



KOREATOWN YOUTH+
COMMUNITY CENTER

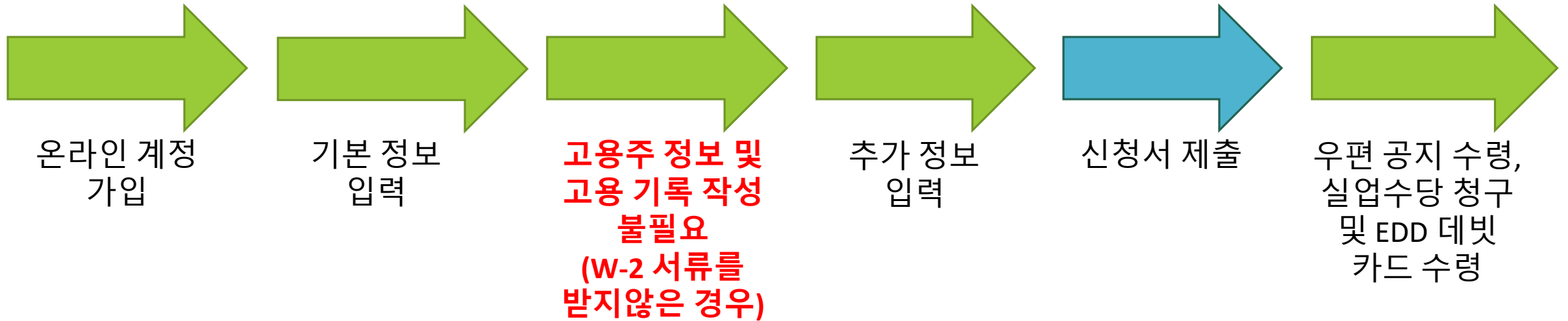
EDD 실업수당 신청 - PUA 프로그램

PUA(Pandemic Unemployment Assistance) 프로그램 실업 수당 신청 업데이트 내용 안내

EDD 실업 수당 온라인 PUA 신청 사전 준비

- 신청 준비 필요 서류 구비하기
 - 사회보장카드 (Social Security Card)
 - 운전면허증
 - 영주권카드 또는 취업허가카드
 - 2019년 Form 1040 세금보고 서류(Tax Return), Form 1099, 또는 급여명세서(Paycheck)
- EDD 온라인 홈페이지 접속하기
 - www.edd.ca.gov
- KYCC에 문의하여 온라인 신청 지원 예약하기
 - 문의전화: 213-365-7400
 - 온라인예약: <https://form.jotform.com/201197534523150>

EDD 실업 수당 온라인 PUA 신청 순서



PUA 프로그램 신청 업데이트 내용 안내



California
Employment Development Department

➔ Application for Unemployment Insurance

Answer the following questions to ensure you use the correct process to file your Unemployment Insurance claim.

*Indicates required field

1. *Did you work in another state and/or Canada during the last 18 months? Yes No
2. *Have you applied for Unemployment Insurance benefits in another state or Canada during the last 12 months? Yes No
3. *Did your employer, union, or non-union trade association give you one of the following claim forms for Unemployment Insurance benefits? Yes No
 - Notice of Reduced Earnings (DE 2063)
 - Notice of Reduced Earnings (Fisherman) (DE 2063F)
 - Pacific Maritime Association Partial Evidence of Payment Form (PMA 2063)
 - Payment Certification (Work Sharing) (DE 4581WS)
 - Initial Claim and Payment Certification (Work Sharing Employer) (DE 4511WS)
4. *Did you serve in the U.S. military during the last 18 months? Yes No
5. *Did you work for an agency of the federal government during the last 18 months? Yes No
6. *Have you filed an Unemployment Insurance claim in California during the last 12 months? Yes No

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

Previous

Cancel

Next

6. 이미 실업수당 (UI Claim)을 신청한 적이 있는 경우, 아직 연락을 받지 않았거나 청구가능액이 \$0으로 나온 경우에도 "Yes"를 선택해 주세요.

PUA 프로그램 신청 업데이트 내용 안내

 California
Employment Development Department

➔ Last Employer

➔ General Information **2 Last Employer Information** 3 Employment History 4 Additional Information 5 Summary 6 Confirmation

Provide the legal name or Doing Business As (DBA) name of the employer that you worked for most recently regardless of the length of time you worked for that employer or whether or not you have been paid.
If you worked today, you should indicate the name of the employer you worked for today.

BUSINESS OWNER, SELF-EMPLOYED, INDEPENDENT CONTRACTOR or GIG WORKER: If you had no employment wages (you did not receive a W-2) in the last 18 months, and are applying for PUA, then click No below. However, if you believe you should have received a W-2 from an employer and you want to list that employer (which means you are applying for regular UI), then click Yes below. Also, if you were a business owner, self-employed, independent contractor, or gig worker and an employer provided you a W-2 in the last 18 months, you should indicate that you did work for that employer.

TEMPORARY ASSIGNMENT/JOB: If you last worked on a temporary assignment/job, enter the name of the temporary employer as your last employer. If you worked a temporary job through a temporary agency, enter the name of the temporary agency as your last employer.

MULTIPLE EMPLOYERS: If you worked for more than one employer on the same day (example – one in the morning, and one in the afternoon), enter the legal name or DBA of the employer that you worked for last on that day.

*Indicates required field

Employment History

1. *Did you work for any employer in the last 18 months? Please see above instructions if you were a business owner, self-employed, independent contractor, or gig worker. Yes No

Previous Cancel Save

자영업자, 개인계약자 (Independent Contractor), Gig Worker(우버, 리프트 등) 이신 경우 “No”를 선택해 주세요.

만약 W-2를 받으신 적이 있거나, 급여명세서(Paycheck)를 받으실 때 세금이 원천징수되어 받으시는 경우에는 “Yes”를 선택해 주세요.

PUA 프로그램 신청 업데이트 내용 안내



California
Employment Development Department

→ Availability Information

General Information Last Employer Information Employment History **4 Additional Information** 5 Summary 6 Confirmation

Answer the questions about your work-related skills and availability then select Next.

*Indicates required field

- *What type of work do you normally perform? 
- *What other type of work can you perform? 
- *Is the type of work you normally perform seasonal? 
- *Do you expect to return to work for a former employer?
- *Do you have a date to start work? 
- *Are you ready and willing to accept work that matches your work skills and educational background? (Example: If offered a job, would you be able to accept it?)
- *Are you currently self-employed (have your own business or work as an independent contractor) or plan to become self-employed? If you are impacted by the COVID-19 pandemic, click No. 
- *Are you a member of a union or a non-union trade association? 





Yes No

Yes No

Yes No

Yes No

Yes No

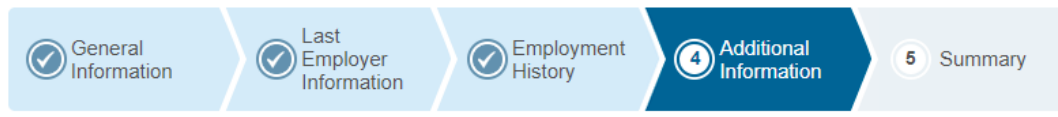
Yes No

7. 현재 하고 있는 일이
코로나바이러스 영향을 받으신 경우,
자영업자이시더라도 "No"를 선택해
주세요.

PUA 프로그램 신청 업데이트 내용 안내



Disaster Information



Draft Saved
Your draft will be saved until 05/02/2020 at 8:00 p.m. Pacific Time. A draft can only be saved up to Saturday 8:00 p.m. of the week you started.
To continue where you left off, log back into UI Online and select Continue with Saved Draft.

Answer the disaster-related question(s) and select Next to continue.

*Indicates required field

- *Are you unemployed as a direct result of a recent disaster (for example: COVID-19, earthquake, flood, mudslide, or fire) in California?
 - Select the type of disaster.
 - 1a.1. What is your annual income for calendar year 2019? If you are a business owner, self-employed, independent contractor or gig worker provide your net annual income for calendar year 2019.
 - 1a.2. Provide the date your business, employment, or self-employment was interrupted as a direct result of COVID-19. For example, the date your business closed, or the date your hours were reduced, or the date you were furloughed or placed on leave of absence without pay, or the date you were going to start work but couldn't due to COVID-19.
 - 1a.3. Select the option for how you were impacted by the COVID-19 pandemic.

Yes No

COVID-19

7514

03/18/2020

- You have been diagnosed with COVID-19.
- You have COVID-19 symptoms but no diagnosis.
- A member of your household has been diagnosed with COVID-19.
- You are taking care of your family member who has COVID-19.
- You had to quit your job as a direct result of COVID-19.
- Your place of employment is close to a COVID-19 hot spot.
- You cannot reach your workplace as a direct result of COVID-19.
- You cannot reach your workplace because your health care provider advised you to quarantine due to COVID-19 concerns.

2019년 연순수익 (Net Annual Income)을 적어 주세요.

해당 금액을 아래 서류에서 찾으실 수 있습니다:
Form 1099 또는 Schedule C, 31번.

또는:
Form 1040 세금 보고, 7a번 또는 Schedule 1, 3번, 4번, 또는 8번

만약 W-2를 받으신 경우 Form 1040 세금 보고 1번 금액을 추가해 주세요.

PUA 프로그램 신청 업데이트 내용 안내

1a.3. Select the option for how you were impacted by the COVID-19 pandemic.

- You have been diagnosed with COVID-19.
- You have COVID-19 symptoms and are seeking a diagnosis.
- A member of your household has COVID-19.
- You are taking care of your family or household member who has COVID-19.
- You had to quit your job as a direct result of COVID-19.
- Your place of employment is closed as a direct result of COVID-19.
- You cannot reach your workplace because of a quarantine as a direct result of COVID-19.
- You cannot reach your workplace because your health care provider advised you to quarantine due to COVID-19 concerns.
- You cannot work because you have primary responsibility for caring for a child or another person and their school or care facility is closed as a direct result of COVID-19.
- You had a definite date to start a job that is no longer available as a direct result of COVID-19.
- You had a definite date to start a job but cannot reach that job as a direct result of COVID-19.
- You are an independent contractor with reportable income (ex. IRS Form 1099) and you are forced to stop working because COVID-19 has severely limited your ability to continue performing your customary work activities.
- You became the major financial support for your household because your head of household passed away as a direct result of COVID-19.
- None of these options apply to me.

코로나바이러스가 본인에게 영향을 끼친 가장 알맞는 이유를 선택해 주세요.

1b. At the time of the disaster, in which county did you reside?

Los Angeles County

1c. At the time of the disaster, in which county did you work?

Los Angeles County

1d. At the time of the disaster, was your unemployment caused by your need to travel through a disaster county?

Yes No

1e. Select the option that best applies to you.

Unemployed Self-employed Individual

1e.1. How many hours did you work per week prior to the disaster?

84

1e.2. Explain briefly how the disaster affected your ability to continue or begin your self-employment.

I am a taxi driver, and there are no client due to COVID-19.

(Maximum 150 Characters)

1e.3. What is the physical address of your business?

Number and Street:

City:

State: -Select One-

ZIP Code:

코로나바이러스가 본인의 일에 어떤 영향을 주었는지 설명해 주세요.

PUA 프로그램 신청 업데이트 내용 안내

1b. At the time of the disaster, in which county did you reside?

1c. At the time of the disaster, in which county did you work?

1d. At the time of the disaster, was your unemployment caused by your need to travel through a disaster county? Yes No

1e. Select the option that best applies to you.

1e.1. How many hours did you work per week prior to the disaster?

1e.2. Explain briefly how the disaster affected your ability to continue or begin your self-employment.

1e.3. What is the physical address of your business?

City:

State:

ZIP Code:

1f. I declare under penalty of perjury that the information I have provided is true and correct to the best of my knowledge or belief, including the reason I am unemployed due to the COVID-19 pandemic. I understand that intentional misrepresentation in self-certifying that I fall within one or more of the COVID-19 categories is fraud and that I may be subject to criminal prosecution if I have been found to have committed fraud to receive Pandemic Unemployment Assistance benefits.

*I have read all of the above information.

실질적으로 일하는 직장 주소를 입력하세요. 자택에서 근무하시는 경우, 자택 주소를 입력하세요.

더 자세한 정보를 원하시면, KYCC에 문의하시거나 EDD 홈페이지를 방문해 주세요.

- KYCC에서 제공하는 실업수당 추가 자료를 안내해 드립니다.
 - EDD 실업수당 프로그램 안내서
 - 온라인 실업수당 신청 안내
 - 실업수당 PUA 프로그램 업데이트 안내
 - 실업수당 청구 안내
 - 실업수당 \$0 수정 요청 안내

KYCC 담당자 연락 정보:

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EDD에서 더 자세한 정보를 확인하세요.
www.edd.ca.gov/about_edd/coronavirus-2019.htm