

# Filing for Unemployment On the Internet



**Iowa Workforce Development and State of Iowa Library  
Partnership**

## To file an unemployment claim on-line:

1. Log onto: [www.iowaworkforce.org](http://www.iowaworkforce.org)

[Search](#) | [IowaJobs](#) | [IowaWorks](#) | [Labor Market Information](#) | [Iowa Trends](#) | [Business Directory](#) | [Frequently Asked Questions](#)

**Iowa Workforce Development**  
Iowa's Employment Security Agency  
Putting Iowa To Work!®

**Iowa Workforce Development - Work With Us®**

**Iowa's Workforce Development Centers**  
- Find Your Nearest Office -

[Site Map](#) | [Contact Us](#) | [Help](#) | [What's](#)

**Online Services**  
File An Unemployment Insurance Claim

**Click Here**

[Job Seekers](#)  
[Businesses and Employers](#)  
[Unemployment Claims](#)  
[Contacts](#)  
[Local Area Web Sites](#)  
[Services for Specific Populations](#)

**Announcements**  
[Board Responsibilities and Duties:](#) Training Session sponsored by Iowa Workforce Development is for State and Local Workforce Board Members, Local Elected Officials and Local Board Staff.  
[Iowa Recreation Map:](#) A cooperative effort between DNR and the Department of Workforce Development bringing new outdoor recreation data with statewide service / business facilities on an interactive map..

**Current Iowa Employment Situation**  
Seasonally Adjusted Labor Force Data

|             | June 2006 | May 2006  |
|-------------|-----------|-----------|
| LABOR FORCE | 1,676,600 | 1,678,500 |
| UNEMPLOYED  | 61,000    | 56,300    |
| RATE (%)    | 3.6       | 3.4       |
| EMPLOYMENT  | 1,615,700 | 1,622,200 |

[Current Employment Situation](#)  
[Current and Historical Labor Force Data](#)  
[Local Labor Force Data](#)

**Add Iowa Workforce Development To Your Favorites**

2. Left click on “File An Unemployment Claim”

For questions call 1 800 831-1399 or Relay 711  
Monday through Friday, 8:00 AM – 4:30 PM

### 3. Click on “Unemployment Insurance Benefit Information”

## File an Unemployment Insurance Claim

Click Here



Please read the [Unemployment Insurance Benefits Information for Workers](#) **BEFORE** you file your **initial** claim. This resource will provide the necessary information on how to apply for benefits, eligibility requirements and information you should have readily available when you file your claim.

Regardless of your filing method, the effective date of your claim will be the preceding Sunday.

### 1. File an Initial Claim Online

The fastest, most efficient way to apply for benefits (file your initial claim) is online. The Internet filing option is available 24 hours a day, seven days a week – it’s always open! **To be able to file a claim online:**

- You must have worked in Iowa during the past 18 months (earned Iowa wages);
- **IF** you served in the U.S. military during the last 18 months, you **MUST NOT** have filed a claim against another state since your discharge; and
- **IF** you were employed by the federal government during the last 18 months, your duty station **MUST** have been in Iowa.

**NOTE:** This online claim application currently cannot be accessed using WebTV, PDAs, handheld computers and similar systems. Our applications best function using Internet Explorer Version 5.0, or greater or Netscape 6.2 or greater. To check your current browser level or for links to upgrade your browser, visit our [Terms of Use](#).

Even if you don’t have a home computer, you may file your initial claim online from any Internet-connected computer, such as those found at the public library, your union hall, or the [nearest Workforce Development Office Resource Center](#).

### 4. Read this information completely. It will provide you with the information on Eligibility Requirements and the information you will need to have available to file your claim.

## Unemployment Insurance Benefits Information for Workers

### How to Apply for Unemployment Insurance Benefits



You may apply for unemployment insurance benefits (file an initial claim) using one of three methods:

1. **Online**, using our fill-in-the-blank Internet application (either from your home personal computer or any Web-connected PC);
2. By visiting the nearest [Workforce Development Center](#) and participating in an initial-claim group session;
3. Through your most recent employer.

(No matter which method you use to file your initial application, to receive payments after you have filed your initial claim, you must confirm your eligibility every week by calling the Unemployment Insurance Service Center [continued claims reporting system](#).)

## Eligibility Requirements

Regardless of your filing method, the **basic** eligibility requirements are the same for everyone. **To be eligible for unemployment insurance benefit payments you must:**

- Be totally or partially unemployed;
- Have worked and earned a minimum amount of wages in work covered by unemployment insurance in the last 15 to 18 months (Iowa Workforce Development will determine this);
- Have lost your job through no fault of your own;
- Be able and available for work;
- Be registered for work at your local [Workforce Development Center](#), unless waived (registering for work can be done online, too, using the [Online Employment Registration Services](#) application); and
- Be actively seeking work.

These are the basic requirements. Read more about it on pages 1-2 in the [Facts About Unemployment Insurance guide](#).

## Information Needed to File Your Claim

No matter what method you choose to file your new, initial claim, you'll need to have the following information handy:

- Your Social Security number;
- The name, address and telephone number of your most recent employer, and the beginning and ending dates you worked for that employer;
- An Alien Registration number, if you are not a U.S. citizen;
- A DD-214 (Member 4), if you served in the U.S. military during the last 18 months;
- An SF-8 form, if you worked for the federal government in the last 18 months;
- The name(s) of anyone you will be claiming as a dependent, up to a maximum of four; and
- The amount your spouse earned in the preceding week, if you want to claim your spouse as a dependent (must be \$120 or less to be claimed).

**5. After reading the information on Eligibility and the information you will need to file, click on “You are now ready to File an Unemployment Claim”.**

Click Here

**[You are now ready to File an Unemployment Insurance Claim.](#)**

082806

**6. For an initial claim, read the entire set of instructions and scroll to the bottom of the screen.**

**If you have a user account already set-up from a previous claim OR you have an employment registration account, you can simply log-in.**

The first step in filing your new, initial claim online is to create a user and personal information account. Before you begin, we suggest you learn about [frequently asked questions \(FAQs\) about filing online](#).

**Click Here if you have an account**

**Click Here to set-up a new account**

"If you have already created an online user account for an unemployment claim OR IowaJobs employment registration, just [log in](#) . . . OTHERWISE, begin your unemployment insurance claim by creating a new [user and personal information account](#)."

**7. To set-up your new account complete ALL of the required information and then click on SUBMIT at the bottom of the page.**

**Iowa Workforce Development User Account Request:**

|   |   |   |
|---|---|---|
| User Name:<br><b>(Required)</b><br>This will be the name you use to log in. | <input type="text"/><br>6 to 20 characters (letters and numbers only) | <p><b>Choose your ID</b><br/>You will use this information to log in. Your <b>password is case sensitive</b>, which means you must remember the capitalization used when you create it.</p> |
| Password:<br><b>(Required)</b>  | <input type="password"/><br>(Minimum of 6 characters. No spaces.)     |   |
| Confirm (Retype) Password:<br><b>(Required)</b>                             | <input type="password"/>  |   |
|   |   |   |
| First Name:<br><b>(Required)</b>  | <input type="text"/>  |   |
| Middle Initial:   | <input type="text"/>  |   |
| Last Name:<br><b>(Required)</b>   | <input type="text"/>  |   |
| E-Mail Address:   | <input type="text"/>  |   |
| Confirm E-Mail Address:   | <input type="text"/>  |   |
| <input type="button" value="Submit"/> <input type="button" value="Reset"/>  |   | <p><b>Click Here</b></p>  |

**8. If you have been successful in setting up your account you will see this screen. Click on "Log in to apply for Unemployment Insurance Benefits". Log in using the information you just used to set-up your account.**

# Iowa Workforce Development

Congratulations, **YOUR NAME HERE** ! You have successfully created your Iowa Workforce Development user and personal information account. If you provided a valid e-mail address in your personal information, you will receive an e-mail message confirming your user name and password (keep for your records).

Having this account allows you to access several IWD services and resources that require a user account and password.

- [Log in to apply for Unemployment Insurance Benefits](#)
- [Log in to apply to be a WIA Training Provider](#)



**Click Here**

## 2. File a Claim at the Local Workforce Development Center

You may file your initial claim for benefits at your local Workforce Development Center. Many [Iowa Workforce Development Centers](#) hold regularly scheduled group claim sessions and will help you complete the forms. Or, you can use a computer in the Workforce Development Resource Center to file your application online.

## 3. File a Claim Through Your Employer

Iowa Workforce Development has created a program that allows employers to file an initial claim for a recently separated employee. Check with your employer to determine if they are participating in this new program.

**9. Read ALL of the information before starting to file your claim, then click on “I Accept” to continue.**

## Unemployment Insurance Benefits Application

\* This site is secure. Only IWD staff will be able to access the information you provide.\*

If you submit this claim today, your effective date is Sunday, **MM/DD/YYYY**. Claims can be submitted anytime during the first week of unemployment, but should be filed before Friday noon for best service.

### ARE YOU ELIGIBLE?

To Be Eligible For Unemployment Insurance Benefits You Must:

1. Be totally or partially unemployed;
2. Have worked and earned a minimum amount of wages in work covered by unemployment insurance during the period beginning **MM/DD/YYYY** and ending **MM/DD/YYYY**;
3. Have lost your job through no fault of your own;
4. Be able and available for work;
5. Be registered for work at your local Workforce Development Center, unless work search is waived;
6. Be actively seeking work, unless work search is waived.

**NOTE: The online claim application currently cannot be accessed using WebTV, PDAs, handheld computers and similar systems.**

### IS FILING A CLAIM ONLINE RIGHT FOR YOU?

Some individual circumstances are better handled by filing in-person at a local Workforce Development Center. If one or more of the following apply to you, you may want help from Iowa Workforce Development to file your claim.

- If you have worked in a state **OTHER** than Iowa during the past 18 months.
- If you were employed by the Federal government and your duty station **WAS NOT** in Iowa.

### GETTING STARTED

To make your online application process go as smooth as possible, please have the following information available as you are filling out this online claim.

- Your Social Security number
- The name, payroll mailing address and telephone number of your most recent employer
- The starting and ending dates that you worked for your most recent employer
- An Alien Registration number, if you are not a U.S. citizen or permanent refugee
- A DD-214 (Member 4), if you served on **active duty** in the U.S. military during the last 18 months
- An SF-8 form, if you **worked for** the federal government in the last 18 months
- The names of anyone you will be claiming as a **dependent**, up to a maximum of four
- If you claim your spouse as a dependent, the amount, not counting self-employment, your spouse earned in the preceding week, (**must equal \$120 or less to be claimed as a dependent**).

### BEFORE YOU ACCEPT

If you choose to **EXIT** anytime during this process before completing and submitting the application, and receiving a confirmation page, you will be **logged off** and **LOSE ALL INFORMATION** entered thus far and will not have successfully applied for unemployment insurance benefits. (Logging off returns you to the IWD home page.)

For your security, if at anytime during the application process new information is not entered for 30 minutes, the application will automatically time out and you may be prompted to re-enter some information.

Once you have submitted your claim, you will be able to open your information in a "printer friendly" page so you can print the information for your records.

**Attempt to exit the application and you will lose your information. Attempting to exit the application and not accepting unemployment insurance benefits by entering false information can result in other penalties. To demonstrate that you have read the preceding information, please read the preceding information and, if you agree with the conditions, click "I ACCEPT" to file your claim now. If not, click "LOG OFF" to exit the application.**

**Click Here to Accept**

I ACCEPT

LOG OFF

**10. Complete all the REQUIRED information and click on the GREEN arrow to continue to the next screen. At anytime you want to review a previous screen or make a correction, click on the red back arrow.**

# Claim for Unemployment Insurance Filed by YOUR NAME HERE

|                         |                             |                            |                                  |                 |                         |                      |                                  |                         |                                 |                                 |                                 |
|-------------------------|-----------------------------|----------------------------|----------------------------------|-----------------|-------------------------|----------------------|----------------------------------|-------------------------|---------------------------------|---------------------------------|---------------------------------|
| <b>You are Here</b>     |                             |                            |                                  | <b>Progress</b> |                         |                      |                                  |                         |                                 |                                 |                                 |
| 1. Personal Information | 2. Worked in Other State(s) | 3. Active Duty in Military | 4. Worked for Federal Government | 5. Dependents   | 6. Most Recent Employer | 7. Employment Status | 8. Your Work Search Requirements | 9. Certify and Comments | 10. Submit Claim for Processing | 11. Submit Claim for Processing | 12. Submit Claim for Processing |

**All red dot fields are REQUIRED**

## Personal Information

All fields marked with are required

**First Name:**  *Must match the name on your social security card*

**Middle Initial:**

**Last Name:**  *Must match the name on your social security card*

**Suffix (Jr. etc):**

**Mailing Address Line1:**  *House number and street*

**Mailing Address Line2:**  *PO Box, Apt, Lot, Suite number and etc.*

**City:**

**State:**

**Zip/Postal Code:**

**Country:**

**Phone where you can be reached during the day:**  *Area code and telephone number*

**Have you moved out of Iowa since you last worked in Iowa?**

**Local Workforce Development Center nearest you:**

**Social Security Number:**  *Your SSN will display asterisks (\*) or dots as you type!*

**Verify Social Security Number:**

**Date of Birth**  *(Please follow this format: MM/DD/CCYY i.e 01/15/1969):*

**Select Highest Grade completed in School:**

**Are you a United States Citizen, Micronesia Citizen, or A Refugee?**

**If No, Alien Registration Number:**

**If No, Expiration Date of Alien Registration:**  *(Please follow this format: MM/DD/CCYY i.e. 05/10/2010):*

**Gender:**

**Hispanic/Latino:**

**Race (select all that apply):**

- American Indian / Alaskan Native
- Asian
- Black / African American
- Hawaiian Native / Other Pacific Islander
- White

**Click on Next**



# Claim for Unemployment Insurance Filed by YOUR NAME HERE

| Interview Progress                      |                     |                             |                            |                                  |                           |                |               |                         |                      |                                   |                          |                                 |
|---|---------------------|-----------------------------|----------------------------|----------------------------------|---------------------------|----------------|---------------|-------------------------|----------------------|-----------------------------------|--------------------------|---------------------------------|
| <a href="#">1. Personal Information</a> | <b>You are Here</b> | 2. Worked in Other State(s) | 3. Active Duty in Military | 4. Worked for Federal Government | 5. Filed Within Past Year | 6. Withholding | 7. Dependents | 8. Most Recent Employer | 9. Employment Status | 10. Your Work Search Requirements | 11. Certify and Comments | 12. Submit Claim for Processing |

## Combined Wage Claim

 All fields marked with  are required.

If you worked in more than one state you may be eligible for a larger amount in benefits. Please answer the following:

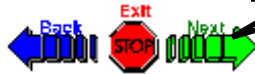
 Did you work in any states or possessions other than Iowa since **04/01/2005**?

If Yes, what state(s) or possession(s)? Enter up to ten.

- First State:
- Second State:
- Third State:
- Fourth State:
- Fifth State:
- Sixth State:
- Seventh State:
- Eighth State:
- Ninth State:
- Tenth State:

List all other states in which you worked in the last 18 months:

**Click on Next**



# Claim for Unemployment Insurance Filed by YOUR NAME HERE

| Interview Progress                      |   |                            |                                  |                           |                |               |                         |                      |                                   |                          |                                 |
|---|---|----------------------------|----------------------------------|---------------------------|----------------|---------------|-------------------------|----------------------|-----------------------------------|--------------------------|---------------------------------|
|   |   | <b>You are Here</b>        |                                  |                           |                |               |                         |                      |                                   |                          |                                 |
| <a href="#">1. Personal Information</a> | <a href="#">2. Worked in Other State(s)</a> | 3. Active Duty in Military | 4. Worked for Federal Government | 5. Filed Within Past Year | 6. Withholding | 7. Dependents | 8. Most Recent Employer | 9. Employment Status | 10. Your Work Search Requirements | 11. Certify and Comments | 12. Submit Claim for Processing |

## Military Claim

All fields marked with are required.

Were you an active member of the U.S. military on active duty since **04/01/2005**?

You indicated you served in the U.S. Military on active duty during the past 18 months and additional information is needed to complete your claim. **Using your DD-214 will help you answer the following questions:**

**Branch of Service:**  *Item #2 on your DD-214*

**Character of Service:**  *Item #24 on your DD214*

**Entry Date:**  *(please follow this format: MM/DD/CCYY, i.e. 07/11/1982)*

**Separation Date :**  *(please follow this format: MM/DD/CCYY, i.e. 08/16/2006)*

**Days Lost:**  *Item #29 on your DD-214*

**Days Accrued Leave:**  *Item #16-DD214*

**Are you a military retiree as of 04/01/2005?**

**Have you applied for, or are you receiving from the Department of Veterans Affairs (VA), a subsistence allowance for vocational rehabilitation?**

**Have you applied for, or are you receiving from the Department of Veterans Affairs (VA), an Educational Assistance Allowance under the War Orphans Educational Assistance?**

**Click on Next**




# Claim for Unemployment Insurance Filed by YOUR NAME HERE


| Interview Progress      |                             |                            |                                  |                           |                |               |                         |                      |                                   |                          |                                 |
|-------------------------|-----------------------------|----------------------------|----------------------------------|---------------------------|----------------|---------------|-------------------------|----------------------|-----------------------------------|--------------------------|---------------------------------|
|                         |                             |                            | <b>You are Here</b>              |                           |                |               |                         |                      |                                   |                          |                                 |
| 1. Personal Information | 2. Worked in Other State(s) | 3. Active Duty in Military | 4. Worked for Federal Government | 5. Filed Within Past Year | 6. Withholding | 7. Dependents | 8. Most Recent Employer | 9. Employment Status | 10. Your Work Search Requirements | 11. Certify and Comments | 12. Submit Claim for Processing |


## Federal Claim


 All fields marked with  are required.


 Did you work for the Federal Government at any time since 04/01/2005?


You indicated you worked for the Federal Government during the past 18 months and additional information is needed to complete your claim. Please answer the following questions:


 Position Title:


 Employment City:


 Employment State:

 Employment Country:


 Employment Start Date:  (please follow this format: MM/DD/CCYY, i.e. 07/13/1988)


 Date of Separation:  (please follow this format: MM/DD/CCYY, i.e. 08/11/2006)

 Employee Type:

 Name of Federal Agency:

Enter Federal Agency Name if not Listed Above

 Department Within Federal Agency:

 Did you receive the SF-8 form?

If you received the SF-8 form, please answer the questions below, based on the SF-8 form:

Payroll Office Address:

Payroll Office City:

Payroll Office State:

Payroll Office ZIP Code:

Click on Next




# Claim for Unemployment Insurance Filed by YOUR NAME HERE


| Interview Progress                      |   |  |  |                           |                |               |                         |                      |                                   |                          |                                 |
|---|---|--|--|---------------------------|----------------|---------------|-------------------------|----------------------|-----------------------------------|--------------------------|---------------------------------|
|   |   |  |  | <b>You are Here</b>       |                |               |                         |                      |                                   |                          |                                 |
| <a href="#">1. Personal Information</a> | <a href="#">2. Worked in Other State(s)</a> | <a href="#">3. Active Duty in Military</a> | <a href="#">4. Worked for Federal Government</a> | 5. Filed Within Past Year | 6. Withholding | 7. Dependents | 8. Most Recent Employer | 9. Employment Status | 10. Your Work Search Requirements | 11. Certify and Comments | 12. Submit Claim for Processing |

## Filed a Claim in the Past 52 Weeks

 All fields marked with  are required.

Please answer all questions related to previous claim activity:

 In the past 52 weeks did you file, receive or apply for unemployment benefits?

 If Yes, in which state did you apply, file and/or receive unemployment insurance benefits?

**Click on Next**




# Claim for Unemployment Insurance Filed by YOUR NAME HERE


| Interview Progress                      |   |  |  |   |                     |               |                         |                      |                                   |                          |                                 |
|---|---|--|--|---|---------------------|---------------|-------------------------|----------------------|-----------------------------------|--------------------------|---------------------------------|
|   |   |  |  |   | <b>You are Here</b> |               |                         |                      |                                   |                          |                                 |
| <a href="#">1. Personal Information</a> | <a href="#">2. Worked in Other State(s)</a> | <a href="#">3. Active Duty in Military</a> | <a href="#">4. Worked for Federal Government</a> | <a href="#">5. Filed Within Past Year</a> | 6. Withholding      | 7. Dependents | 8. Most Recent Employer | 9. Employment Status | 10. Your Work Search Requirements | 11. Certify and Comments | 12. Submit Claim for Processing |

## Withholding

 All fields marked with  are required.

**Unemployment benefits are taxable income. If you choose not to have federal and state taxes withheld from your benefit payments, you will be responsible for paying taxes on those benefits at the end of the calendar year.**

 Do you want federal tax withholding (equals 10 percent of gross weekly benefit) deducted from your unemployment insurance benefits?

 Do you want Iowa tax withholding (equals 5 percent of gross weekly benefit) deducted from your unemployment insurance benefits?

**Some income from pensions and retirement plans may also be deductible from your weekly unemployment insurance benefits.**

Are you receiving a private pension or retirement payments (401K, Keogh, etc.) from an employer that you work for during the period beginning **04/01/2005** through **03/31/2006**?

Click on Next



# Claim for Unemployment Insurance Filed by YOUR NAME HERE

| Interview Progress                      |   |  |  |   |                                |               |                         |                      |                                   |                          |                                 |
|---|---|--|--|---|--------------------------------|---------------|-------------------------|----------------------|-----------------------------------|--------------------------|---------------------------------|
|   |   |  |  |   |                                | You are Here  |                         |                      |                                   |                          |                                 |
| <a href="#">1. Personal Information</a> | <a href="#">2. Worked in Other State(s)</a> | <a href="#">3. Active Duty in Military</a> | <a href="#">4. Worked for Federal Government</a> | <a href="#">5. Filed Within Past Year</a> | <a href="#">6. Withholding</a> | 7. Dependents | 8. Most Recent Employer | 9. Employment Status | 10. Your Work Search Requirements | 11. Certify and Comments | 12. Submit Claim for Processing |

## Dependents

All fields marked with are required.

It is possible to receive additional benefits if you have dependents.

Do you have a spouse, children or other dependents?

You have indicated that you have dependents that you may be able to claim for a dependency allowance. Please complete the following:

Do you have a spouse that earned \$120 or less last week (do not count earnings from spouse's self-employment)?

If your spouse earned \$120 or less last week, enter your spouse's name:

Has your spouse filed an unemployment insurance claim within the past 12 months?

Do you have dependents other than yourself or a spouse that you were able to claim on your Federal tax return last year or will claim this year?

Please enter the names of dependents (do not include your name or your spouse's name in any of these entry fields):


Click on Next



# Claim for Unemployment Insurance Filed by YOUR NAME HERE

| Interview Progress                      |   |  |  |   |                                |                               |                         |                      |                                   |                          |                                 |
|---|---|--|--|---|--------------------------------|-------------------------------|-------------------------|----------------------|-----------------------------------|--------------------------|---------------------------------|
|   |   |  |  |   |                                |                               | You are Here            |                      |                                   |                          |                                 |
| <a href="#">1. Personal Information</a> | <a href="#">2. Worked in Other State(s)</a> | <a href="#">3. Active Duty in Military</a> | <a href="#">4. Worked for Federal Government</a> | <a href="#">5. Filed Within Past Year</a> | <a href="#">6. Withholding</a> | <a href="#">7. Dependents</a> | 8. Most Recent Employer | 9. Employment Status | 10. Your Work Search Requirements | 11. Certify and Comments | 12. Submit Claim for Processing |

## Most Recent Employer

All fields marked with are required.

Enter information about the last employer you worked for prior to filing this claim even if you are still working for that employer.

Most recent Employer Name, Federal Employer Name, or Branch of Military:  Employer name must match the name on your pay stub.

Your Employer's Business Address:  Must match your employer's payroll mailing street address.

Your Employer's Business Address Line 2:  Complete only if needed. PO Box No., Suite, etc.

Your Employer's City:  Must match your employer's payroll mailing address

Your Employer's State:  Must match your employer's payroll mailing address

Your Employer's ZIP Code:  Must match your employer's payroll mailing address

Your Employer's Phone Number:

Last Job Title:

Enter your job title if it is not found in the list above:

Select a Reason for Separation:

Select a reason that best describes why you are totally or partially unemployed.

- DROP DOWN CHOICES:**  
 Laid Off - Lack of Work/Downsizing/Job Eliminated;  
 Laid off - Business Permanently Closed);  
 Quit;  
 Fired For Misconduct;  
 Strike/Lock out/ Union Labor Dispute with an active picket line;  
 Still Working/Reduction in Hours

Date you first started working for this employer:  (please follow this format: MM/DD/CCYY, i.e. 07/19/1983)

Date you last worked for this employer:  (please follow this format: MM/DD/CCYY, i.e. 08/16/2006)

Were you, or will you be, paid any vacation or separation pay from this employer?

If yes, enter the date of the last day you will be paid through?:  (please follow this format: MM/DD/CCYY, i.e. 10/17/2006) This is not the date of your last paycheck. It is the last day for which you will be paid vacation or separation pay.)

Was the work for this employer performed in Iowa?

**Click on Next**




# Claim for Unemployment Insurance Filed by YOUR NAME HERE

| Interview Progress                      |   |  |  |   |                                |                               |   |                      |                                   |                          |                                 |
|---|---|--|--|---|--------------------------------|-------------------------------|---|----------------------|-----------------------------------|--------------------------|---------------------------------|
|   |   |  |  |   |                                |                               |   | <b>You are Here</b>  |                                   |                          |                                 |
| <a href="#">1. Personal Information</a> | <a href="#">2. Worked in Other State(s)</a> | <a href="#">3. Active Duty in Military</a> | <a href="#">4. Worked for Federal Government</a> | <a href="#">5. Filed Within Past Year</a> | <a href="#">6. Withholding</a> | <a href="#">7. Dependents</a> | <a href="#">8. Most Recent Employee</a> | 9. Employment Status | 10. Your Work Search Requirements | 11. Certify and Comments | 12. Submit Claim for Processing |


## Work Employment Status

 All fields marked with  are required.

 Please select the statement that best describes your employment status with your most recent employer.

### DROP DOWN CHOICES:

- You are NOT likely to return to your most recent employer;
- You are on a temporary layoff or still working for your most recent employer;
- You refused to bump a less senior employee;
- You obtain work through a Union Hiring Hall and you are a member in good standing;
- You are on a temporary layoff as a result of a natural disaster.

 In your occupation, do potential employers request you apply for employment using email, mail, fax of a resume or by completing an on-line application form?

Click on Next





# Claim for Unemployment Insurance Filed by YOUR NAME HERE

| Interview Progress                      |   |  |  |   |                                |                               |   |                                      |                                   |                          |                                 |
|---|---|--|--|---|--------------------------------|-------------------------------|---|--------------------------------------|-----------------------------------|--------------------------|---------------------------------|
|   |   |  |  |   |                                |                               |   |                                      |                                   | You are Here             |                                 |
| <a href="#">1. Personal Information</a> | <a href="#">2. Worked in Other State(s)</a> | <a href="#">3. Active Duty in Military</a> | <a href="#">4. Worked for Federal Government</a> | <a href="#">5. Filed Within Past Year</a> | <a href="#">6. Withholding</a> | <a href="#">7. Dependents</a> | <a href="#">8. Most Recent Employer</a> | <a href="#">9. Employment Status</a> | 10. Your Work Search Requirements | 11. Certify and Comments | 12. Submit Claim for Processing |

## Your Work Search Requirements

### You are NOT likely to return to your most recent employer.

Please follow the work search requirements listed below:

- You are required to make at least two in-person job contacts each week.
- You must keep a written record of your contacts and provide this information when requested.
- You are required to complete a full registration for job search assistance with your local workforce development center.
- You may complete the registration online at [www.iowaworkforce.org](http://www.iowaworkforce.org).

Additional information about work search requirements is available in the Facts About Unemployment Insurance guide.

OR

### You are on a temporary layoff or still working for your most recent employer.

Please follow the work search requirements listed below:

- You are required to be able and available for work with the employer that has temporarily laid you off.
- You do NOT have to look for work.
- You are NOT required to complete a full registration for job search assistance.

Additional information about work search requirements is available in the Facts About Unemployment Insurance guide.

OR

### You refused to bump a less senior employee.

Please follow the work search requirements listed below:

- You are required to be able and available for work with the employer that has temporarily laid you off.
- You do NOT have to look for work.
- You are NOT required to complete a full registration for job search assistance.

Additional information about work search requirements is available in the Facts About Unemployment Insurance guide.

OR

### You obtain work through a Union Hiring Hall and you are a member in good standing.

Please follow the work search requirements listed below:

- As a member of a trade union with a hiring hall or placement facility, you are required to contact your union for possible work.
- Your contacts should be made in accordance with your union policy and guidelines.
- You are NOT required to complete a full registration for job search assistance.

Additional information about work search requirements is available in the Facts About Unemployment Insurance guide.

OR

### You are on a temporary layoff as a result of natural disaster.

Please follow the work search requirements listed below:

- You are required to be able and available for work with the employer that has temporarily laid you off.
- You are NOT required to complete a full registration for job search assistance.

Additional information about work search requirements is available in the Facts About Unemployment Insurance guide.



# Claim for Unemployment Insurance Filed by YOUR NAME HERE

| Interview Progress                      |   |  |  |   |                                |                               |   |                                      |   |                          |                                 |
|---|---|--|--|---|--------------------------------|-------------------------------|---|--------------------------------------|---|--------------------------|---------------------------------|
|   |   |  |  |   |                                |                               |   |                                      |   |                          | You are Here                    |
| <a href="#">1. Personal Information</a> | <a href="#">2. Worked in Other State(s)</a> | <a href="#">3. Active Duty in Military</a> | <a href="#">4. Worked for Federal Government</a> | <a href="#">5. Filed Within Past Year</a> | <a href="#">6. Withholding</a> | <a href="#">7. Dependents</a> | <a href="#">8. Most Recent Employer</a> | <a href="#">9. Employment Status</a> | <a href="#">10. Your Work Search Requirements</a> | 11. Certify and Comments | 12. Submit Claim for Processing |

## Certification and Additional Comments

 I certify under penalty of law:

**DROP DOWN CHOCIES:**  
 I am a citizen or national of the United States or Micronesia;  
 I am a refugee with permanent residency in the United States;  
 I am an alien with "Employment Authorized" status issued by the U.S. Immigration and Naturalization Service;  
 I am not a citizen and am not claiming satisfactory immigration status.

I certify that I am totally or partially unemployed, able to work and that I am hereby partially registered for work. I know that the law prescribes penalties for false statements made in connection with this claim. **I CERTIFY THAT THE STATEMENTS I HAVE MADE IN THIS APPLICATION ARE TRUE AND CORRECT** to the best of my knowledge and belief. I further certify that I will read the **FACTS ABOUT UNEMPLOYMENT INSURANCE** guide, which will be sent to me, and I will read and follow the instructions. If I have a question, I will contact Iowa Workforce Development.

I acknowledge that the information I provide to Iowa Workforce Development may be made available to federal, state or local agencies and their subcontractors who administer employment and training programs.

**Use the box below to enter any additional information you feel we need to be aware of regarding your claim:**

Click on Next



# Claim for Unemployment Insurance Filed by YOUR NAME HERE

082806

| Interview Progress                      |   |  |  |   |                                |                               |   |                                      |   |  |                                 |
|---|---|--|--|---|--------------------------------|-------------------------------|---|--------------------------------------|---|--|---------------------------------|
|   |   |  |  |   |                                |                               |   |                                      |   |  | You are Here                    |
| <a href="#">1. Personal Information</a> | <a href="#">2. Worked in Other State(s)</a> | <a href="#">3. Active Duty in Military</a> | <a href="#">4. Worked for Federal Government</a> | <a href="#">5. Filed Within Past Year</a> | <a href="#">6. Withholding</a> | <a href="#">7. Dependents</a> | <a href="#">8. Most Recent Employer</a> | <a href="#">9. Employment Status</a> | <a href="#">10. Your Work Search Requirements</a> | <a href="#">11. Certify and Comments</a> | 12. Submit Claim for Processing |

All Fields marked with are required.

**EQUAL OPPORTUNITY IS THE LAW.** Iowa Workforce Development is an Equal Opportunity Employer and does not discriminate in its programs and services on the grounds of race, color, religion, sex, national origin, age, disability, political affiliation or belief, and for beneficiaries only, citizenship or participation in WIA. If you think you have been subjected to discrimination, you should contact the Affirmative Action Officer located at:

Iowa Workforce Development  
1000 East Grand Avenue  
Des Moines, Iowa 50319-0209

Auxiliary aids and services are available upon request to individuals with disabilities.

## Certification

I certify under penalty of law:

I certify that I am totally or partially unemployed, able to work and that I am hereby partially registered for work. I know that the law prescribes penalties for false statements made in connection with this claim. **I CERTIFY THAT THE STATEMENTS I HAVE MADE IN THIS APPLICATION ARE TRUE AND CORRECT** to the best of my knowledge and belief. I further certify that I will read the **FACTS ABOUT UNEMPLOYMENT INSURANCE** guide, which will be sent to me, and I will read and follow the instructions. If I have a question, I will contact Iowa Workforce Development.

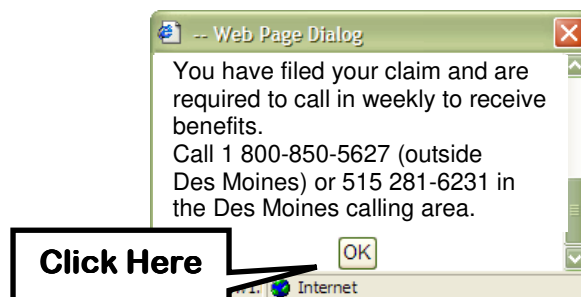
I acknowledge that the information I provide to Iowa Workforce Development may be made available to federal, state or local agencies and their subcontractors who administer employment and training programs.

**FINISH FILING YOUR CLAIM BY CLICKING ON THE SUBMIT CLAIM FOR PROCESSING BUTTON BELOW TO RECEIVE YOUR CONFIRMATION NUMBER.**

**Submit Claim for Processing** Click Here



**12. A dialog box will appear on the next screen. Scroll to the bottom and click "OK" to receive your confirmation number and weekly call-in instructions.**



Click here  
to print

## Iowa Workforce Development

# Unemployment Insurance Claim Confirmation

[Click here to open a printer friendly version of your claim information in another browser window.](#)

**Your claim confirmation number is**

**IWDP-Your Number**

You have successfully filed your unemployment insurance claim. If you provided a valid e-mail address when creating your user and personal information account, you will receive an e-mail confirmation when processing of your online claim has been completed. If your e-mail account is not valid, you will not receive this message. The above number is proof that you have filed your claim. Please keep a record of your confirmation number. If additional information is needed, you will be contacted by phone or mail. If this claim is your initial application for unemployment benefits, you will receive instructions and other important documents in the mail.

### WEEKLY CALL-IN INSTRUCTIONS

The effective date of your claim will be Sunday, **MM/DD/YYYY**. To receive your unemployment insurance benefits each week you **MUST** call the continued claims reporting system at (800) 850-5627 (toll free outside the Des Moines area) or 281-6231 (within the Des Moines calling area). **The best hours to call are between 10 a.m., Saturday to 11:30 p.m., Sunday, or Monday through Friday, 7:30 a.m. to 4:59 p.m.** A prerecorded interactive voice response (IVR) system will ask you to certify that you:

- Are unemployed or working reduced hours;
- Are able and available for work;
- Have not refused any job offers or referrals;
- Are actively looking for work (unless waived); and
- Are reporting any pay or pension you may be receiving.

**This call is MANDATORY every week if you want to receive an unemployment insurance payment.**

### PERSONAL ID NUMBER (PIN)

**When you make your continued claims call for the first time, you will be asked to enter a personal identification number (PIN).** Be sure to select a PIN that will be easy to remember since you must use the same PIN each time you call to file your weekly claim or call to reactivate an existing claim. **Do not use the same numbers in sequence (such as 1111 or 3333) or numbers in sequence (such as 1234).** **(Note:** In some cases you will need to select a new PIN the first time you call in your continued claim after reactivating an existing claim.)

## Unemployment Insurance Initial Claim (Internet)

Date Filed: MM/DD/YYYY  
 Confirmation Number: IWDP-Your Number  
 When Submitted: MM/DD/YYYY HH:MM:SS PM CDT  
 Submitted from an IWD Resource Room or Facility

|  |  |  |                                     |
|--|--|--|-------------------------------------|
| Name: <b>Last Name, First Name, MI</b>   |  | Last 4 Digits of Social Security Number: <b>####</b>                                   |                                     |
| Mailing Address:<br><b>Street<br/>City, State ZIP</b>  |  | Iowa Workforce Development Center:<br><b>Local Office Number</b>                       |                                     |
| Telephone: <b>###-###-####</b>   | Date of Birth: <b>MM/DD/YYYY</b>   | Highest Grade Completed in School: <b>##</b>   |                                     |
| U.S. Citizen: <b>Yes or No</b>   |  |  |                                     |
| Did you work in any states other than Iowa in the past 18 months?<br><b>Yes or No</b>          |  |  |                                     |
| Did you work for the federal government in the past 18 months? <b>Yes or No</b>                |  |  |                                     |
| Did you work for the U.S. Military in the past 18 months? <b>Yes or No</b>                     |  |  |                                     |
| Applied for or received unemployment insurance benefits in the past 52 weeks? <b>Yes or No</b> |  |  |                                     |
| Withhold federal taxes from benefits? <b>Yes or No</b>   | Withhold Iowa taxes from benefits? <b>Yes or No</b>  | Receiving private pension or retirement payments (401K, Keogh, etc.)? <b>Yes or No</b> |                                     |
| Spouse, Children or Other Dependents? <b>Yes or No</b>   |  |  |                                     |
| Business Name of Most Recent Employer:   |  | Address:<br><b>Street, City, State, ZIP</b>  |                                     |
| Job Title:   | Date Began: <b>MM/DD/YYYY</b>  | Date last worked: <b>MM/DD/YYYY</b>  | Employer Phone: <b>###-###-####</b> |
| Reason Left:   | Work Performed in Iowa? <b>Yes or No</b>   | Vacation or separation pay <b>AFTER</b> last day worked? <b>Yes or No</b>              |                                     |
| Description of separation/situation:   | Your Work Search Requirements:<br><br><ul style="list-style-type: none"> <li>• <b>You are .....</b></li> </ul> |  |                                     |
| Application method:  |  |  |                                     |

### Certification

I certify under penalty of law:

- **I am ....**

I certify that I am totally or partially unemployed, able to work and that I am hereby partially registered for work. I know that the law prescribes penalties for false statements made in connection with this claim. **I CERTIFY THAT THE STATEMENTS I HAVE MADE IN THIS APPLICATION ARE TRUE AND CORRECT** to the best of my knowledge and belief. I further certify that I will read the FACTS ABOUT UNEMPLOYMENT INSURANCE guide, which will be sent to me, and I will read and follow the instructions. If I have a question, I will contact Iowa Workforce Development.

I acknowledge that the information I provide to Iowa Workforce Development may be made available to federal, state or local agencies and their subcontractors who administer employment and training programs.

**EQUAL OPPORTUNITY IS THE LAW.** Iowa Workforce Development is an Equal Opportunity Employer and does not discriminate in its programs and services on the grounds of race, color, religion, sex, national origin, age, disability, political affiliation or belief, and for beneficiaries only, citizenship or participation in WIA. If you think you have been subjected to discrimination, you should contact the Affirmative Action Officer located at:

Iowa Workforce Development  
 1000 East Grand Avenue  
 Des Moines, Iowa 50319-0209

Auxiliary aids and services are available upon request to individuals with disabilities.

**13. You have now completed your application for unemployment benefits.**