

**WARNING:** Read all of the questions carefully and answer them truthfully. Your answers become a part of the record of your claim. Any information you provide may be verified through computer cross matching programs. It is illegal to misrepresent facts or withhold information in order to receive benefits. It is also illegal to file a claim under another person's identity. If you do these things, you may be subject to fines and imprisonment. You will have to repay any benefits you were not eligible to receive, and may be disqualified from receiving benefits in the future. By filing this claim, you acknowledge receipt of the Pennsylvania Unemployment Compensation Handbook, which includes information about your civil rights under federal law, and that you are responsible to abide by the information and instructions in the PA UC Handbook.

Pay special attention to the directions in **BOLD** font.

Question:	Answer:
1) Provide your full name, Social Security Number and daytime contact number.	1)
2) What is the <b>FIRST</b> claim week you are filing for? <b>(SEE SAMPLE CALENDAR)</b> <i>Answer the next questions based on this claim week</i>	2)
3) Would you like to file for benefits for this claim week? <b>If you answered "no," include the reason: "Working"; "Out of Area" or state the reason; then please proceed to question 10</b>	3)
4) Were you totally unemployed during the claim week? <b>If you answered "yes," please move to question 8.</b>	4)
5) Did you work your normal full-time hours during this claim week? <b>If you answered "yes," please move to question 10</b>	5)
6) During the claim week, were you absent from work when work was available? <b>If you answered "yes," include the gross wages you would have earned if you had worked these hours.</b>	6)
7a) What is the name of the employer from which you received earnings?	7a)
7b) What were your gross wages excluding vacation and holiday pay or "none"	7b)
7c) What was your gross amount of vacation pay or "none"	7c)
7d) What was your gross amount of holiday pay or "none"	7d)
<b>If you had more than one employer, please repeat questions 7a through 7d</b>	
8) Were you separated from employment during the claim week? <b>If you answered "yes," include the reason; "Fired/Discharged"; "Quit"; "Work Stoppage"; "Laid off/Lack of Work" or "Other"</b>	8)
9) Were you able to work and available for work during the claim week?	9)

Continued on Reverse

**BIWEEKLY CLAIM QUESTIONS (CONTINUED)**

Answer:

- 10) What is the SECOND claim week you are filing for? **(SEE SAMPLE CALENDAR)** 10)  
*Answer the next questions based on this claim week*
- 11) Would you like to file for benefits for this claim week? 11)  
**If you answered "no," include the reason: "Working"; "Out of the Area" or state the reason, then please proceed to question 19**
- 12) Are your answers for this claim week the same as for last claim week? 12)  
**If you answered "yes," please move to question 18**
- 13) Were you totally unemployed during the claim week? 13)  
**If you answered "yes," please move to question 17**
- 14) Did you work your normal full-time hours during this claim week? 14)  
**If you answered "yes," please move to question 19**
- 15) During the claim week, were you absent from work when work was available? 15)  
**If you answered "yes," include the gross wages you would have earned if you had worked these hours.**
- 16a) What is the name of the employer from which you received earnings? 16a)  
16b) What were your gross wages excluding vacation and holiday pay or "none"? 16b)  
16c) What was your gross amount of vacation pay or "none"? 16c)  
16d) What was your gross amount of holiday pay or "none"? 16d)  
**If you had more than one employer, please repeat questions 16a through 16d**
- 17) Were you separated from employment during the claim week? 17)  
**If you answered "yes" include the reason; "Fired/Discharged"; "Quit"; "Work Stoppage"; "Laid off/Lack of Work" or "Other"**
- 18) Were you able to work and available for work during the claim week? 18)
- 19) Do you certify that all answers that you have provided are true and correct and that you are aware of the penalties such as prosecution and one-year of ineligibility for benefits provided by law for making false statements for the purpose of obtaining compensation not due to you? 19)

This concludes your biweekly filing. You may track your claim through the internet [www.uc.pa.gov](http://www.uc.pa.gov) "View Payments". Videophone service for American Sign Language users is available every Wednesday from noon to 4pm at 717-704-8474. You may file your next biweekly claim two weeks from today's date.