



Eligibility Review Notice



SSN: _____

Failure to respond to this request and provide the information requested within 14 days of the date that this form originally was mailed to you can result in a denial of benefits.

The purpose of this review is to monitor your continued eligibility for benefits. To be considered timely this form must be received within 14 days of the date that it originally was mailed to you. If you have returned to full-time work, it is not necessary to complete items 1-4.

The date you returned to work:

_____/_____/_____
Month Day Year

Employer name and address:

1. Are you currently attending school or a training program approved under one of the following:

Trade Adjustment Assistance (TAA) Workforce Investment Act (WIOA)

If you answered yes to either of these, proceed to line 5 and return the form. You do not need to complete the remainder of this notice.

2. What is the distance (one way) you are willing to commute to work? _____miles

3. What means of transportation will you use to look for work? _____

4. Is there anything (health problem, dependent care, transportation, school attendance, training (other than indicated in item 1), etc. that would prevent you from immediately accepting full-time work? NO () YES ()

If YES explain _____

5. Attach a copy of photo ID: Acceptable forms of photo identification include a driver's license, passport, or other government-issued identification. Please send this completed form including work search and photo ID to the Division of Employment Security, Intrastate Claims Unit at: Post Office Box 27967 Raleigh, NC 27611; fax to 919.733.1370; or e-mail to des.ui.intrastate@nccommerce.com. Any questions, email des.ui.intrastate@nccommerce.com or call 919.707.1237 with any questions you may have.

6. **Work Search Requirements:** The Employment Security Law, G.S. 96-14.9(e), requires you to be registered for work with the Workforce/Employment Service office in the state where you live and actively seeking work during each week you claim for unemployment insurance benefits. You must make a total of three (3) contacts with potential employers for each week claimed. You must keep a detailed record of your work search activities, which are subject to audit by DES. You should maintain these records for at least five (5) years after you stop filing and return to full-time work. Failure to maintain an adequate and verifiable work search record for any week claimed may result in a denial, delayed payment, and/or overpayment (requiring repayment) of benefits.

Work Search Records

Week # __	Beginning Sunday		and Ending Saturday		
Date of Contact	Company Contacted	Contact Method	Provide one (1) of the following based upon your contact method:	Position Seeking	Results (Ex. Not Hiring, Submitted Application, Interview, Second Interview, Submitted Resume)
		In person (I) Telephone (T) *Email (E) *Online (O) Fax (F)	Physical Address Telephone Number Email Address Website Address Fax Number		

***Attach a copy of confirmation email or confirmation number for any online contacts.**

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I do solemnly affirm under penalty of perjury, that I am the person named herein, and that the information that I have provided, including proof of identification and the work search record, is true, correct, and complete to the best of my knowledge. I further understand that there are severe criminal and civil penalties for providing false statements and/or willfully misrepresenting any information to increase or receive unemployment insurance benefits, and that any information I have provided is subject to verification.

Claimant Signature _____ Date _____

Work Search Guidelines

REQUIREMENTS OF A VALID CONTACT

You must complete a work search for each week you claim unemployment insurance benefits including your waiting period week. DES will only consider contacts with employers who have a position matching your qualifications, knowledge, ability, or skill. Employer contact must be for the sole purpose of obtaining employment.

Your work search record **MUST** Include:

- (1) Date of contact
- (2) Company contacted
- (3) Contact method
- (4) Depending on method of contact we would need website address, e-mail address, fax number, telephone number, or address of contact
*If you are using an employment website, provide the name of the employer you are applying for a position with, **AND** the name of the employment website.
- (5) Position seeking
- (6) Results

Contacting the same employer regarding the same position or opening more than once during the same week can only count as one employer contact unless you are at different stages of the hiring process. (i.e. interview, second interview).

ACCEPTABLE METHODS OF CONTACT

- **SUBMIT APPLICATION OR RESUME, LETTER OF INTEREST, ETC.** - through Employer or Employment Website (including NC Works)
- **TELEPHONE CONVERSATION** with Employer (**include Name of Contact**) – Message left on voicemail or answering service is NOT sufficient
- **IN-PERSON MEETING** with Employer – May include contacts at job fairs or similar events or video interviews
- **INITIAL REGISTRATION** via NCWorks.gov (**only applies for week registration was completed**)
- **BLIND ADVERTISEMENT (An online or newspaper ad that does not give the company name)** - A copy of a blind advertisement may substitute for employer name, name of contact, and job title. **You must keep a copy of the advertisement for your records**

Below is an example of valid work search contacts

Week # <u>1</u>	Beginning Sunday 07/29/2018		and Ending Saturday 08/04/2018		
Date of Contact	Company Contacted	Contact Method In person (I) Telephone (T) *Email (E) *Online (O) Fax (F)	Provide one (1) of the following based upon your contact method: Physical Address Telephone Number Email Address Website Address Fax Number	Position Seeking	Results (Ex. Not Hiring, Submitted Application, Interview, Second Interview, Submitted Resume)
07/31/2018	Al's Plumbing	I	123 Main Street Burlington, NC 27215	Plumber	Not hiring
08/01/2018	Barbara's Baleru	T	Barbara Bodreaux 336-123-4567	Baker	Second Interview
08/02/2018	Carla's Accounting	E	carla123@yahoo.com	Accountant	Submitted Application
*Attach a copy of confirmation email or confirmation number for any online contacts.					
Week # <u>2</u>	Beginning Sunday 08/05/2018		and Ending Saturday 08/11/2018		
08/06/2018	Dollar Tree	O	www.dollartree.com	Cashier	Resume submitted online
08/09/2018	Blind Advertisement	F	919-896-8956 ***Remember to maintain a copy of the advertisement for your records	Customer Service Rep	Resume submitted by fax