to completing the UI Application during COVID-19

We are currently processing more applications for unemployment benefits than we have ever received before. To ensure our online system can handle the increased activity, we are asking **new applicants to apply on an assigned day**. The day you file for benefits will not affect the amount of benefits you receive.

If the last digit of your Social Security number is:	Apply online 6 A.M. to 8 P.M. on this day of the week:
0, 1 or 2	Monday
3, 4 or 5	Tuesday
6, 7, 8, or 9	Wednesday
Any	Thursday
Any	Friday

STEP 1. Go to www.uimn.org and select Applicants.

STEP 2. Select **Apply for Benefits**. The link is near the bottom of the page, under *I Need To...*

Welcome Applicants!

This is the official resource for information about Minnesota Unemployment Insurance (UI) benefits.

UI benefits provide a temporary partial wage replacement to workers who become unemployed through no fault of their own.

If you have become unemployed or had your hours greatly reduced, complete the Application Process – we will determine whether or not you are eligible and notify you.

I Need To...

Apply for Benefits

Log in to my Account

Request a Benefit Payment

Find a Job

Quick Links

- Estimate Your Benefits
- Information Handbook
- Health Care & Community Services
- Report UI Fraud
- UI Law

Minnesota Voter Registration

News & Updates

- COVID-19 and unemployment benefits
- IRS Form 1099-G year-end tax information
- Upcoming Work Search Events

Labor Market Data

STEP 3. Start your application.

If you have never applied for Minnesota unemployment benefits, on your scheduled day, enter your Social Security number and then select **Start**.

If you have previously had a Minnesota unemployment benefit account, enter your Social Security number, password and then select **Login**. If you do not remember your password, select the checkbox for ***Forgot your password*** and then Login. Follow the steps on the page to reset your password.

STEP 4. Review information to help you through the application process. Watch videos, review the list of information you will need to complete your application for benefits, and then click each items checkbox before you select **Start the application**.

Welcome to the Minnesota unemployment benefit application

Apply for benefits as soon as you are unemployed or your hours have been reduced.

COVID-19

We are currently processing a record number of applications for unemployment benefits. Thank you for your patience during this unusual time.

If you are confused about the application process or how to answer a particular question, see this page for helpful information.

We have redirected staff to process as many unemployment benefit applications as quickly as possible. That means we may not be able to assist you by phone.

Please watch the videos below before you apply so you have a good understanding of the process.

Videos about applying for benefits

▶ What You Should Know Before Applying (video, 7:38)
▶ Completing the Online Application (video, 9:06)

What information do I need?

✓ Check the items below to make sure you are ready to apply:

> Review list of items needed to apply. Select each checkbox.

☐ Driver's license number or other state government identification number
☐ Employment history for the **last 18 months**, including:
  • Each employer's name, address and phone number
  • Dates of employment
  • Pay rate
  • Reason you are no longer working
☐ Your bank account and routing numbers, if you want direct deposit
☐ If you are not a United States citizen, you need your work authorization document
☐ If you served in the U.S. military in the last 18 months, you need your DD-214, Member 4
☐ If you were a federal employee in the last 18 months you need your SF-8 and SF-50

I have my information and I am ready to apply.

Start the application

> Select **Start the application** to begin applying for benefits.

STEP 5. Read the Data Privacy Authorization.

Select **Yes**, and then **Next** to move to the next page.

Data Privacy Authorization

The information you provide will be used by the Department of Employment and Economic Development to determine your eligibility for unemployment insurance benefits and help you look for work.

United States Code Title 42 section 1320b-7 requires that applicants provide their social security number to be eligible for unemployment benefits. Minnesota Statute 268.07 requires applicants must be unemployed at the time the application is filed and that they must provide all of the information requested. Incomplete applications cannot be processed.

Employers are authorized by law to provide information on your dates of employment, wages paid, and why you left employment. Information you provide about why you left specific employment may be disclosed to that employer, so your eligibility for benefits and the effect on the employer can be determined.

Information you or your employer provide to the Unemployment Insurance Program is classified as private under Minnesota law. It cannot be disclosed without your written permission except as specified in state or federal law. Below is a partial list of agencies that may obtain information you provide the Unemployment Insurance Program.

- Child Support Enforcement Agencies
- Federal and State Law Enforcement
- Internal Revenue Service
- Minnesota Department of Revenue
- Social Security Administration
- State and Local Public Assistance Agencies
- Unemployment Insurance Programs in other States
- U.S. Immigration and Customs Enforcement

Minnesota Statute 268.19 has the complete list of agencies that may obtain your information from the Unemployment Insurance Program. Information you provided may be verified with these agencies through electronic matching.

* **I have read and understand the above.**
  ○ Yes ○ No

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To navigate in the registration process use the [Previous] or [Next] buttons at the bottom of the page. **Do not** use the "Back" or arrow buttons on your browser.

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STEP 6. Types of Employment.

Answer each question on this screen.

Be sure to select "yes" to the question "**Did you work in Minnesota?" if you worked in Minnesota in the past 18 months.**

Be sure to select '**Yes**' to **"Did you work in self-employment or as an independent contractor?**".

Note: You may receive a ⊗ Validation Error(s) message if you miss a question or the answer you provide does not match a previous answer given for a similar question. To fix the error, look through the page for the validation symbol ⊗.

STEP 7. Applicant Authentication.

Enter your Social Security number (no dashes). Answer the other questions and then select **Next.**

Applicant Authentication	
Complete the questions below to begin the authentication process:	
1. *Enter your Social Security Number:	⬜ (No Dashes)
2. *Confirm your Social Security Number:	⬜ (No Dashes)
3. *Birth Date:	⬜ / ⬜ / ⬜ (mm/dd/yyyy)
4. *Gender:	○ Male ○ Female
5. *Do you have a Drivers License or State ID?	○ Yes ○ No

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STEP 8. Applicant Authentication – continued.

If you selected 'Yes' to the question "Do you have a **Driver's License** or State ID?" you will need to provide your **Driver's License # or State ID # (no dashes). Select **Next.**

Applicant Authentication	
Complete the questions below to begin the authentication process:	
1. *Issuing State:	Minnesota ▾
2. *Drivers License # or State ID #:	⬜ (No Dashes)
3. *First Name (as it appears on your Social Security card):	⬜
4. Middle Initial:	⬜
5. *Last Name (as it appears on your Social Security card):	⬜
6. Suffix (ie., Jr., Sr.):	⬜

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STEP 9. Assign password.

Enter a unique password, select a security question, and enter the answer to your question. Then select **Next**.

Your password, along with your Social Security number, is your electronic signature. You will need your password to contact a Customer Service Representative. Make sure to keep it in a safe place.

Use a password that you can remember easily (like a word or number) but that only you know.

When you create your password online, you can use letters and numbers, but no spaces or special characters, like symbols or punctuation.

> **Good example:** doggy5

> **Bad examples:** dogg y (space), doggy* (symbols), or doggy! (punctuation)

You will use the same password online and on the phone. When entering your password by phone, you will have to press the buttons corresponding to any letters.

> **Example**: If the password you created online is DOGGY5 you would press the buttons on your phone that has each of those letters: 3 6 4 4 9 5

Message(s)

- Enter a password that is 6 characters in length
- Use letters, numbers or combination of letters and numbers
- Do NOT use spaces or special characters
- Keep both your password and security answer in a safe, secure place

Assign Password

1. * Password:
2. *Confirm Password:
3. *Select Security Question: (Select one)
4. *Enter Security Answer:
5. *Confirm Security Answer:

Next

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STEP 10. Your contact information.

Enter your address, telephone number, and email address (if you have one). Select **Next**.

During COVID-19, we may use your email address to send you periodic messages about your account.

We are not currently able to answer questions about accounts via email.

General Information - Contact Information

First Name:
Middle Initial:
Last Name: Suffix:

1. In care of (c/o):   [   ]   (if applicable)
2. * Street Address or PO Box: [   ]   (Include apartment or unit number)
3. *City: [   ]
4. State / Province: [(Select one) v]   (U.S. and Canadian only)
5. * Zip / Postal code: [   ]
6. County of Residence: [(Select one) v]   (Minnesota Residents only)
7. *Country: [UNITED STATES OF AMERICA v]
8. * Telephone Numbers - U.S. or Canada only
   Home: (   ) - [   ] - [   ]
   Cell: (   ) - [   ] - [   ]
   Other: (   ) - [   ] - [   ]
9. Telephone Number - Non U.S. or Canada: [   ]
10. * When possible, would you like to view your mail via Email , instead   ○ Yes ○ No
    of by U.S. Mail?
    If Yes, enter Email Address: [   ]
    Confirm Email Address: [   ]

Keep the address on your account up-to-date for at least four years after your last request for benefit payment. Even after you stop requesting benefits, your account may be audited or we may need to contact you for other reasons. If we can't reach you, audit findings will be made without your input, and you will be responsible for any overpayments that might result.

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STEP 11. Demographic Information.

Complete the questions as they apply to you. Select **Next**.

Demographic Information

* Are you a U.S. military veteran?
　○ Yes ○ No
* Ethnic Heritage:
　○ Hispanic or Latino
　○ Not Hispanic or Latino
　○ I choose not to answer
* Race:
　○ White
　○ Black or African American
　○ Asian
　○ Alaskan Native or American Indian
　○ Native Hawaiian or other Pacific Islander
　○ More than one race
　○ I choose not to answer
* Highest level of education:
　(Select one)
* Do you have a disability?
　○ Yes ○ No ○ I choose not to answer
* Are you a U.S citizen?
　○ Yes ○ No

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STEP 12. Child Support Information.

Answer the question and then select **Next**. If you are required to pay child support, you will need to provide additional information before moving on to the next page.

Child Support Information

* Are you required by a court or other enforcement agency to pay child support?
　○ Yes ○ No

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STEP 13. Work information.

Answer each question as it applies to you.

Note: Most unions in Minnesota are not hiring hall unions.

If you know when you will go back to work, answer 'Yes' to the question "Do you have a definite recall date?" Enter that date. Keep that date handy for additional questions later in the application process.

If you do not expect to go back to work or are not sure when you will go back to work, answer 'No' to the question about your recall date.

STEP 14. Describe your work.

Select the overall type of work that best describes your job and then Next.

For this example, the category that best describes the person's type of work is Food preparation and services.

Describe your work

Next we want to know what you consider your "usual" job title. The job title for which you would be looking for work.

This is a three part question:

- The first question asks about your overall type of work
- The next will define it closer to the job you usually do
- The third question should be your usual job title or as close to it as the options provide

* Begin by selecting your overall type of work from the list below:

- ☐ **Architecture and engineering** (Architects, drafters, engineers, surveyors)
- ☐ **Arts, design, entertainment, sports, and media** (Artists, designers, entertainers, media equipment workers, writers)
- ☐ **Building and grounds cleaning and maintenance** (Building maintenance, grounds maintenance, janitors)
- ☐ **Business and financial operations** (Accountants and tax specialists, business operations managers, financial analysts)
- ☐ **Community and social services** (Counselors, social service specialists, social workers)
- ☐ **Computer and mathematics** (Actuaries, computer programmers, database administrators)
- ☐ **Construction and extraction** (Carpenters, construction workers, electricians, equipment operators, plumbers)
- ☐ **Education, training, and library science** (Archivists, librarians, teachers, teaching assistants)
- ☐ **Farming, fishing, and forestry** (Agricultural workers, breeders, logging)
- ☐ **Food preparation and services** (Bartenders, chefs, cooks and food preparation, food servers)
- ☐ **Healthcare practitioners and technicians** (Dentists, physicians, nurses)
- ☐ **Healthcare support** (Home healthcare aides, nursing or medical assistants, occupational or physical therapists)
- ☐ **Installation, maintenance, and repair** (Automotive or aircraft mechanics, electronics, maintenance or repair, heating and air technicians)
- ☐ **Legal** (Judges, lawyers, paralegals)
- ☐ **Life, physical, and social sciences** (Economists, social science research, scientists)
- ☐ **Management** (Advertising and sales managers, executives, operations managers)
- ☐ **Military specific** (Military enlisted tactical operations, military officers or specialists)
- ☐ **Office and administrative support** (Customer service representatives, financial clerks, office and administrative support)
- ☐ **Personal care and service** (Barbers or cosmetologists, personal care aides)
- ☐ **Production** (Food processing, laundry and dry cleaners, plant operators)
- ☐ **Protective services** (Correctional officers, fire fighters, law enforcement, security guards)
- ☐ **Sales and services** (Cashiers, real estate, sales representatives, telemarketers)
- ☐ **Transportation and material moving** (Drivers, pilots, rail or water transportation operators)
- ☐ **I cannot find my type of work**

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STEP 15. Describe your work – continued.

Select your trade or occupation and then select Next.

For this example, the category that best describes the person's trade or occupation is *Hosts and Hostesses, Restaurant, Lounge, and Coffee Shop*.

Describe your work

You selected **Food preparation and services** as your type of work.

* Select your trade or occupation:

- ☐ Bartenders
- ☐ Cooks
- ☐ Dining Room and Cafeteria Attendants and Bartender Helpers
- ☐ Dishwashers
- ☐ Fast Food and Counter Workers
- ☐ First-Line Supervisors/Managers, Food Preparation and Serving Workers
- ☐ Food Preparation Workers
- ☐ Food Servers, Nonrestaurant
- ☐ Hosts and Hostesses, Restaurant, Lounge, and Coffee Shop
- ☐ Miscellaneous Food Preparation and Serving Related Workers
- ☐ Waiters and Waitresses

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STEP 16. Describe your work – continued.

Select your job title that best describes your job and then select Next.

For this example, the category that best describes the person's job title is *Hosts and Hostesses, Restaurant, Lounge, and Coffee Shop*.

Describe your work

You selected **Hosts and Hostesses, Restaurant, Lounge, and Coffee Shop** as your trade or occupation.

* Select the job title that best describes your job:

☐ Hosts and Hostesses, Restaurant, Lounge, and Coffee Shop

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STEP 17. Describe your work – continued.

Enter the number of years you have done this type of work and then select Next.

Describe your work

Type of work:
Food preparation and services

Your trade or occupation:
Hosts and Hostesses, Restaurant, Lounge, and Coffee Shop

Your job title or description:
Hosts and Hostesses, Restaurant, Lounge, and Coffee Shop

* How many years have you done this type of work?

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STEP 18. Payment method.

Select how you would like to receive your benefit payments.

There are two choices: debit card or direct deposit. If you have a bank account, direct deposit is the most convenient way to ensure faster payments. Select the method you would like and then select **Next**.

Payment method

* Select your payment method:

○ **Direct deposit** to a personal bank account in the U.S.

○ **Unemployment debit card**

Note: You can change your payment option or direct deposit information at any time.
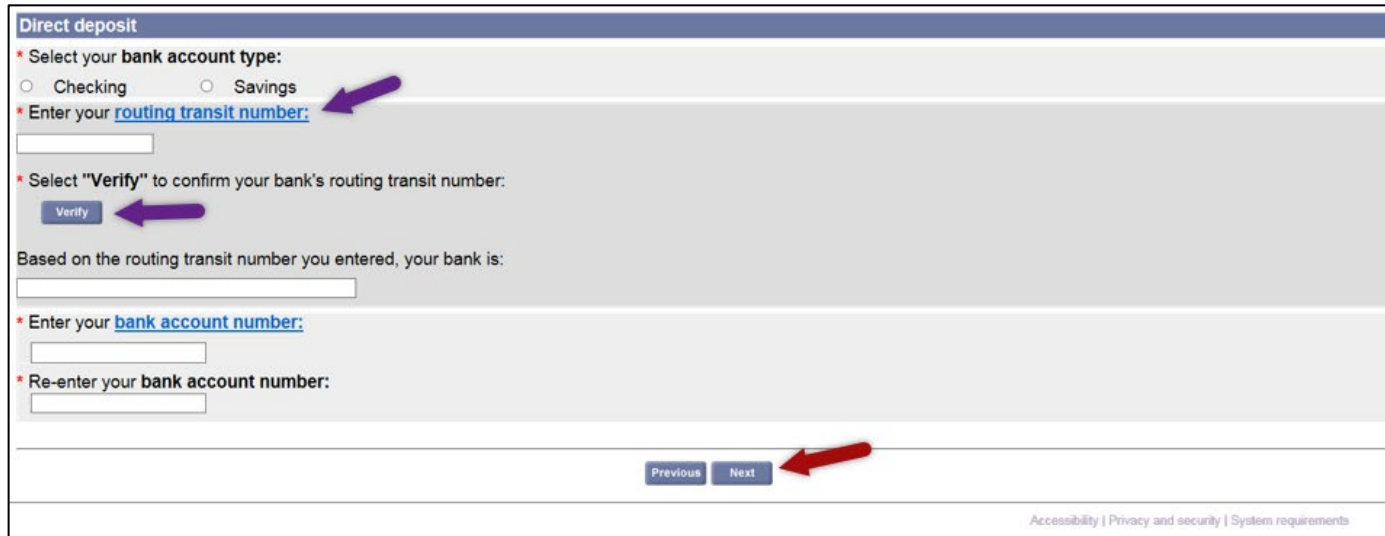
View system security information

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STEP 18a. Payment method – direct deposit.

If you select direct deposit, enter your routing number (if you need more information about where to find your routing number, select the routing transit number link). Select Verify to confirm your bank's routing transit number. Enter your bank account number and then select **Next**.

STEP 18b. Payment method – Unemployment debit card.

If you chose debit card instead, review the *important information about unemployment debit card fees*, select **Yes**, and then select **Next**.

Unemployment debit card

Select the link below to view important information required by law:

You are required by law to view this important information about unemployment debit card fees.

* I have read the information about unemployment debit card fees.

● Yes   ○ No

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STEP 19. Tax Withholding.

Unemployment benefits are taxable income under both federal and Minnesota law. Select whether you would like taxes withheld from any unemployment benefits you receive.

Your withholding options are:

- 15% - federal and state taxes;
- 10% - federal only;
- 0% - no income tax withholding.

You may update your withholding choice online at any time.

Tax Withholding

Unemployment benefits are taxable income under both federal and Minnesota law.

* I authorize the Minnesota Unemployment Insurance Program to withhold income taxes from my unemployment benefit payments as follows:

Select one:	Income Tax Type	Withholding Percentage
○	Federal income tax + Minnesota state income tax	15%
○	Federal income tax	10%
○	No income tax withholding	0%

Note: You may change your withholding choice at any time after you apply.

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STEP 20. Employment Information.

Review the list of your known employers.

If you worked as an employee, you may see an employer listed. You will have to add your self-employment later. Go to step 21.

If your only employment was self-employment, you will not see an employer listed. Go to step 23.

Example if you had another employer besides self-employment (go to STEP 21):

Example if you had only self-employment (click next and go to STEP 22):

STEP 21. Detailed Employment Information.

You will now answer questions about the employers listed on the previous page.

Pay attention to the employer name and information listed at the top when answering the question on this page. An employer's legal name and business address may be different than what you are used to. Look at a paycheck or W-2 from your employer to help determine if you worked for the company listed.

Minnesota Detailed Employment Information

Minnesota Employer Legal Name:
Alpha Bravo Charlie, Inc.

Minnesota Employer Business Name: **ABC, Inc.**

Employer Address (main office, payroll office, headquarters)
28 WILLOW LN
SAINT PAUL MN 55125-1148

Employer Work Location Address
28 WILLOW LN
SAINT PAUL MN 55125-1148

* Did you work for this employer anytime in the last 18 months?
  ○ Yes ○ No

If "Yes", complete the following information:

If "No", this employer will be notified that you indicated you did not work for them.

Most Recent Work Address: if you did work for this employer, but the work location address is different, enter the address below.

Street Address:

City:

State:
(Select one)

ZIP Code:

Employer phone number:
(   ) -   -

STEP 21. Detailed employment information – continued.

Complete the questions on this page.

Select COVID-19 as your reason for separation from your employer. Select COVID-19 even if you are still working and your hours have been reduced.

Select Next.

```
* First day worked:
  [   ] / [   ] / [     ]  (mm/dd/yyyy)
* Last day worked:
  [   ] / [   ] / [     ]  (mm/dd/yyyy)
  (If you are still working, enter your most recent date worked.)
* Pay rate:
  $[          ]
    ○ per hour
    ○ per week
    ○ per month
    ○ per year
* Average number of hours worked per week:
  [          ]
* Job title:
  [          ]
* Is this business owned or partially owned by you, your spouse, your parent, or your child?
    ○ Yes  ○ No
* Is the employer a temporary agency ?
    ○ Yes  ○ No
* Reason for separation from this employer:
  ○   Layoff: Some examples are: lack of work, temporary layoff, seasonal layoff, reduction in force (RIF), your position was eliminated, your employer's business
      closed/plant shutdown (temporarily or permanently).
  ○   Quit: You decided to leave your employment. This includes work-related, personal, or medical reasons, change in residence, found other job, etc.
  ○   Discharged/Dismissed/Terminated: Your employer decided to end your employment for reasons other than layoff.
  ○   Suspension: Your employer will temporarily not allow you to work. For example: Pending an investigation or disciplinary action. (if for medical reasons, go to leave of
      absence).
  ○   Leave of Absence: You and your employer have an agreement that you will take some time off work and you anticipate that you will return to work with this employer in
      the future.
  ○   COVID-19: You are currently unemployed as a direct or indirect result of COVID-19/ Coronavirus.
  ○   Still working: This includes part-time, on-call employment or reduced hours.
  ○   Business Sold or Closed: You either sold or closed a business that you had a controlling ownership in.

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STEP 22. Additional and Complete Employment.

To add your self-employment, select the "Add Minnesota employment" button.

Additional and Complete Employment

A complete list of employment from **10/01/2018** to **03/26/2020** is needed to determine your eligibility and benefit amount.

- If this list of employers is complete and accurate, select "Click Here After All Employers Are Entered" button.
- To add an employer not shown, select the appropriate "Add" button at the bottom of this page.
- If the Employer List includes an employer you did not work for, you can "delete" the employer only if that employer did not provide our agency with wage information. When an employer can be deleted a checkbox will display in the "Delete" column.

Employer's Legal Name	Employer's Business Name	Delete
Minnesota Employment		
Alpha Bravo Charlie, Inc.	ABC, Inc.	
Non-Minnesota Employment		
Military Employment		
Federal Employment		

Delete Selected Employer(s)

Provide Additional Employers

To add an employer, select the appropriate "Add" button below.

Add Minnesota Employment   Add Military Employment

Add Non-Minnesota Employment   Add Federal Employment

Click Here After All Employers Are Entered

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STEP 23. Employment Information - Employer Search.

Answer 'Yes' to "Did you work for an employer in Minnesota?".

Enter **Self-employment** for the Employer Name and then select **Search**. Be sure to include the hyphen.

STEP 24. Employment Information – Minnesota Employer Search Results.

You will see your employer listed as SELF EMPLOYMENT. The address will be 332 Minnesota Street. Select this employer and then select **Next**.

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* Indicates Required Field

Employment Information - Minnesota Employer Search Results

Enter the name of the Employer for whom you are searching. If too many results are returned, enter the name of the city where you worked to narrow your search.

*Employer Name: Self-employment

Employer City:

View Search Tips

Search   Reset

Review the following list and select the button next to the employer where you worked. After choosing your employer, select "Next".

Select	Business Name	Legal Name	Employer Address	City & State
⊙		SELF EMPLOYMENT	332 MINNESOTA ST	ST PAUL MN

What if I cannot find my employer in the search results?

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STEP 25. "Minnesota Detail Employment Information".

On this screen, enter your business address as the most recent work address. Enter your own phone number. Enter the approximate date you started your business as the "first day worked". Enter the last day you worked. Estimate your pay rate as best you can, as well as your average number of hours worked. Enter your job title. ==Select 'No' to "Is your business owned or partially owned by you, your spouse, your parent, or your child?", even if you were a legal owner of the business.== Select **COVID-19** for the reason for separation from this employer. Select Next.

STEP 26. Additional and Complete Employment.

Select "Click Here After All Employers Are Entered".

Additional and Complete Employment

A complete list of employment from **10/01/2018** to **03/27/2020** is needed to determine your eligibility and benefit amount.

- If this list of employers is complete and accurate, select "Click Here After All Employers Are Entered" button.
- To add an employer not shown, select the appropriate "Add" button at the bottom of this page.
- If the Employer List includes an employer you did not work for, you can "delete" the employer only if that employer did not provide our agency with wage information. When an employer can be deleted a checkbox will display in the "Delete" column.

Employer's Legal Name	Employer's Business Name	Delete
Minnesota Employment		
SELF EMPLOYMENT		☐
Non-Minnesota Employment		
Military Employment		
Federal Employment		

Delete Selected Employer(s)

Provide Additional Employers

To add an employer, select the appropriate "Add" button below.

Add Minnesota Employment	Add Military Employment
Add Non-Minnesota Employment	Add Federal Employment

Click Here After All Employers Are Entered

STEP 27. Employment Information – Benefit Account Date.

Select the week you first became unemployed or had your work hours reduced. Select **Next**

Employment Information - Benefit Account Date

* Please select the <u>effective date</u> of your unemployment benefit account from the following two choices:

○ Effective Date Sunday, March 22, 2020

○ Effective Date Sunday, March 15, 2020 (You must have been available for work and unemployed in order to backdate your account.)

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STEP 28. Separation questions due to COVID-19.

You will have to answer additional questions about how your job was affected by COVID19. Complete all questions the best you can.

Answer **Yes** to the question "Are you unemployed or working fewer hours due to COVID-19/coronavirus or related concerns?"

Respond to the following questions the best you can:

- Do you have a medical condition or medical reason you are not able to work due to COVID-19?
- Do you have a childcare, transportation, or other reason why you are not able to work due to COVID-19?
- Are you being paid?

Some questions are a little repetitive due to system functionality issues. We apologize for that. Please provide details in at least one response box, then enter "COVID-19" to any repeated questions.

Enter your own phone number when you are asked for the "Telephone number of the person who decided you would no longer be working."

STEP 29. Separation questions due to COVID-19 - continued.

You will be asked if your employer is still doing business. If you answer Yes, you will need to provide a date you stopped working. You must enter the same date you listed as the last day of work you reported earlier in the application.

You will be asked "Were you given a return date?" If you are not sure when business will resume, answer "no".

If you know when business will resume, answer "yes" and enter the date. Make sure you use the date you entered earlier in the application.

*Is your employer still doing business?   ○ Yes ○ No

If yes:

What date did you stop working for this employer?   ☐ / ☐ / ☐ (mm/dd/yyyy)   ← Enter date you stopped working for your last employer. Use the same date you entered as your last day worked in STEP 21.

Did your employer tell you to not report to work?   ○ Yes ○ No
Was there still work available?   ○ Yes ○ No

If no:

    Do you plan to return to this employer, explain why?

    [text box]

    Are you being paid by this employer during the closure?   ○ Yes ○ No

Is this closure temporary?   ○ Yes ○ No
Were you given a return date?   ○ Yes ○ No   ← Enter the date you will be able to return to work. Use the same date you entered in STEP 13 as your recall date.
If yes, what date will you be able to return to work?   ☐ / ☐ / ☐ (mm/dd/yyyy)

*Were you no longer able to work due to child care or transportation (or what else?)?   ○ Yes ○ No

If yes:

    Why are you unable to work? (Childcare, transportation, etc)?

    [text box]

    Did you ask for accommodations to continue working?

    [text box]

STEP 30. Separation questions due to COVID-19 - continued.

You will be asked if were told to stop working or not to report to work by your employer. Answer "No".

Enter the date you last worked.

*Were you told to stop working or not to report to work by your employer? ○ Yes ○ No
employer?
If yes:

Were you told this was temporary?

What is the name and title of the person who told you to stop working or not to report to work?

*Date you last worked for this employer: [ ] / [ ] / [ ] (mm/dd/yyyy)
* Time you left work that day: * [ ] : * [ ] * (Select one) ∨
*Could you have continued working? ○ Yes ○ No
If no:

Explain why you did not continue working.

Are you still being paid by your employer? ○ Yes ○ No
*What was your next scheduled work date? [ ] / [ ] / [ ] (mm/dd/yyyy)
* What time do you normally start work each day? * [ ] : * [ ] * (Select one) ∨
*Will your employer be open that day? ○ Yes ○ No
*Why are you no longer working?

Enter date you stopped working for your last employer. Use the same date you entered above AND as your last day worked in STEP 21.

STEP 31. Separation questions due to COVID-19 - continued.

Complete the COVID-19 related questions, and then select Next.

*Are all employees impacted?   ○ Yes ○ No

If yes:
 On what date did your company announce this?   ☐ / ☐ / ☐ (mm/dd/yyyy)
 What is the name of your current employer?

If no, explain why your position was impacted:

☐ I will be sending in documents that support my answers.
Please describe the documents.

If you wish to provide any additional information about this issue, please provide it below:

ST-120A

[Previous] [Next]

If you check the box to submit additional documentation, a cover sheet will be mailed to you to include with your documents. If you would like to print the cover sheet now, go to your Account Home page.

Accessibility | Privacy and security | System requirements

Note: You may receive a ⊗ Validation Error(s) message if you miss a question or the answer you provide does not match a previous answer given for a similar question. To fix the error, look through the page for the validation symbol ⊗.

⊗ **Validation Error(s)**
 • Please provide an answer for "If no, explain why your position was impacted", because of the answer you provided to "Are all employees impacted?".

*Are all employees impacted?   ○ Yes ⦿ No

If yes:
 On what date did your company announce this?   ☐ / ☐ / ☐ (mm/dd/yyyy)
 What is the name of your current employer?

If no, explain why your position was impacted:
⊗

STEP 32. Eligibility Information.

We will ask about other sources of income. Answer Yes or No as appropriate. Select Next.

Be sure to report if you will receive vacation pay or Personal Time Off (PTO) pay while you're not working.

Eligibility Information

Have you applied for or are you receiving any of the following:

1. * Social Security Retirement Benefits based on your **own** earnings? ○ Yes ○ No
   - Does NOT include Supplemental Security Income (SSI), Survivors or Dependent benefits
   - Individuals are not eligible for Social Security Retirement until age 62

2. *Payments from a Union Pension fund contributed to by one or more employers? (Including lump sum and periodic payments) ○ Yes ○ No

3. *Payments from a pension fund, annuity fund or a retirement account contributed to by an employer? ○ Yes ○ No
   (Including 401K, and lump sum or periodic payments)

Since 10/01/2018, have you received, applied for, or are you receiving any of the following:

4. * Social Security Disability Benefits? ○ Yes ○ No
   - Does NOT include Supplemental Security Income (SSI)

5. *Workers Compensation payments for loss of wages? ○ Yes ○ No

6. * Other disability payments for loss of wages? ○ Yes ○ No

Since 10/01/2018, have you received, or do you expect to receive any of the following upon separation from employment:

7. *Accrued vacation pay or Personal Time Off (PTO) pay? ○ Yes ○ No ○ Not Sure
   - Includes temporary layoff
   - Does NOT include holiday pay

8. *Severance or any other separation payments? ○ Yes ○ No ○ Not Sure
   - Examples: bonus pay, wages in lieu of notice (notice pay), sick pay, not working but on the payroll, retention pay
   - Does NOT include holiday pay or regular earnings for work performed.

Since 10/01/2018:

9. *Have you worked for an educational institution or an employer contracting services to schools? ○ Yes ○ No
   - Does NOT include Head Start programs

10. *Were you paid to participate in, or train for any sporting events at any level as a coach, athlete or referee? ○ Yes ○ No

11. *Are you currently enrolled in school or a training program? ○ Yes ○ No

12. *Have you refused an offer of employment since 01/26/2020? ○ Yes ○ No

[Previous] [Next]

Accessibility | Privacy and security | System requirements

STEP 33. Review your application – edit answers.

This last page of the application allows you to review all the questions we've asked, along with your answers. Please review your answers for each section of the application.

Need to change an answer? Follow the instructions on the next page.

Ready to submit your application? When you are satisfied with your answers, return to the top of this page. Select the Yes checkbox; re-enter your Social Security number (no dashes) and then select the button "Submit the Unemployment Benefit Application."

⊙ **Message(s)**
  - You indicated that you are "not sure" if you will receive Vacation Or Personal Time Off (PTO) pay because of or upon your separation from employment. You must contact the Department if you receive vacation or PTO pay during a temporary, seasonal, or indefinite layoff.
  - You indicated that you are "not sure" if you will receive severance or any other payments due to separation from employment. You must contact the Department if you receive, or if you are notified by your employer that you will receive severance or any other payments due to separation from employment.

Your application is not complete yet! To complete your application you must do the following:

  - Review your entries before submitting this application by selecting the links below or scrolling down the screen.
  - If you need to change your entries select the "Modify Answers" button to go back to the appropriate section of the application.
  - Check the "Confirm your Identity and Information" box, and re-enter your Social Security Number.
  - Select "Submit the Unemployment Benefit Application", and wait for a confirmation page.

Review and Edit Contents

To review each section of your application click on the section header links below or scroll down the screen.

  - Initial Questions
  - General Information
  - Employment Information
  - Eligibility Questions

Confirm your Identity and Information

☐ ***Yes,** I have answered all questions fully and truthfully. I know there are penalties for giving wrong information. I know that to receive benefits I must meet the eligibility requirements and follow the payment procedures in the "Information Handbook".

*Enter your Social Security Number: [ ] (Do not enter dashes)

For a Printer Friendly version of your application click here.

[Submit the Unemployment Benefit Application]

The following is a summary of your entries during this Unemployment Benefit Application process.

STEP 33a. Change an answer.

Each section of the application provides a Modify button for you to quickly return to that section and correct an answer.

When you select the Modify button for a section, it will take you back to the beginning of that section. You most likely will need to move through the application pages to find the answer that needs to be updated. Use the **Previous** / **Next** buttons found at the bottom of each page to do this. After you have updated your answer, you must click through the application until you return to the Review page.

Types of Employment

Between October 01, 2018 and today:

* Did you work in **Minnesota**? *(do not include U.S. military or federal employment)*
  Yes

* Did you work in **another state**? *(do not include U.S. military or federal employment)*
  No

* Did you serve in active duty in the U.S. military?
  No

* Did you work as a federal employee? *(do not include U.S. military)*
  No

* Did you work in self-employment or as an independent contractor?
  No

Additional Information

* Where did you last work?*(Select a state, U.S. territory, or "outside the United States")*
  Minnesota

* Did you apply for unemployment benefits in another state between **March 24, 2019 and today**?
  No

* Do you live in the United States?
  Yes

  If yes, enter your ZIP code
     55101

* Are you now physically in Minnesota?
  Yes

Modify

Top of Page

STEP 34. Confirmation page.

Your confirmation page provides a copy of your application. Select "View printable version" to print a copy.

You will also see your weekly and maximum benefit amount. Please note that the weekly benefit amount and maximum benefit amount may be blank on this screen; do not worry if this is the case. We will provide an updated benefit amount once we have processed your application.

The Next button provides additional information about using your account and resources to help you return to work.

Unemployment Benefit Application Confirmation
Your Unemployment Benefit application has been submitted. To be paid benefits, you must follow the instructions below.

• Time and date submitted:

Check your online account for updates. We will notify you if we need additional information.

Please know that we are working on your application as quickly as possible.

If you have access to a printer, select view printable version. Keep the printed copy for your reference.
→ Print application

Weekly and Maximum Unemployment Benefit Amount
Based on information currently in agency files, a preliminary estimate of your benefits is indicated below:

• Weekly Benefit Amount: $
• Maximum Benefit Amount: $
← Benefits

This is **only** an estimate; the actual benefit amount may be different. An official "Determination of Benefit Account" will be mailed to you.

COVID-19 Information
We understand how difficult it is to suddenly lose your job. We've compiled a list of financial help and community services on our website. This page can connect you to financial assistance to help cover the cost of food, health care, housing, transportation, and more.

Here are answers to a few common questions about unemployment benefits during COVID-19.
← Answers to questions

Why does my account say there are pending "eligibility issues"? During COVID-19, most accounts will show pending "eligibility issue" until we have completed our final review. We will contact you if we need you to do anything. We are currently processing a record number of applications. While most eligibility issues can be resolved very quickly, some may not be completed for up to 10 business days.

Why is my estimated weekly benefit amount listed as "$0.00"? If you do not see a benefit amount listed, we are still working to process your application. We will contact you if we need you to do anything. Please check your online account for updates.

Why does your site tell me an estimated benefit amount is not possible? If you do not see a benefit amount listed, we are still working to process your application. We will contact you if we need you to do anything. Please check your online account for updates.

When will I get my first payment? Please see information below about how to request payment. If we determine that you are eligible for unemployment benefits, we can process most payment requests within 3 business days. Applicants who select "direct deposit" as their method of payment usually get payment within 2-3 days. Applicants who select "debit card" as their method of payment get a card issued to them within 7-10 days of their first payment request.

Request Benefit Payment
To receive unemployment benefits, you must make timely requests for payment **every week**. You are scheduled to submit your first Request for Payment during the week of:

• 04/05/2020 through 04/11/2020
← Request payments

Information Handbook
You are required to review the handbook as it informs you of your responsibilities and what you need to do to receive unemployment benefits. (The Information Handbook is always available at www.uimn.org/.)

Return to the Welcome Page

Next ←

Your online account

Information about your unemployment benefit account is available online. After filing your unemployment benefit account, each time you log in with your social security number and password, you will be able to do the following:

- **View Your Account Action Items**: When additional information is needed to process your account or payment, your "Account Home Page" will display messages advising you what you need to do.

- **Request Benefit Payments**: Every week you are required to submit a request for benefit payment. Your "Account Home Page" will inform you of the time frame in which to make a timely request for benefit payment. If you don't have a link for request payment, don't panic. We are verifying your information. A link will be added to your account as possible.

- **View Your Account Information**: You have the ability to view any benefit determinations, payment information such as payment dates and amounts, as well as your general account information.

- **Maintain Your Account Information**: You can change your address, update your tax withholding or change your payment method.