The definition of sexual harassment includes many forms of offensive behavior.

An employer might avoid liability if

- the harasser is not in a position of authority, such as a lead, supervisor, manager or agent;
- the employer had no knowledge of the harassment;
- there was a program to prevent harassment; and
- once aware of any harassment, the employer took immediate and appropriate corrective action to stop the harassment.

Filing a Complaint

Employees or job applicants who believe that they have been sexually harassed may file a complaint of discrimination with DFEH within one year of the harassment.

DFEH serves as a neutral fact-finder and attempts to help the parties voluntarily resolve disputes. If DFEH finds sufficient evidence to establish discrimination occurred and settlement efforts fail, the Department may file a formal accusation. The accusation will lead to either a public hearing before the Fair Employment and Housing Commission or a lawsuit filed by DFEH on behalf of the complaining party.

If the Commission finds that discrimination has occurred, it can order remedies including:

- Fines or damages for emotional distress from each employer or person found to have violated the law
- Hiring or reinstatement
- Back pay or promotion
- Changes in the policies or practices of the involved employer

Employees can also pursue the matter through a private lawsuit in civil court after a complaint has been filed with DFEH and a Right-to-Sue Notice has been issued.

For more information, see DFEH publication 159 “Guide for Complainants and Respondents.”

Sexual Harassment

The Facts About Sexual Harassment

The Fair Employment and Housing Act (FEHA) defines sexual harassment as harassment based on sex or of a sexual nature; gender harassment; and harassment based on pregnancy, childbirth, or related medical conditions. The definition of sexual harassment includes many forms of offensive behavior, including harassment of a person of the same gender as the harasser. The following is a partial list of types of sexual harassment:

- Unwanted sexual advances
- Offering employment benefits in exchange for sexual favors
- Actual or threatened retaliation
- Leering; making sexual gestures; or displaying sexually suggestive objects, pictures, cartoons, or posters
- Making or using derogatory comments, epithets, slurs, or jokes
- Sexual comments including graphic comments about an individual’s body; sexually degrading words used to describe an individual; or suggestive or obscene letters, notes, or invitations
- Physical touching or assault, as well as impeding or blocking movements
The mission of the Department of Fair Employment and Housing is to protect the people of California from unlawful discrimination in employment, housing and public accommodations, and from the perpetration of acts of hate violence.

Employers’ Obligations

All employers must take the following actions against harassment:

- Take all reasonable steps to prevent discrimination and harassment from occurring. If harassment does occur, take effective action to stop any further harassment and to correct any effects of the harassment.
- Develop and implement a sexual harassment prevention policy with a procedure for employees to make complaints and for the employer to investigate complaints. Policies should include provisions to:
  - Fully inform the complainant of his/her rights and any obligations to secure those rights.
  - Fully and effectively investigate. The investigation must be thorough, objective, and complete. Anyone with information regarding the matter should be interviewed. A determination must be made and the results communicated to the complainant, to the alleged harasser and, as appropriate, to all others directly concerned.
  - Take prompt and effective corrective action if the harassment allegations are proven. The employer must take appropriate action to stop the harassment and ensure it will not continue. The employer must also communicate to the complainant that action has been taken to stop the harassment from recurring. Finally, appropriate steps must be taken to remedy the complainant’s damages, if any.
- Post the Department of Fair Employment and Housing (DFEH) employment poster (DFEH 162) in the workplace (available through the DFEH toll-free number [800] 884-1684 or web site).
- Distribute an information sheet on sexual harassment to all employees. An employer may either distribute this pamphlet (DFEH 185) or develop an equivalent document that meets the requirements of Government Code section 12950(b). This pamphlet may be duplicated in any quantity. However, this pamphlet is not to be used in place of a sexual harassment prevention policy, which all employers are required to have.
- All employees should be made aware of the seriousness of violations of the sexual harassment policy. Supervisory personnel should be educated about their specific responsibilities. All employees must be cautioned against using peer pressure to discourage harassment victims from complaining.
- A program to eliminate sexual harassment from the workplace is not only required by law, but is the most practical way for an employer to avoid or limit liability if harassment should occur despite preventive efforts.

Employer Liability

All employers, regardless of the number of employees, are covered by the harassment section of the FEHA. Employers are generally liable for harassment by their supervisors or agents. Harassers, including both supervisory and nonsupervisory personnel, may be held personally liable for harassing an employee or coworker or for aiding and abetting harassment.

Additionally, the law requires employers to take "all reasonable steps to prevent harassment from occurring." If an employer has failed to take such preventive measures, that employer can be held liable for the harassment. A victim may be entitled to damages, even though no employment opportunity has been denied and there is no actual loss of pay or benefits.

In addition, if an employer knows or should have known that a nonemployee (e.g. client or customer) has sexually harassed an employee, applicant, or person providing services for the employer and fails to take immediate and appropriate corrective action, the employer may be held liable for the actions of the nonemployee.
Compassion
Workers
Facts about
Workers' Compensation
Insurance
Authority & Rights

If you are injured on the job:
- Notify your supervisor.
- Notify your employer.

Phone Numbers

Workers' Compensation Fund
Claims Administrated By:

333 Howard St.
San Francisco, CA 94105

Phone: 415-896-4000
Fax: 415-896-4010

State Compensation Insurance Fund

Phone: 415-896-4000
Fax: 415-896-4010

California Workers' Compensation Institute

Phone: 415-896-4000
Fax: 415-896-4010

3rd Party Administration

Phone: 415-896-4000
Fax: 415-896-4010

Emergency Phone Numbers

Fire Station: 911
Police Station: 911
Motorist Assistance: 911

Address:
250 Market St., PM 4078

Website:
http://www.compassionworks.com

Workers' Compensation Fund:

Workers, their families, and the community have an interest in a workers' compensation system that is fair, efficient, and promotes workplace health and safety.

The California Workers' Compensation System is designed to:
1. Provide immediate relief to injured workers.
2. Return injured workers to their former or equivalent employment.
3. Prevent injury and illness at work.
4. Improve workers' compensation outcomes.

All information provided is for educational purposes only and should not be considered as legal advice. To receive legal advice, please contact a lawyer.

More About Medical Care

Medical care is important for recovery. It is important to follow the treatment plan provided by your healthcare provider. If you have any questions or concerns, please discuss them with your healthcare provider. If you are receiving medical care outside of your healthcare provider's network, you may need to obtain pre-authorization for some services. Your healthcare provider can provide guidance on what to expect during your medical care.

If you have any questions or concerns, please contact your healthcare provider or a licensed California Workers' Compensation Advisor. You can also visit the California Workers' Compensation Institute website for more information.

If you are injured on the job and need medical care, please contact your healthcare provider immediately. It is important to follow the treatment plan provided by your healthcare provider. If you have any questions or concerns, please discuss them with your healthcare provider. If you are receiving medical care outside of your healthcare provider's network, you may need to obtain pre-authorization for some services. Your healthcare provider can provide guidance on what to expect during your medical care.

If you have any questions or concerns, please contact your healthcare provider or a licensed California Workers' Compensation Advisor. You can also visit the California Workers' Compensation Institute website for more information.
If You Have Questions

If you have questions regarding your rights, protections, and benefits under this Act, please contact your employer or your labor union representative. You can also contact the California Workers' Compensation Fraud Bureau at 1-800-986-5397. In addition, you can visit the California Department of Insurance website at www.insurance.ca.gov for more information.

Benefits

The benefits available to you under this Act include:

- Medical treatment and compensation for lost wages
- Vocational rehabilitation
- Death benefits for dependents
- Survivor benefits
- Disability benefits
- Reimbursement for travel expenses
- Payment of reasonable attorney fees

Other Benefits

In addition to the benefits outlined above, your employer may provide you with other benefits such as:

- Disability income protection
- Life insurance
- Health and dental insurance
- Retirement benefits
- Tuition reimbursement

Your employer's contributions to these benefits are subject to the requirements of the Act.

The Way It Works

This Act provides a balanced approach to providing workers' compensation benefits while protecting employers from unreasonable claims. The Act is designed to ensure that workers are fairly compensated for their injuries, while also encouraging employers to maintain a safe work environment.

Workers' compensation is a system of insurance that provides benefits to workers who are injured or become ill due to their employment. The system is funded by contributions from employers and divided among workers who are injured or become ill.

Workers' compensation benefits are provided to injured workers in addition to other benefits, such as Social Security benefits. The benefits provided under workers' compensation are designed to replace a portion of a worker's lost wages, provide medical treatment, and cover other costs associated with the injury or illness.

The system also includes a mechanism for resolving disputes between workers and employers. If a worker believes that they are entitled to workers' compensation benefits, they can file a claim with the Workers' Compensation Appeals Board. The Board will review the claim and make a determination based on the evidence presented.

The system is designed to be self-funding, which means that contributions made by employers are sufficient to pay for claims and administrative costs. This system is different from the system of social insurance, which is funded by contributions from both employers and workers.

In conclusion, the workers' compensation system provides a safety net for injured workers while protecting employers from unreasonable claims. The system is designed to balance the interests of workers and employers, and to ensure that workers are fairly compensated for their injuries.

The Legislature

The Legislature is the lawmaking body of the state of California. The Legislature is divided into two houses: the Senate and the Assembly. The Senate has 40 members, and the Assembly has 80 members. Each member represents a district in California. The Legislature is responsible for enacting laws to govern the state, including laws related to the workers' compensation system.

The California Constitution

The California Constitution is the fundamental law of the state of California. It is the highest law in the state, and it establishes the framework for the government of California. The Constitution provides for the separation of powers among the three branches of government: the legislative, executive, and judicial branches. The Constitution also guarantees certain rights and freedoms to California residents.

The Constitution includes provisions related to workers' compensation, including the definition of an employer and an employee, the right to file a workers' compensation claim, and the rights and duties of employers and employees.

The Constitution also includes provisions related to the Legislature, including the composition of the Legislature, the powers of the Legislature, and the process for amending the Constitution.

The Legislature has the power to enact laws to implement the provisions of the Constitution. The Legislature can also amend the Constitution through a process that requires a two-thirds vote of both the Senate and the Assembly, followed by approval of the electorate in a general election.

In conclusion, the workers' compensation system in California is governed by the Constitution, which establishes the framework for the government of California. The Legislature, which is the lawmaking body of the state, is responsible for enacting laws to implement the provisions of the Constitution, including laws related to workers' compensation.
HARASSMENT

California State University, Fresno Foundation (“Foundation”) is committed to providing a work environment free of unlawful harassment for its employees, customers and visitors. This Foundation policy prohibits sexual harassment and discrimination based on pregnancy, childbirth, or related medical conditions, race, religious creed, color, national origin, ancestry, physical or mental disability, medical condition, marital status, age, sexual orientation or any other basis protected by federal, state or local law or ordinance or regulation. **All such harassment is unlawful.**

Prohibited unlawful harassment or discrimination because of sex, race, ancestry, religion, physical or mental disability, medical condition, marital status, age or any other protected basis includes, but is not limited to, the following behavior:

1. Verbal conduct such as epithets, derogatory jokes or comments, slurs or unwanted sexual advances, invitations or comments;
2. Visual conduct such as derogatory and/or sexually-oriented posters, photography, cartoons, drawings or gestures;
3. Physical conduct such as assault, unwanted touching, blocking normal movement or interfering with work because of sex, race or any other protected basis;
4. Threats and demands to submit to sexual requests as a condition of continued employment, or to avoid some other loss, and offers of employment benefits in return for sexual favors; and
5. Retaliation for having reported or threatened to report harassment.

Employees who believe they have been harassed on the job should provide a written or verbal complaint to the Foundation Human Resources Department or the Executive Director of California State University, Fresno Association, Inc. Complaints should include details of the incident(s), name of the individual(s) involved and names of any witnesses.

Any supervisor of any Foundation employee(s) having knowledge of a harassment complaint must refer such complaint to the Foundation Human Resources Department or the Executive Director of California State University, Fresno Association, Inc. California State University, Fresno, Foundation will immediately undertake an effective, thorough and objective investigation of the harassment allegations. If the Foundation determines that a violation of this policy has occurred, effective remedial action will be taken in accordance with the circumstances involved. Any employee determined by the Foundation to have violated this policy will be subject to appropriate disciplinary action, up to and including termination.

Whatever action is taken will be made known to the reporting employee. California State University, Fresno Foundation will not retaliate against you for filing a complaint and will not tolerate or permit retaliation by management, employees or coworkers. Any allegation of retaliation must be immediately reported to the Foundation Human Resources Department or the Executive Director of California State University, Fresno Association, Inc. California State University, Fresno Foundation cannot address possible violations of this policy if it is not aware of the allegation. This policy is applicable to all Foundation employees and persons providing services to California State University, Fresno Foundation pursuant to a contract.
Workplace Violence
California State University, Fresno
September 1993
Policy No. G-34.1

CALIFORNIA STATE UNIVERSITY, FRESNO

Workplace Violence

A Guide for Employees
California State University, Fresno is concerned about the personal safety and security of its students, employees and guests. University policy does not tolerate violence, threats of violence and acts of aggression against members of the university community or visitors. It is the responsibility of our faculty, staff and students to report acts or threats of violence to the university police department and/or to appropriate supervisory personnel. Any student, faculty or staff who engages in behavior which violates this policy will be subject to appropriate university disciplinary actions, and may be subject to applicable civil or criminal legal action as well.

Recognizing the warning signs
The most important line of defense is to combine preventive human resource practices with close attention to the warning signs for the prediction of violent behavior. Faculty, staff and supervisors or managers must take a proactive approach that includes understanding:

- What behaviors are involved.
- Current university practice.
- Each person's role in responding promptly and tactfully.
- How to maintain smooth department operations while ensuring everyone’s safety.

Acts of aggression include verbal or physical action intended to intimidate, create fear or apprehension of bodily harm or threaten the safety of an administrator, faculty or staff, student, or the public.

Acts of violence include any intentional or reckless act that causes injury to an administrator, faculty or staff members, student, or the public.

Examples of behaviors that require intervention are:

- Any verbal or physical action intended to create fear or apprehension of bodily harm.
- Behavior or actions interpreted by a reasonable person as carrying potential for violence and/or acts of aggression (throwing objects, waving fists, destroying property, etc.).
- Any threat to harm another individual or to in anyway endanger the safety of others.
- Any threat to destroy property.
- Behavior that might signal emotional distress.
- Evidence of alcohol or other drug abuse.
- Harassing or demeaning comments or jokes or sexual or ethnic slurs intended to provoke another person.
The causes of aggression and violence are complex and beyond these guidelines. Individuals who are at a higher risk may have a history of violence, a current mental illness, a substance abuse problem, or are responding to accumulation or life and workplace stresses. Mental health, police, and human resource professionals are available on campus and able to provide “profiles” of potentially dangerous individuals. They can assist you in assessing potential risk and advise you on appropriate steps to take.

What to do in an emergency
All threats and acts of aggression or violence must be taken seriously and addressed immediately. Each incident is different and requires a response based on the actual situation and facts. However, the following general recommendations can be used by anyone who may encounter an actual or potential situation:

Remain calm. If someone is edging out of control, voice is rising, tone is becoming threatening, or nonverbal cues suggest imminent physical violence, above all remain calm. Assure the person that everything possible will be done to meet his/her needs, and offer to let him/her speak to your supervisor. Summon your supervisor for assistance; often just talking to someone else tends to defuse volatile situations.

Direct the involved parties to leave the scene of a confrontation, if this can be done safely. If the threatening or aggressive person does not agree to leave, do not try to physically force the person to leave. Do not touch the person or invade his/her personal space. Keep a safe distance of three to six feet.

Never challenge, try to bargain, or make promises you cannot keep with a threatening individual. Avoid any type of challenging stance (hands on hips, face-to-face, eye-to-eye, toe-to-toe).

Moderate the tone, volume, and rate of your verbal communication. Try to listen empathetically to what the person is really saying. Respect his/her perceptions and concerns.

Contact the University Police (Call 911) for assistance at the first opportunity

Make every effort to get others out of the immediate area until the involved parties leave the scene. Position yourself, if possible, so that an exit route is readily accessible to you.

If a weapon is involved, calmly ask the person to put it in a neutral location while you continue to talk with him/her. Never attempt to disarm or restrain an armed person. Call 911 immediately.

Contact Human Resources, Academic Personnel, or Dean of Students as appropriate, for advice on policies, procedures and any disciplinary action to be taken.
What to expect when it's over

When aggressive acts or violence occurs, the management of the situation will affect department operations, morale, and the response of those involved. As an employee, you can support your manager in carrying out several responsibilities:

Consulting
- After the safety of the workplace has been restored, the facts, details, and the names of witnesses need to be provided to the appropriate parties (University Police, Human Resources, Employee Assistance Program, Deans, and Department Heads). These offices will help in determining what is needed to return your workplace to normal operations.

Providing emotional support
- Managers need to provide reassurance to those affected that the problem is being addressed. Help your manager control rumors and calm the environment. Remember that coworkers and others can benefit from crisis intervention and debriefing services through the Employee Assistance Program.

Arranging for security
- Your manager will arrange to secure the building, retrieve an employee’s keys and contact University Police when an employee is not authorized to return to work. Support your manager in these measures.

References


"Non-violent Crisis Intervention," National Crisis Prevention Institute, Inc. 3315-K North 124th Street, Brookfield, Wisconsin 53005.


"Supervisory Guidelines for Threat and Violence Management" University of Michigan, Faculty and Staff Assistance Program.

"Trauma in the Workplace: Risks, Cost, Solutions" D. Chadwick, M. Braverman, S. Braverman, Betterley Risk Management Commentary, Vol 13, No 3, 4th Quarter, 1992


"When Employees Make Good on Bad Intentions," R. Yandrick, EAPA Exchange, September 1993.
Violence in the workplace

Nationally, threats and acts of violence in the workplace are increasing both in frequency and severity. Homicides, like the recent post office shootings, are the extremes, although all threats and acts of aggression or violence must be taken seriously and given high priority due to the unknown risk.

Our university cannot be removed from the social tensions identified as precipitating factors in some of these incidents of workplace violence. Administrators, faculty or staff members, and students often experience anxiety and confusion over what to do when they encounter potential or actual violence at the university. These guidelines will introduce you to methods and basic information on workplace violence and threats.

We cannot predict violence with absolute certainty, but we can evaluate the risk potential, reduce that risk, and affect the outcome. Risk is increased when behavioral indicators are ignored. Job loss, disciplinary matters, grievances, and the way in which they are handled can be major stresses in some cases of workplace violence.

The circumstances associated with workplace violence can be divided into three major types:

- When an outside person has no legitimate relationship to the workplace and enters the workplace to commit a robbery, assault or other criminal act.

- When the verbally aggressive or assaultive person is a recipient or the object of service by the affected workplace victim (e.g., the assailant is a current or former student, customer, client, criminal suspect, etc.)

- When the person has an employment-related involvement with the workplace (usually involves an assault by a current or former employee, supervisor or manager; a current/former spouse or lover; a relative or friend; or some other person who has a dispute with an employee of the workplace).
**Who can help you?**

In addition to reporting acts of workplace violence or aggression immediately to your supervisor, you may contact other members of the campus community who can assist your assessment and successful resolution of the potential threat. If appropriate, these individuals may activate the university's Violence Response Team.

**Human Resources**
Jeannine Raymond, Ph.D., Director  
Joyal Administration Building 148  
278-2364

**University Health and Psychological Services**
Robert Paull, M.D., Director  
Ron Perry, Coordinator of Psychological Services  
278-6715

**Student Affairs**
Robert Hernandez, Judicial Affairs Officer  
Joyal Administration Building 262  
278-2541

**Joint Labor Council**
Tony Garduque, Representative  
Educational Opportunity Program  
278-1787

**University Police Department**
Lynn Button  
Director of Public Safety/Chief of Police  
278-2243

**Auxiliary Services, Human Resources**
Anita Bridal, Associate Director  
4910 N. Chestnut  
278-0860

**Employee Assistance & Development**
Dr. John Franz, Director  
San Ramon 3, Room 119  
278-4357

**Academic Personnel**
Tom Ebert  
Associate Vice President  
Thomas Administration Building 118  
278-3027

**Risk Management**
David M. Moll, Director  
Environmental Health & Safety  
278-7422
Disability is any illness or injury, either physical or mental, that prevents you from doing your regular or customary work. (California Unemployment Insurance Code, section 2626) Disability also includes elective surgery, pregnancy, childbirth, or related medical conditions.

State Disability Insurance (SDI) is designed to partially replace wages you lost because of a disability that was not caused by your work. (See "Other Programs" on reverse for job-related disabilities.)

SDI taxes are paid by those California workers who are covered by the SDI program. Tax rates may vary from year to year. For current rates, contact the Employment Development Department (EDD) Disability Insurance Customer Service at 1-800-480-3287 or EDD Employment Tax Customer Service at 1-888-745-3886.

SDI Plans

• State Plan. SDI's State Plan is covered in this brochure.

• Voluntary Plan. This is a private plan, approved by the Director of EDD, which may be substituted for the State Plan. Employers and employee groups may establish Voluntary Plans if the majority of employees and the employer agree to do so. If you are covered by a Voluntary Plan, the provisions of this brochure may not apply to you. Obtain information about your coverage and file a voluntary plan claim through your employer.

• Elective Coverage. Employers and self-employed persons, including general partners, may elect coverage. However, the method of computing benefits for elective coverage participants is not the same as for mandatory rate payers. The cost of participating, which is set annually, can be obtained from your local EDD Employment Tax Customer Service Office.

Claims are filed in the same manner as State Plan claims; however, there are some differences in eligibility requirements from those listed in this pamphlet. For additional information or to apply for coverage, contact EDD Disability Insurance Customer Service at 1-800-480-3287 or EDD Employment Tax Customer Service at 1-888-745-3886.

Individuals in family employment not subject to the California Unemployment Insurance Code may also elect coverage at the same rate and benefits as employees covered by the State Plan and with the same benefits as the State Plan.

How to Claim State Plan Benefits

1. Request a claim form:
   • By telephone at: 1-800-480-3287
     (California State government employees covered by SDI should telephone 1-866-352-7675)
   • By Internet at: www.edd.ca.gov/direp/dirq2501.htm
   • By TTY (teletypewriter for deaf, hearing-impaired and speech-impaired persons only) at: 1-800-563-2441
   • By writing EDD, Disability Insurance, P.O. Box 13140, Sacramento, CA 95813-3140
   • In person by visiting any of the SDI offices listed in this brochure

2. Fill out and sign the “Claim Statement of Employee.” Print clearly, and be sure that your answers are complete and correct because errors may delay payments.

3. Have your doctor complete the “Doctor's Certificate.” Usually a claim cannot begin more than seven days before you were examined by or under the care of a certifying doctor. Certification may be made by a licensed physician, surgeon, U.S. Government medical officer, osteopathic physician, chiropractor, podiatrist, optometrist, dentist, designated psychologist, or accredited religious practitioner. For normal pregnancy-related disabilities, certification may be made by a nurse-midwife, nurse practitioner, or licensed midwife.

4. Mail your claim within 49 days from the first day you were disabled. If your claim is late, you may lose benefits unless your explanation of the delay is accepted as reasonable.

How Benefits Are Paid

• The SDI Program is designed to serve you by mail. You do not need to appear in person to apply for or receive benefits.

• When we receive your claim, we may contact you by mail or by telephone to request any further information needed. We process most claims within 14 days after we receive them.

• The first seven days of your disability are considered a “waiting period,” and you will not be paid SDI benefits for that period.
We pay benefits as quickly as possible after we receive all required information. If you meet all eligibility requirements, we will authorize a check to be mailed to you from a central payment center. If you are eligible for further benefits, we will either send you additional payments automatically or send a "continued claim" certification form for you to complete for the next period. Usually these periods will be two weeks. However, the SDI Program pays benefits based on daily eligibility within a seven-day calendar week. Partial weeks are paid at a daily rate. This rate is one-seventh of your weekly benefit amount. Please allow seven days from the date you mail a certification for receipt of your check.

How Your Benefit Rate is Determined

Your benefit amounts are based on wages paid to you during a specific 12-month base period, which is determined by the date your claim begins. Therefore, you should carefully consider when to start your claim since this may affect your weekly benefit rate, your maximum amount payable, and the period of your benefit eligibility.

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

If your claim begins in:

- **January, February, or March**, your base period is the 12 months ending last September 30. (Example: A claim beginning February 14, 2004, uses a base period of October 1, 2002, through September 30, 2003.)
- **April, May, or June**, your base period is the 12 months ending last December 31. (Example: A claim beginning June 20, 2004, uses a base period of January 1, 2003, through December 31, 2003.)
- **July, August, or September**, your base period is the 12 months ending March 31. (Example: A claim beginning September 27, 2004, uses a base period of April 1, 2003, through March 31, 2004.)
- **October, November, or December**, your base period is the 12 months ending June 30. (Example: A claim beginning November 2, 2004, uses a base period of July 1, 2003, through June 30, 2004.)

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

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

- were in the military service.
- received workers’ compensation benefits.
- did not work because of a labor dispute.

If your situation fits any of the above, include a note with your claim form.

**Wage Continuation.** If your employer continues to pay you wages while you are disabled, your SDI benefits may be affected. Benefits plus wages cannot exceed your regular weekly wage. Your SDI benefits will not be affected by any vacation pay you may receive.

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

In addition, benefits are payable only for a limited period to a resident in a state-approved Alcoholic Recovery Home or Drug-Free Residential Facility. However, disabilities related to or caused by acute or chronic alcoholism or drug abuse, being medically treated, do not have this limitation.

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

NOTE: For information on Paid Family Leave bonding benefits, see the “Other Programs” section of this brochure.
You May Not be Eligible for Benefits
• If you are receiving Unemployment Insurance or Paid Family Leave benefits.
• If you are not working or looking for work at the time you become disabled.
• If you are in custody due to conviction of a crime.
• If your full wages are paid.
• If you are receiving workers’ compensation at a weekly rate equal to or greater than the SDI rate. If these benefits for workers’ compensation are paid at a lower rate than your SDI rate, you may be paid the difference.
• For the amount of time a claim is late (without good cause).
• If you make a false statement or fail to report a material fact. (A 30 percent penalty may be assessed if benefits are overpaid because you willfully withheld a material fact or made a false statement.)
• If you fail to attend an independent medical examination when requested. (Fees for such examinations are paid by EDD.)

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

Your Rights. You are entitled to:
• Know the reason and basis for any decision that affects your benefits.
• Appeal any decision about your eligibility for benefits. (Appeals must be sent to the SDI office in writing.)
• A hearing of your appeal before an Administrative Law Judge (ALJ). You may further appeal the ALJ’s decision to the California Unemployment Insurance Appeals Board and the courts.
• Privacy. Information about your claim will be kept confidential except for the purposes allowed by law.

Your Obligations. You are responsible to:
• Complete your claim and other forms correctly, completely, and truthfully.
• Mail your claim and other forms in the time limits shown on the forms. If you are late and you believe you have a good reason for being late, you should include a written explanation of the reason(s) with the form.
• Contact SDI if you do not understand a question or how to answer it.
• Include your name and Social Security number on all letters to SDI.

Contact SDI
• By telephone at: 1-800-480-3287 (English) or 1-866-658-8846 (Spanish)
• By U.S. mail addressed to the office handling your claim. If you are not a current claimant, you may write to any SDI claim management office.
• By TTY (teletypewriter for deaf, hearing-impaired, and speech-impaired persons only) at: 1-800-563-2441
• By e-mail at: www.edd.ca.gov/mcaccs.htm
• In person at any of the offices listed on reverse.

Other Programs
IF YOU ARE INJURED ON THE JOB or ill as a result of your occupation, notify your employer.

IF YOU ARE ABLE AND AVAILABLE TO WORK but unemployed, contact the Unemployment Insurance Branch of EDD at 1-800-300-5616 (TTY 1-800-815-9387).

IF YOU NEED HELP IN FINDING WORK, JOB TRAINING, RETRAINING, or other services in order to return to work, visit your local one-stop career center listed in the white pages of your telephone directory and on the Internet at: www.servicelocator.org

IF YOUR DISABILITY IS PERMANENT or is expected to continue for a year or more, contact the U.S. Social Security Administration at 1-800-772-1213 or on the Internet at: www.ssa.gov
IF A FAMILY MEMBER HAS TO STOP WORK TO CARE FOR YOU, contact EDD’s Paid Family Leave program at 1-877-BE-THERE (1-877-238-4373).

IF YOU STOP WORK TO BOND WITH A NEW CHILD, including newly adopted or newly placed foster children or those of your domestic partner, contact EDD’s Paid Family Leave program at 1-877-BE-THERE (1-877-238-4373).

NOTE: A transition bonding claim form will be sent automatically with the final benefit check to new mothers receiving SDI benefits.

IF YOU ARE A VICTIM OF A CRIME, call the California Victims of Crime Program at 1-800-777-9229. TTY users may contact the Program via TTY-English at 1-800-735-2929 or TTY-Spanish at 1-800-855-3000. You may also contact your county Victim/Witness Assistance Center.

QUESTIONS ABOUT SPOUSAL OR PARENTAL SUPPORT obligations should be directed to the District Attorney’s Office for the county that issued the court order.

QUESTIONS ABOUT CHILD SUPPORT obligations should be directed to the Department of Child Support Services at 1-866-249-0773.

SDI Claim Management Offices

Alameda ........................................................................................................................................ 1600 Harbor Bay Parkway, Suite 120 (write to: PO Box 1857, Oakland, CA 94604-1857)
Chico .......................................................................................................................................................... 645 Salem Street (write to: PO Box 8190, Chico, CA 95927-8190)
City of Industry ................................................................................................................................. 17171 East Gale Ave., Suite 110 (write to: PO Box 60006, City of Industry, CA 91716-0006)
Eureka ......................................................................................................................................................... 409 K Street, Suite 201 (write to: PO Box 4986, Eureka, CA 95502-4986)
Fresno ...................................................................................................................................................... 2550 Mariposa Mall, Room 1080A (write to: PO Box 32, Fresno, CA 93707-0032)
Long Beach .................................................................................................................................................. 4300 Long Beach Blvd., Suite 600 (write to: PO Box 469, Long Beach, CA 90801-0469)
Los Angeles ............................................................................................................................................... 221 N. Figueroa Street, Suite 200 (write to: PO Box 513096, Los Angeles, CA 90051-1096)
Redding ...................................................................................................................................................... 1325 Pine Street (write to: PO Box 991898, Redding, CA 96099-1898)
San Bernardino ......................................................................................................................................... 371 West 3rd Street (write to: PO Box 781, San Bernardino, CA 92402-0781)
San Diego .................................................................................................................................................. 8977 Activity Rd., Bldg. B, Ste. 200 (write to: PO Box 120831, San Diego, CA 92112-0831)
San Francisco ........................................................................................................................................... 745 Franklin Street, 3rd Floor (write to: PO Box 193534, San Francisco, CA 94119-3534)
San Jose ................................................................................................................................................... 297 West Hedding Street (write to: PO Box 637, San Jose, CA 95106-0637)
Santa Ana .................................................................................................................................................. 28 Civic Center Plaza, 7th Floor (write to: PO Box 1466, Santa Ana, CA 92702-1466)
Santa Barbara ........................................................................................................................................... 128 East Ortega Street (write to: PO Box 1529, Santa Barbara, CA 93102-1529)
Santa Rosa ............................................................................................................................................... 606 Healdsburg Avenue (write to: PO Box 700, Santa Rosa, CA 95402-0700)
Stockton .................................................................................................................................................... 528 North Madison Street (write to: PO Box 201006, Stockton, CA 95201-9006)
Van Nuys ................................................................................................................................................... 15400 Sherman Way, Room 500 (write to: PO Box 10402, Van Nuys, CA 91410-0402)

SDI Customer Service Centers

Fresno Hybrid ......................................................................................................................................... PO Box 45010, Fresno, CA 93718-5011
Riverside .................................................................................................................................................. PO Box 59903, Riverside, CA 92517-1903
Sacramento ............................................................................................................................................... PO Box 13140, Sacramento, CA 95813-3140
FOR YOUR BENEFIT

CALIFORNIA’S
PROGRAMS FOR THE UNEMPLOYED

UNEMPLOYMENT INSURANCE
DISABILITY INSURANCE
PAID FAMILY LEAVE
JOB SERVICE
FOR YOUR BENEFIT
The purpose of this pamphlet is to inform you about programs offered by the Employment Development Department (EDD) for the benefit of unemployed Californians.

Unemployment Insurance.................................................................2
Unemployment Insurance provides income to workers who become unemployed and other work is not available.

State Disability...................................................................................15
State Disability Insurance pays benefits to eligible workers who are unable to work due to pregnancy or a non work-related injury or illness.

Paid Family Leave............................................................................17
Paid Family Leave pays benefits to eligible workers who are unable to work because they need to care for a seriously ill family member or bond with a new child.

Job Service ......................................................................................18
The EDD’s Job Service helps job seekers find suitable employment.
UNEMPLOYMENT INSURANCE
Unemployment Insurance (UI) is an insurance program that is paid for by your employer. It provides you with an income when you are out of work through no fault of your own.

WHO SHOULD FILE
You may be eligible to receive UI benefits if you are out of work or your hours are reduced and you are:

• Physically able to work.
• Actively seeking work.
• Ready to accept work.

WHEN TO FILE
You should apply for benefits as soon as you are unemployed or your hours are reduced. Your claim cannot begin until you file for benefits. Your claim will be effective on the Sunday prior to the date you file. All claims have a one-week, unpaid waiting period.

WHAT YOU NEED TO FILE
To determine if you are eligible to receive benefits, you will be asked a variety of questions, such as information about your past employers and the reason you are out of work. To ensure your claim is filed as quickly as possible, you should have the following information ready before you file your claim:

• Your name, address, telephone number, birth date, and social security number (SSN).
• Your last employer’s name, address, telephone number, and last date worked.
• The specific reason you are no longer working.
• Your citizenship status, and if applicable, your alien registration number.
• Driver's license number or state issued identification card number.
• Past work records and dates worked including the names and addresses of all of your employers for the last 18 months, and employers in other states.

NOTE: Your last employer's name and address are very important; regardless of how long you worked for this employer or whether this last job was in your usual line of work.

PENALTIES
If you willfully give false information or withhold information to claim benefits, EDD will assess a false statement disqualification. A false statement disqualification is a penalty that denies you benefits from 2
to 23 weeks. The penalty stays on your record for three years or until served, which ever comes first. To serve the penalty weeks, you must mail in your Continued Claim forms each week, and be otherwise eligible for benefits each week claimed.

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

**HOW TO FILE**

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

**ON-LINE**

File on-line with eApply4UI – the fast, easy way to file a UI claim! Available in English and Spanish, you can file a new claim, reactivate an existing claim, or file for extended benefits (when these benefits are available) using eApply4UI. It is secure, reliable, and available 24 hours a day. Access eApply4UI on the Web site at [https://eapply4ui.edd.ca.gov](https://eapply4ui.edd.ca.gov).

You may also learn more about services provided by the Department by accessing the EDD home page at [www.edd.ca.gov](http://www.edd.ca.gov) and submit questions electronically through “Contact Us” located at the bottom of the EDD home page.

**TELEPHONE**

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

**EDD Telephone Numbers:**

<table>
<thead>
<tr>
<th>Language</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>English</td>
<td>1-800-300-5616</td>
</tr>
<tr>
<td>Spanish</td>
<td>1-800-326-8937</td>
</tr>
<tr>
<td>Vietnamese</td>
<td>1-800-547-2058</td>
</tr>
<tr>
<td>Cantonese</td>
<td>1-800-547-3506</td>
</tr>
<tr>
<td>TTY (Non-voice)</td>
<td>1-800-815-9387</td>
</tr>
</tbody>
</table>

Customer service representatives at Call Centers handle UI claim filing, UI claim information calls, missed appointments, appeals, and overpayments, Monday through Friday, 8 a.m. to 5 p.m., Pacific Standard Time in California. Mondays and Tuesdays are the busiest days. For fastest service, you may wish to call Wednesday through Friday. However, to file a claim you must call by Friday of the week in which you become unemployed to receive credit for that week. The EDD is closed on state and federal holidays.

The Interactive Voice Response (IVR) System provides general information 24-hours a day and information about your check Monday through Saturday, 6 a.m. until midnight, and Sunday from 6 a.m. to 9 p.m., Pacific Standard Time. The UI check information includes the date...
your last check was issued, the amount paid, and period of time paid. To access your check information you will be asked to enter your SSN and Personal Identification Number (PIN), on your telephone keypad. You will need to establish your PIN the first time you use the IVR to access your check information. The EDD’s IVR System provides step-by-step instructions to guide you to services you want, in English and Spanish. **For faster access to check information, it is best to call outside of regular business hours.**

**Mail or Fax**
File by mailing or faxing a UI Application (DE 1101I), by accessing the paper application on-line at [www.edd.ca.gov](http://www.edd.ca.gov). Print out the application, hand write your answers, and mail or fax it to EDD for processing.

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

For more information about what steps you can take to protect your identity and prevent imposter fraud, download the *Protect Your Identity and Stop Unemployment Insurance Imposter Fraud* (DE 2360EE) brochure from EDD’s Web site at [www.edd.ca.gov/uirep/uipub.htm](http://www.edd.ca.gov/uirep/uipub.htm) or call the EDD’s forms request line at (916) 255-1743 to request a copy.

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

You will file:

- A regular California claim if you worked in California in a job covered by the Unemployment Insurance law even if you now reside outside California.
- A federal or military claim if your employment was in civilian work for the federal government or as a member of the Armed Forces (benefit costs are paid from federal funds).
- An interstate claim if earnings were in another state. If you worked in another state in the last 24 months, you may be eligible to file a claim. This includes the District of Columbia, Canada, Puerto Rico, and the Virgin Islands.
• A combined wage claim if you have earnings in more than one state in specified time periods. This type of claim could increase your UI benefits.

**BEGINNING DATE OF CLAIM**
The benefit year of your claim begins on the Sunday of the week in which you file and ends Saturday, 52 weeks after you filed. Weekly benefits may be claimed and paid until the balance runs out or until the claim ends, whichever comes first.

Normally, you cannot file another claim until the benefit year of the first claim ends, even though you have received all of your benefits and are still unemployed.

**HOW YOUR BENEFITS ARE DETERMINED**
Your weekly benefit, called the Weekly Benefit Amount and the total amount in your claim, called your Maximum Benefit Amount, are both based on the amount you earned in the Base Period of your claim. Your Base Period is a 12-month period of time. Each Base Period has four quarters of three months each. Your Base Period is the first four of the last five quarters from the time you file a new claim. For information on what your Base Period may be when you file your claim, refer to the chart below:

![Chart showing Base Periods](image)

**HOW MUCH UI PAYS**
For your claim to be valid, you must have at least $1,300 in earnings in one quarter of your base period or at least $900 in earnings in the highest quarter and total base period earnings of 1.25 times your high quarter earnings. You can receive a minimum of $40 to a maximum of $450 a week. The quarter in which you were paid the highest wages determines the Weekly Benefit Amount you will receive. The Maximum Benefit Amount is 26 times the Weekly Benefit Amount or one-half of the total Base Period wages, whichever is less. The following table will help you figure your award:
### Unemployment Insurance Benefit Table

For New Claims With a Beginning Date of January 2, 2005 or After

<table>
<thead>
<tr>
<th>Amount of Wages in Highest Quarter</th>
<th>Weekly Benefit Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>$ 900.00 – $ 948.99...... $ 40</td>
<td>$ 2,210.01 – $ 2,236.00...... $ 86</td>
</tr>
<tr>
<td>949.00 – 974.99......</td>
<td>2,236.01 – 2,262.00...... 87</td>
</tr>
<tr>
<td>975.00 – 1,000.99......</td>
<td>2,262.01 – 2,288.00...... 88</td>
</tr>
<tr>
<td>1,001.00 – 1,026.99......</td>
<td>2,288.01 – 2,314.00...... 89</td>
</tr>
<tr>
<td>1,027.00 – 1,052.99......</td>
<td>2,314.01 – 2,340.00...... 90</td>
</tr>
<tr>
<td>1,053.00 – 1,078.99......</td>
<td>2,340.01 – 2,366.00...... 91</td>
</tr>
<tr>
<td>1,079.00 – 1,117.99......</td>
<td>2,366.01 – 2,392.00...... 92</td>
</tr>
<tr>
<td>1,118.00 – 1,143.99......</td>
<td>2,392.01 – 2,418.00...... 93</td>
</tr>
<tr>
<td>1,144.00 – 1,169.99......</td>
<td>2,418.01 – 2,444.00...... 94</td>
</tr>
<tr>
<td>1,170.00 – 1,195.99......</td>
<td>2,444.01 – 2,470.00...... 95</td>
</tr>
<tr>
<td>1,196.00 – 1,221.99......</td>
<td>2,470.01 – 2,496.00...... 96</td>
</tr>
<tr>
<td>1,222.00 – 1,247.99......</td>
<td>2,496.01 – 2,522.00...... 97</td>
</tr>
<tr>
<td>1,248.00 – 1,286.99......</td>
<td>2,522.01 – 2,548.00...... 98</td>
</tr>
<tr>
<td>1,287.00 – 1,312.99......</td>
<td>2,548.01 – 2,574.00...... 99</td>
</tr>
<tr>
<td>1,313.00 – 1,338.99......</td>
<td>2,574.01 – 2,600.00......100</td>
</tr>
<tr>
<td>1,339.00 – 1,364.99......</td>
<td>2,600.01 – 2,626.00......101</td>
</tr>
<tr>
<td>1,365.00 – 1,403.99......</td>
<td>2,626.01 – 2,652.00......102</td>
</tr>
<tr>
<td>1,404.00 – 1,429.99......</td>
<td>2,652.01 – 2,678.00......103</td>
</tr>
<tr>
<td>1,430.00 – 1,455.99......</td>
<td>2,678.01 – 2,704.00......104</td>
</tr>
<tr>
<td>1,456.00 – 1,494.99......</td>
<td>2,704.01 – 2,730.00......105</td>
</tr>
<tr>
<td>1,495.00 – 1,520.99......</td>
<td>2,730.01 – 2,756.00......106</td>
</tr>
<tr>
<td>1,521.00 – 1,546.99......</td>
<td>2,756.01 – 2,782.00......107</td>
</tr>
<tr>
<td>1,547.00 – 1,585.99......</td>
<td>2,782.01 – 2,808.00......108</td>
</tr>
<tr>
<td>1,586.00 – 1,611.99......</td>
<td>2,808.01 – 2,834.00......109</td>
</tr>
<tr>
<td>1,612.00 – 1,637.99......</td>
<td>2,834.01 – 2,860.00......110</td>
</tr>
<tr>
<td>1,638.00 – 1,676.99......</td>
<td>2,860.01 – 2,886.00......111</td>
</tr>
<tr>
<td>1,677.00 – 1,702.99......</td>
<td>2,886.01 – 2,912.00......112</td>
</tr>
<tr>
<td>1,703.00 – 1,741.99......</td>
<td>2,912.01 – 2,938.00......113</td>
</tr>
<tr>
<td>1,742.00 – 1,767.99......</td>
<td>2,938.01 – 2,964.00......114</td>
</tr>
<tr>
<td>1,768.00 – 1,806.99......</td>
<td>2,964.01 – 2,990.00......115</td>
</tr>
<tr>
<td>1,807.00 – 1,832.99......</td>
<td>2,990.01 – 3,016.00......116</td>
</tr>
<tr>
<td>1,833.00 – 1,846.00......</td>
<td>3,016.01 – 3,042.00......117</td>
</tr>
<tr>
<td>1,846.01 – 1,872.00......</td>
<td>3,042.01 – 3,068.00......118</td>
</tr>
<tr>
<td>1,872.01 – 1,898.00......</td>
<td>3,068.01 – 3,094.00......119</td>
</tr>
<tr>
<td>1,898.01 – 1,924.00......</td>
<td>3,094.01 – 3,120.00......120</td>
</tr>
<tr>
<td>1,924.01 – 1,950.00......</td>
<td>3,120.01 – 3,146.00......121</td>
</tr>
<tr>
<td>1,950.01 – 1,976.00......</td>
<td>3,146.01 – 3,172.00......122</td>
</tr>
<tr>
<td>1,976.01 – 2,002.00......</td>
<td>3,172.01 – 3,198.00......123</td>
</tr>
<tr>
<td>2,002.01 – 2,028.00......</td>
<td>3,198.01 – 3,224.00......124</td>
</tr>
<tr>
<td>2,028.01 – 2,054.00......</td>
<td>3,224.01 – 3,250.00......125</td>
</tr>
<tr>
<td>2,054.01 – 2,080.00......</td>
<td>3,250.01 – 3,276.00......126</td>
</tr>
<tr>
<td>2,080.01 – 2,106.00......</td>
<td>3,276.01 – 3,302.00......127</td>
</tr>
<tr>
<td>2,106.01 – 2,132.00......</td>
<td>3,302.01 – 3,328.00......128</td>
</tr>
<tr>
<td>2,132.01 – 2,158.00......</td>
<td>3,328.01 – 3,354.00......129</td>
</tr>
<tr>
<td>2,158.01 – 2,184.00......</td>
<td>3,354.01 – 3,380.00......130</td>
</tr>
<tr>
<td>2,184.01 – 2,210.00......</td>
<td>3,380.01 – 3,406.00......131</td>
</tr>
</tbody>
</table>

Weekly Benefit Amount: $3,406.01 – $3,432.00...... $132

*DE 2320 Rev. 54 (11-06) (INTERNET)*
<table>
<thead>
<tr>
<th>Weekly Benefit Amount</th>
<th>Amount of Wages in Highest Quarter</th>
</tr>
</thead>
<tbody>
<tr>
<td>$4,602.01 – 4,628.00</td>
<td>$5,798.01 – 5,824.00</td>
</tr>
<tr>
<td>4,628.01 – 4,654.00</td>
<td>5,824.01 – 5,850.00</td>
</tr>
<tr>
<td>4,654.01 – 4,680.00</td>
<td>5,850.01 – 5,876.00</td>
</tr>
<tr>
<td>4,680.01 – 4,706.00</td>
<td>5,876.01 – 5,902.00</td>
</tr>
<tr>
<td>4,706.01 – 4,732.00</td>
<td>5,902.01 – 5,928.00</td>
</tr>
<tr>
<td>4,732.01 – 4,758.00</td>
<td>5,928.01 – 5,954.00</td>
</tr>
<tr>
<td>4,758.01 – 4,784.00</td>
<td>5,954.01 – 5,980.00</td>
</tr>
<tr>
<td>4,784.01 – 4,810.00</td>
<td>5,980.01 – 6,006.00</td>
</tr>
<tr>
<td>4,810.01 – 4,836.00</td>
<td>6,006.01 – 6,032.00</td>
</tr>
<tr>
<td>4,836.01 – 4,862.00</td>
<td>6,032.01 – 6,058.00</td>
</tr>
<tr>
<td>4,862.01 – 4,888.00</td>
<td>6,058.01 – 6,084.00</td>
</tr>
<tr>
<td>4,888.01 – 4,914.00</td>
<td>6,084.01 – 6,110.00</td>
</tr>
<tr>
<td>4,914.01 – 4,940.00</td>
<td>6,110.01 – 6,136.00</td>
</tr>
<tr>
<td>4,940.01 – 4,966.00</td>
<td>6,136.01 – 6,162.00</td>
</tr>
<tr>
<td>4,966.01 – 4,992.00</td>
<td>6,162.01 – 6,188.00</td>
</tr>
<tr>
<td>4,992.01 – 5,018.00</td>
<td>6,188.01 – 6,214.00</td>
</tr>
<tr>
<td>5,018.01 – 5,044.00</td>
<td>6,214.01 – 6,240.00</td>
</tr>
<tr>
<td>5,044.01 – 5,070.00</td>
<td>6,240.01 – 6,266.00</td>
</tr>
<tr>
<td>5,070.01 – 5,096.00</td>
<td>6,266.01 – 6,292.00</td>
</tr>
<tr>
<td>5,096.01 – 5,122.00</td>
<td>6,292.01 – 6,318.00</td>
</tr>
<tr>
<td>5,122.01 – 5,148.00</td>
<td>6,318.01 – 6,344.00</td>
</tr>
<tr>
<td>5,148.01 – 5,174.00</td>
<td>6,344.01 – 6,370.00</td>
</tr>
<tr>
<td>5,174.01 – 5,200.00</td>
<td>6,370.01 – 6,396.00</td>
</tr>
<tr>
<td>5,200.01 – 5,226.00</td>
<td>6,396.01 – 6,422.00</td>
</tr>
<tr>
<td>5,226.01 – 5,252.00</td>
<td>6,422.01 – 6,448.00</td>
</tr>
<tr>
<td>5,252.01 – 5,278.00</td>
<td>6,448.01 – 6,474.00</td>
</tr>
<tr>
<td>5,278.01 – 5,304.00</td>
<td>6,474.01 – 6,500.00</td>
</tr>
<tr>
<td>5,304.01 – 5,330.00</td>
<td>6,500.01 – 6,526.00</td>
</tr>
<tr>
<td>5,330.01 – 5,356.00</td>
<td>6,526.01 – 6,552.00</td>
</tr>
<tr>
<td>5,356.01 – 5,382.00</td>
<td>6,552.01 – 6,578.00</td>
</tr>
<tr>
<td>5,382.01 – 5,408.00</td>
<td>6,578.01 – 6,604.00</td>
</tr>
<tr>
<td>5,408.01 – 5,434.00</td>
<td>6,604.01 – 6,630.00</td>
</tr>
<tr>
<td>5,434.01 – 5,460.00</td>
<td>6,630.01 – 6,656.00</td>
</tr>
<tr>
<td>5,460.01 – 5,486.00</td>
<td>6,656.01 – 6,682.00</td>
</tr>
<tr>
<td>5,486.01 – 5,512.00</td>
<td>6,682.01 – 6,708.00</td>
</tr>
<tr>
<td>5,512.01 – 5,538.00</td>
<td>6,708.01 – 6,734.00</td>
</tr>
<tr>
<td>5,538.01 – 5,564.00</td>
<td>6,734.01 – 6,760.00</td>
</tr>
<tr>
<td>5,564.01 – 5,590.00</td>
<td>6,760.01 – 6,786.00</td>
</tr>
<tr>
<td>5,590.01 – 5,616.00</td>
<td>6,786.01 – 6,812.00</td>
</tr>
<tr>
<td>5,616.01 – 5,642.00</td>
<td>6,812.01 – 6,838.00</td>
</tr>
<tr>
<td>5,642.01 – 5,668.00</td>
<td>6,838.01 – 6,864.00</td>
</tr>
<tr>
<td>5,668.01 – 5,694.00</td>
<td>6,864.01 – 6,890.00</td>
</tr>
<tr>
<td>5,694.01 – 5,720.00</td>
<td>6,890.01 – 6,916.00</td>
</tr>
<tr>
<td>5,720.01 – 5,746.00</td>
<td>6,916.01 – 6,942.00</td>
</tr>
<tr>
<td>5,746.01 – 5,772.00</td>
<td>6,942.01 – 6,968.00</td>
</tr>
<tr>
<td>5,772.01 – 5,798.00</td>
<td>6,968.01 – 6,994.00</td>
</tr>
</tbody>
</table>

For New Claims With a Beginning Date of January 2, 2005 or After

Unemployment Insurance Benefit Table
### Unemployment Insurance Benefit Table

**For New Claims With a Beginning Date of January 2, 2005 or After**

<table>
<thead>
<tr>
<th>Weekly Benefit Amount</th>
<th>Amount of Wages in Highest Quarter</th>
</tr>
</thead>
<tbody>
<tr>
<td>8,190.01 – 8,216.00</td>
<td>$9,386.01 – 9,412.00</td>
</tr>
<tr>
<td>8,216.01 – 8,242.00</td>
<td>... 317 9,412.01 – 9,438.00</td>
</tr>
<tr>
<td>8,242.01 – 8,268.00</td>
<td>... 318 9,438.01 – 9,464.00</td>
</tr>
<tr>
<td>8,268.01 – 8,294.00</td>
<td>... 319 9,464.01 – 9,490.00</td>
</tr>
<tr>
<td>8,294.01 – 8,320.00</td>
<td>... 320 9,490.01 – 9,516.00</td>
</tr>
<tr>
<td>8,320.01 – 8,346.00</td>
<td>... 321 9,516.01 – 9,542.00</td>
</tr>
<tr>
<td>8,346.01 – 8,372.00</td>
<td>... 322 9,542.01 – 9,568.00</td>
</tr>
<tr>
<td>8,372.01 – 8,398.00</td>
<td>... 323 9,568.01 – 9,594.00</td>
</tr>
<tr>
<td>8,398.01 – 8,424.00</td>
<td>... 324 9,594.01 – 9,620.00</td>
</tr>
<tr>
<td>8,424.01 – 8,450.00</td>
<td>... 325 9,620.01 – 9,646.00</td>
</tr>
<tr>
<td>8,450.01 – 8,476.00</td>
<td>... 326 9,646.01 – 9,672.00</td>
</tr>
<tr>
<td>8,476.01 – 8,502.00</td>
<td>... 327 9,672.01 – 9,698.00</td>
</tr>
<tr>
<td>8,502.01 – 8,528.00</td>
<td>... 328 9,698.01 – 9,724.00</td>
</tr>
<tr>
<td>8,528.01 – 8,554.00</td>
<td>... 329 9,724.01 – 9,750.00</td>
</tr>
<tr>
<td>8,554.01 – 8,580.00</td>
<td>... 330 9,750.01 – 9,776.00</td>
</tr>
<tr>
<td>8,580.01 – 8,606.00</td>
<td>... 331 9,776.01 – 9,802.00</td>
</tr>
<tr>
<td>8,606.01 – 8,632.00</td>
<td>... 332 9,802.01 – 9,828.00</td>
</tr>
<tr>
<td>8,632.01 – 8,658.00</td>
<td>... 333 9,828.01 – 9,854.00</td>
</tr>
<tr>
<td>8,658.01 – 8,684.00</td>
<td>... 334 9,854.01 – 9,880.00</td>
</tr>
<tr>
<td>8,684.01 – 8,710.00</td>
<td>... 335 9,880.01 – 9,906.00</td>
</tr>
<tr>
<td>8,710.01 – 8,736.00</td>
<td>... 336 9,906.01 – 9,932.00</td>
</tr>
<tr>
<td>8,736.01 – 8,762.00</td>
<td>... 337 9,932.01 – 9,958.00</td>
</tr>
<tr>
<td>8,762.01 – 8,788.00</td>
<td>... 338 9,958.01 – 9,984.00</td>
</tr>
<tr>
<td>8,788.01 – 8,814.00</td>
<td>... 339 9,984.01 – 10,010.00</td>
</tr>
<tr>
<td>8,814.01 – 8,840.00</td>
<td>... 340 10,010.01 – 10,036.00</td>
</tr>
<tr>
<td>8,840.01 – 8,866.00</td>
<td>... 341 10,036.01 – 10,062.00</td>
</tr>
<tr>
<td>8,866.01 – 8,892.00</td>
<td>... 342 10,062.01 – 10,088.00</td>
</tr>
<tr>
<td>8,892.01 – 8,918.00</td>
<td>... 343 10,088.01 – 10,114.00</td>
</tr>
<tr>
<td>8,918.01 – 8,944.00</td>
<td>... 344 10,114.01 – 10,140.00</td>
</tr>
<tr>
<td>8,944.01 – 8,970.00</td>
<td>... 345 10,140.01 – 10,166.00</td>
</tr>
<tr>
<td>8,970.01 – 8,996.00</td>
<td>... 346 10,166.01 – 10,192.00</td>
</tr>
<tr>
<td>8,996.01 – 9,022.00</td>
<td>... 347 10,192.01 – 10,218.00</td>
</tr>
<tr>
<td>9,022.01 – 9,048.00</td>
<td>... 348 10,218.01 – 10,244.00</td>
</tr>
<tr>
<td>9,048.01 – 9,074.00</td>
<td>... 349 10,244.01 – 10,270.00</td>
</tr>
<tr>
<td>9,074.01 – 9,100.00</td>
<td>... 350 10,270.01 – 10,296.00</td>
</tr>
<tr>
<td>9,100.01 – 9,126.00</td>
<td>... 351 10,296.01 – 10,322.00</td>
</tr>
<tr>
<td>9,126.01 – 9,152.00</td>
<td>... 352 10,322.01 – 10,348.00</td>
</tr>
<tr>
<td>9,152.01 – 9,178.00</td>
<td>... 353 10,348.01 – 10,374.00</td>
</tr>
<tr>
<td>9,178.01 – 9,204.00</td>
<td>... 354 10,374.01 – 10,400.00</td>
</tr>
<tr>
<td>9,204.01 – 9,230.00</td>
<td>... 355 10,400.01 – 10,426.00</td>
</tr>
<tr>
<td>9,230.01 – 9,256.00</td>
<td>... 356 10,426.01 – 10,452.00</td>
</tr>
<tr>
<td>9,256.01 – 9,282.00</td>
<td>... 357 10,452.01 – 10,478.00</td>
</tr>
<tr>
<td>9,282.01 – 9,308.00</td>
<td>... 358 10,478.01 – 10,504.00</td>
</tr>
<tr>
<td>9,308.01 – 9,334.00</td>
<td>... 359 10,504.01 – 10,530.00</td>
</tr>
<tr>
<td>9,334.01 – 9,360.00</td>
<td>... 360 10,530.01 – 10,556.00</td>
</tr>
<tr>
<td>9,360.01 – 9,386.00</td>
<td>... 361 10,556.01 – 10,582.00</td>
</tr>
</tbody>
</table>
WAITING PERIOD
The first week after you file your claim is normally the waiting period and benefits cannot be paid for that week.

Do not wait to file because the waiting period is not paid. The waiting period cannot begin until the claim is filed.

PAYMENTS
- You must meet eligibility requirements.
- You must submit weekly claim forms showing you meet the eligibility requirements.
- Payments are issued after the week (or weeks) has ended and your completed claim form is received.
- No payments are made in advance.
- The first payment on a new California claim will usually be issued within three weeks after filing.
- For interstate claims, first payment will be issued about two to three weeks after the other state receives your claim.
- You will normally be paid by mail every two weeks.

REPORTING EARNINGS
Report all income you receive, whether you worked in that week or not.

Some types of income to report are:

- Piece work
- Idle time pay
- Jury fees
- Commissions
- Witness fees
- Reuse pay
- Holiday pay
- Residuals (ask for form DE 4005)
- Paid sick leave
- Pension, retirement, annuity

- Vacation pay
- In-lieu-of-notice pay
- Bonuses
- Tips
- Self-employment income
- Strike benefits
- Stand by pay
- Bereavement pay
- Back pay award
- Workers’ Compensation

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

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

Your weekly benefit amount is $50. You earn $30. You must report the $30, however, the first $25 is not counted, leaving $5 to deduct. You receive $45 ($50 minus $5).
Your weekly benefit amount is $115. You work less than full-time and earn $124. You must report the $124; however, the first $31 (25 percent of $124) is not counted, leaving $93 to deduct. You receive $22 ($115 minus $93).

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

**Eligibility**
When you file a UI claim, EDD will ask you a number of questions to determine your eligibility to receive benefits. The weekly claim forms also contain eligibility questions. When it appears that you may not meet the eligibility requirements of the law, a special interview is scheduled.

**Verification of Social Security Account Number**
The EDD may require you to verify your social security account number (SSN) as being the one issued to you by the Social Security Administration (SSA).

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

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

Some of the most common errors associated with SSNs are:

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

If the EDD requires you to verify your SSN, you must submit verification from the SSA that the SSN you used to file your claim is assigned to you, or you may submit to EDD a copy of your annual statement issued to you by the SSA. A copy of your Social Security Card **will not** satisfy this requirement.

The location of your nearest SSA office can be found on the SSA Web site at [http://www.ssa.gov/reach.htm](http://www.ssa.gov/reach.htm), or in your local telephone book in the Federal Government listings under “Social Security Administration.”
FACT FINDING
Your last employer is notified when you file a claim. Also, any employer who contributed to your unemployment claim is notified when you receive your first check. An employer is required by law to furnish EDD any information affecting your right to receive benefits.

TELEPHONE INTERVIEWS
The EDD will contact you when there is a question of eligibility on your claim if you:
• Quit your last job.
• Were fired from your last job.
• Did not have child care.
• Are unable to work during normal working hours.
• Are attending school during normal working hours.
• Did not have transportation.
• Did not look for work.
• Worked and/or earned wages that may reduce your benefits.
• Are receiving a pension.
• Are receiving workers’ compensation.
• Are out of work due to a lockout or a strike.
• Mailed in a claim form late.
• Filed a claim late.
• Refused a job.
• Gave incorrect information or withheld information.
• Failed to participate in re-employment services.
• Are a school employee filing a claim during a recess period.
• Are a professional athlete filing a claim during the off season.

If we schedule a telephone interview, we will call you at the scheduled interview date and time. You have the right to request more time if you need to get more information, contact witnesses, or obtain the advice of a representative. If the interview involves an employer, we may contact the employer for additional information.

The interviewer will ask you questions. We record this information and use it to make a decision. If you are eligible, we mail your check for the week in question. If we deny your benefits we will mail you a notice. The notice advises you of the reason for our decision and gives you appeal rights.
IMPORTANT: If EDD schedules a telephone interview, you must mail in your weekly claim form. We cannot pay benefits until we receive your claim form.

APPEALS
You or the employer have 20 calendar days to appeal after a written notice is issued to you. Your appeal must be in writing and should state the reasons for your appeal. If you miss the 20-day deadline, you may still appeal but you must show good cause for the delay.

Before the hearing, you have the right to review all records affecting the appeal. For your appeal, you may represent yourself or you may be represented by someone else such as a union official, an attorney, or anyone else you select.

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

If you are not satisfied with the administrative law judge’s decision, you may appeal to the California Unemployment Insurance Appeals Board. Your rights to further appeal will be explained in the written decision that will be mailed to you.

CANCELLING A CLAIM
You have the option of cancelling a regular California UI claim up to and including 30 days after the mailing or issuance date of your UNEMPLOYMENT INSURANCE AWARD notice, if no benefits have been cashed, or no disqualification has been issued in writing. If a claim is cancelled, that claim cannot be reopened, but you can file a new claim with a later date. If the original claim is not cancelled, another California claim cannot be filed for 52 weeks.

REQUESTING COPIES OF YOUR UNEMPLOYMENT INSURANCE DOCUMENTS
If, for personal business reasons, you need copies of UI claim documents, contact EDD.

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

- Minor children employed by their parents.
- Parents employed by their children.
- Husbands and wives employed by each other.
- Certain state-licensed salespersons paid only commissions.
- Caddies and jockeys.
• Persons enrolled and regularly attending classes at the school or educational institution where employed.

• A student’s spouse who is working for an educational institution in an employment program provided for the purpose of financially aiding the student.

• Elected Officials.

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

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

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

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

**EXTENDED BENEFITS**
Extended benefits only become available when the insured unemployment rate equals or exceeds a certain percentage established by state and/or federal law. When the insured unemployment rate falls below that established percentage, payment of extended benefits must be terminated.

To be eligible for extended benefits you must have received all the benefits payable on your last regular claim and the benefit year must not have ended on that claim before the beginning of an extended benefit period. In addition, you must meet a special earnings test based on the weekly benefit amount of your regular claim. You cannot establish an extended benefit claim if you can file another valid claim under any state or federal law.

**TAXATION OF BENEFITS**
The Federal Tax Reform Act of 1986 provides for federal taxation of all Unemployment Insurance benefits received after December 31, 1986. You may request that federal income taxes be withheld from your UI...
benefit check. You will be given the option on each claim form. Your choice remains in effect only until you send in your next claim form. The option is strictly voluntary; you are not required to have taxes withheld from your benefits. The EDD will provide an annual statement, DE 1099, to each individual that shows total benefits paid and total federal taxes withheld during the year. Individuals who may owe income tax must pay any amounts due upon filing their tax returns. If you have any questions regarding your tax liability, contact the Internal Revenue Service.

SPECIAL PROGRAMS

• **California Training Benefits (CTB):** This program allows eligible UI recipients to retrain for new occupations while receiving their benefits. Individuals approved for CTB training do not have to: look for work, be available for work, or accept suitable work.

• **Training Extension Claims:** An extension of CTB training benefits may be available beyond your regular UI claim while you are in approved training. To be eligible for extended training benefits, you must ask for information about CTB or apply for CTB training approval with EDD no later than the 16th week of UI benefits paid. If your UI claim award is 16 weeks or less, you must ask for information or apply before you receive the last UI benefit check. To file an extended training benefits claim, call EDD or file on-line by visiting EDD’s Web site at [www.edd.ca.gov](http://www.edd.ca.gov).

You may select a training program on your own, if approved by EDD, or attend Workforce Investment Act (WIA), Employment Training Panel (ETP), CalWORKS or Trade Adjustment Assistance funded training and continue to receive weekly UI benefits.

To find out more about training available in your local area, as well as the name and address of the One-Stop Career Center nearest you, call the America’s Workforce Network Toll-Free Help Line at 1-877-US-2JOBS (1-877-872-5627) or visit the EDD Web site at [www.edd.ca.gov](http://www.edd.ca.gov).

• **Workforce Investment Act Programs (WIA):** If you are out of work and need job training, or if you need to brush up on existing skills, WIA programs may be able to help you. California’s WIA services are provided through the One-Stop Career Centers, under the policy guidance of the Local Workforce Investment Boards. The WIA offers education and job skills training programs for economically disadvantaged adults and youth. Special training and skills upgrade programs are available for workers who are out of work because of plant closures or work force reductions, and summer programs for youth to help them stay in school.
• **Employment Training Panel (ETP):** If you are claiming UI Benefits, or have exhausted such benefits and are unemployed, or you are likely to lose your job because your employer plans to reduce operations, you may be eligible for ETP approved training. View the ETP Web site at [www.etp.ca.gov](http://www.etp.ca.gov) for a list of currently-funded training opportunities.

• **Disaster Unemployment Assistance (DUA):** These benefits are available to individuals whose work or self-employment is interrupted by a disaster. Claims may be filed following an EDD announcement that Disaster Benefits are available.

• **Trade Adjustment Assistance (TAA):** A federal program for workers who have lost their jobs or had their hours and wages reduced by import competition or a shift in production to a foreign country, and are certified TAA eligible by the Secretary of Labor. Benefits include training/retraining, extended UI benefits, transportation and/or subsistence while in approved training, job search and relocation allowances, and extensive reemployment services.

• **Trade Readjustment Allowances (TRA):** An extension of federal benefits up to 78 weeks is available for workers enrolled in TAA approved training programs. To be eligible, the worker must have been identified as trade-affected by the employer, and covered under a TAA petition certified by the U.S. Department of Labor.

• **Work Sharing Benefits:** You may be eligible for Work Sharing benefits if your employer has a Work Sharing plan that has been approved by EDD. To participate in Work Sharing, your employer must reduce your weekly hours and wages by a minimum of 10 percent. You receive the percentage of your weekly benefit amount proportionate to the hour and wage reductions.

• **Railroad Unemployment Benefits:** Railroad workers may claim benefits under the Railroad Retirement Act. Go to the nearest office of any railroad, regardless of which one employed you, and ask for the Unemployment Claims Agent.

**STATE DISABILITY INSURANCE**

State Disability Insurance (SDI) may be available to you if you are unable to work as a result of pregnancy, or a non-work related injury or illness. You may also be eligible for a reduced SDI benefit amount in conjunction with Workers’ Compensation payments.

In addition, benefits may be paid for a limited period if you are a resident in a state-approved Alcoholic Recovery Home or Drug-Free Residential Facility.
The first seven days of your claim is a waiting period for which no benefits are payable. Benefits begin with the eighth day of disability. You cannot receive SDI and Unemployment Insurance (UI) or Paid Family Leave (PFL) benefits for the same period. SDI is payable for a maximum of 52 weeks.

**Are You Covered by State Disability Insurance?**

Most workers covered by California Unemployment Insurance are also covered by State Disability Insurance (SDI). The program is financed entirely by covered workers through a payroll tax withheld from their earnings. The contribution is based on a percentage of a worker's earnings. The contribution rate may vary from year to year depending on the balance in the Disability Fund. Specific information about the contribution rate is available from any EDD office.

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

**Filing Your State Disability Insurance Claim**

- Obtain a claim form from any public EDD office. You may call the SDI toll-free number and request a form be mailed to you. Your medical provider, hospital, or employer may have a claim form, or you may obtain a form through EDD's Web site at [www.edd.ca.gov](http://www.edd.ca.gov).

- The Claim for State Disability Insurance (SDI) Benefits provides you with instructions for completing the claim form. It is very important to include your social security number and sign and date the claim form. Please print your information clearly and review it for completeness and accuracy. If you need help in completing the form, call the SDI toll-free number for assistance.

- Give the claim form to your medical provider to complete the “Doctor's Certificate.”

- Your claim must be mailed within 49 days from the first day you become disabled to be timely. If your claim is submitted later than 49 days, you may lose benefits for the number of days that the claim is late unless you can establish “good cause” for late filing. To establish good cause, attach a detailed explanation to your claim form telling SDI why it is late.

**Have You Had Excess State Disability Insurance Tax Withheld?**

If you worked for more than one employer and earned more than $68,829 in 2004 or more than $79,418 in 2005 or 2006, you may be eligible for a refund or credit of excess payroll deductions. For information about
claiming a refund or credit, please review the Instruction Booklet for the State of California, Personal Income Tax Return, Form 540.

**IF YOU NEED MORE INFORMATION**
Visit the EDD Web site at [www.edd.ca.gov](http://www.edd.ca.gov). For the SDI pages, select “Disability Insurance.” Or you may call one of the following numbers.

**EDD STATE DISABILITY INSURANCE TOLL-FREE NUMBERS**
- English: 1-800-480-3287
- Spanish: 1-866-658-8846
- TTY (Non voice): 1-800-563-2441

**PAID FAMILY LEAVE**
Paid Family Leave (PFL) benefits may be available to you if you are unable to work because you need to care for a seriously ill family member or bond with a new child. You cannot receive PFL and State Disability Insurance (SDI) or Unemployment Insurance (UI) benefits for the same period. PFL benefits are payable for a maximum of six weeks in a 12-month period.


**ARE YOU COVERED BY PAID FAMILY LEAVE?**
PFL is a component of the SDI program. Workers covered by SDI will also be covered for PFL. Workers who are covered by a Voluntary Plan for SDI will be covered for PFL through their Voluntary Plan.

**HOW DO YOU FILE A PAID FAMILY LEAVE CLAIM?**
Obtain a claim form from any public EDD office. You may call the PFL toll-free number and request a form be mailed to you. Medical providers, hospitals, or employers may have a claim form, or you may obtain a form through EDD’s Internet Web site at [www.edd.ca.gov](http://www.edd.ca.gov).

The Claim for Paid Family Leave (PFL) Benefits provides you with instructions for completing the claim form. Follow the instructions carefully for your type of claim (i.e., caring for a seriously ill family member or bonding with a new child). It is very important to provide your Social Security Number and sign and date the claim form. Please print your information clearly and review it for completeness and accuracy. If you need help in completing the form, call the PFL toll-free number for assistance.

Mail your claim form within 49 days from the first day of your period of family leave. If you submit your claim later than 49 days, you may lose benefits for the number of days that the claim is late unless you can establish “good cause” for late filing. To establish good cause, attach a detailed explanation to your claim form telling PFL why it is late.
**If You Need More Information**

Visit the EDD Web site at www.edd.ca.gov and select “Paid Family Leave.” Or you may call one of the following numbers.

**EDD Paid Family Leave Toll-Free Numbers**

<table>
<thead>
<tr>
<th>Language</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>English</td>
<td>1-877-238-4373</td>
</tr>
<tr>
<td>Spanish</td>
<td>1-877-379-3819</td>
</tr>
<tr>
<td>Cantonese</td>
<td>1-866-692-5595</td>
</tr>
<tr>
<td>Vietnamese</td>
<td>1-866-692-5596</td>
</tr>
</tbody>
</table>

When calling via the California Relay Service (711), please provide the Paid Family Leave Insurance number (1-877-238-4373) to the operator.

**Job Service**

The EDD’s Job Service is a partner in the One-Stop Career system, which integrates employment and training programs and provides flexible solutions at more than 200 service locations throughout California. There is never a fee for services to job seekers or employers. Job services include:

**Job Listings**

Using CalJOBS℠, EDD’s on-line job and résumé bank, job seekers can access thousands of job listings 24 hours a day, 7 days a week. Job seekers can create a résumé on-line and if qualified, refer themselves to employers for consideration. CalJOBS℠ is simple to use and can be used at the office, at home, or from any location with Internet access.

**Job Search Assistance**

The EDD, in partnership with your local One-Stop Career Center, offers a variety of workshops on such topics as job search training, résumé writing, and interview techniques. In addition, EDD can refer you to resources within the community including training, education, and other supportive services.

**Special Programs and Services**

For job seekers who require more than the self-service job search, EDD’s Job Service has several no-fee employment assistance programs to help overcome barriers to finding a suitable job:

**Deaf and Hard of Hearing Program**

Individuals who are deaf or hard of hearing can receive interpretive, job placement, and follow-up services to find a job or receive EDD services. Contact EDD by using the TTY toll-free numbers, which will put you in direct contact with a representative.
Experience Unlimited Program

Professionals from a wide variety of fields can take advantage of EDD-sponsored job clubs. Provided at no fee, Experience Unlimited provides a place where job seekers can meet regularly with other career professionals to share job leads, provide support, and update their job search skills. Resources available to members include workshops, résumé evaluations, mock interview, networking opportunities, and more.

Intensive Services Program

Provides personalized job search services to individuals who need special assistance with finding a job, including clients referred by other agencies, public assistance recipients (CalWORKS, General Assistance, or Food Stamps), people with disabilities, dislocated workers, non-English speaking persons, high school drop-outs, older workers, migrant and seasonal farm workers, foster youths, ex-offenders, and persons who are economically disadvantaged. Fidelity bonding is available at no cost.

Jobs for All Program

Provides coordinated, one-on-one employment-related services, and job retention assistance to individuals who have disabilities. Services include job search assistance, job development, referral to education and training opportunities, referral to supportive services, accommodations, and follow-up services.

Migrant and Seasonal Farmworkers and Food Processing Workers

Provides assistance to farmworkers and food processing workers who may be unfamiliar with the automated job listings systems, or who have language barriers that might lessen the effectiveness of their job search.

Veterans Services Program

All EDD Job Service offices have specially-trained staff to ensure veterans of the U.S. Armed Forces receive maximum employment and training opportunities. Services include counseling, labor market information, job referrals, job search workshops, and job development with potential employers.
Youth Employment Opportunity Program
Provides special services to youth, ages 15 to 21, to assist them in achieving their educational and vocational goals. Services include peer advising, referrals to supportive services, workshops, job referrals and placement assistance, and referrals to training and community outreach efforts.

WHERE TO GET HELP
Job service programs and services are available in Job Service offices or One-Stop Career Centers throughout the State. For more information, visit the EDD Web site at www.edd.ca.gov or call the America’s Workforce Network Toll-Free Help Line at 1-877-US-2JOBS (1-877-872-5627) to find the location nearest you.
Paid Family Leave insurance benefits for California workers

There are times in the life of every working person when they need to care for a loved one. Maybe it’s a working mother who needs more time to bond with and care for a newborn. Maybe it’s an employee who needs to care for a seriously ill parent, child, spouse, or registered domestic partner. California’s Paid Family Leave insurance benefit was created for times like these. (Note: Registered domestic partners must meet requirements and register with the California Secretary of State to be eligible for benefits.)

A program that benefits you and your family

California is leading the nation as the first state to make it easier for employees to balance the demands of the workplace and family care needs at home. Paid Family Leave insurance benefits are based on the claimant’s (care provider’s) past quarterly earnings and range from a minimum of $50 to a maximum of $882 per week for up to six weeks.

Paid Family Leave for California employees

Paid Family Leave insurance does not provide job protection or return rights. Your job may be protected if your employer is subject to the federal Family Medical Leave Act and the California Family Rights Act. You must notify your employer of your reason for taking leave in a manner consistent with your company’s leave policy.

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

• Be covered by State Disability Insurance (SDI) (or a voluntary plan in lieu of SDI) and have earned at least $300 in your base period from which deductions were withheld.
• Complete your claim forms accurately, completely, truthfully, and timely.
• Submit your claim no earlier than 9 days, but no later than 49 days after the first day your family care leave began.
• Supply medical information that supports your claim that the care recipient has a serious health condition and requires your care.
• Provide documentation to support a claim for bonding with a new biological, adopted, or foster child.
• Use up to two weeks of any earned but unused vacation leave or paid time off (PTO) prior to the initial receipt of benefits if required by your employer prior to the initial receipt of benefits.
• Serve a 7-day unpaid waiting period before benefits begin for each different care recipient within the 12-month period.

You may not be eligible for benefits if:

• You receive State Disability Insurance, Unemployment Insurance, or Workers’ Compensation.
• You are not working or looking for work at the time you begin your family care leave.
• You are not suffering a loss of wages.
• The need for care is not supported by the certificate of a treating physician or practitioner.
• You are in custody due to conviction of a crime.

You are entitled to:

• Know the reason and basis for any decision that affects your benefits.
• Appeal any decision about your eligibility for benefits. (Appeals must be sent to Paid Family Leave in writing.)
• A hearing of your appeal before an Administrative Law Judge (ALJ). Your may further appeal the ALJ’s decision to the California Unemployment Insurance Appeals Board and the courts.
• Privacy — Information about your claim will be kept confidential except for the purposes allowed by law.

Fast facts about Paid Family Leave

• Provides benefits but does not provide job protection or return rights.
• Provides eligible workers partial wage replacement when taking time off work to care for parents, children, spouses, and registered domestic partners or to bond with a new minor child.
• Covers all employees who are covered by SDI (or a voluntary plan in lieu of SDI).
• Offers up to 6 weeks of benefits in a 12-month period.
• Provides benefits of approximately 55 percent of lost wages.

Contact Paid Family Leave

If you have any questions about these benefits or would like to request a claim form, contact us today. If you are a woman currently receiving SDI pregnancy-related benefits, it is not necessary to request a Claim for Paid Family Leave Benefits. You will automatically be sent a Claim for Paid Family Leave (PFL) Benefits - New Mother, DE 2501FP, when your preganancy-related disability claim ends.

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

For more information, visit: www.edd.ca.gov

Claim forms should be mailed to

Paid Family Leave at:
P.O. Box 997017
Sacramento, CA 95799-7017

EDD is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Requests for services, aids, and/or alternate formats need to be made by calling 877-238-4373 (voice), or TTY 800-445-1312.

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