



## What is Disability?

Disability is an illness or injury, either physical or mental, which prevents you from doing your regular work. Disability includes elective surgery, pregnancy, childbirth, or related medical conditions.

## What is Disability Insurance?

Disability Insurance (DI) is a part of the State Disability Insurance (SDI) program. DI helps replace your income when you can't work as a result of a non-work-related disability. The program is funded through your SDI tax withholding. You are most likely eligible if you've paid into the SDI program (noted as "CASDI" on paystubs).

Elective Coverage is a plan where employers, the self-employed, and general partners may choose to be covered under SDI. Benefits and eligibility are determined differently between these plans. Find the annual cost of participating at your local [Tax Office](http://edd.ca.gov/office_locator) (edd.ca.gov/office\_locator) or by visiting [Disability Insurance Elective Coverage](http://edd.ca.gov/en/Payroll_Taxes/Disability_Insurance_Elective_Coverage) (edd.ca.gov/en/Payroll\_Taxes/Disability\_Insurance\_Elective\_Coverage).

Citizenship and immigration status do not affect eligibility for SDI benefits.



## What Are My Benefits During Pregnancy?

Your disability period begins the first day you are unable to do your regular work. DI benefits are based on the period of time your licensed health professional certifies you are unable to do your regular work. You can file a DI claim for your pregnancy-related disability, and recovery from delivery.

Without medical complications, you can receive benefits up to four weeks before your expected delivery date and up to six weeks after your delivery. For cesarean section, you can receive benefits up to eight weeks after delivery.

After your DI pregnancy claim ends, you may be eligible to receive up to eight weeks of Paid Family Leave (PFL) to bond with your new baby. A PFL bonding claim form is automatically sent with the final DI benefit payment.

## What If I Require Care During My Disability?

If you require care during your disability, your child, parent, parent-in-law, grandparent, grandchild, sibling, spouse, or registered domestic partner may be eligible to receive up to eight weeks of PFL benefits to take time off work to care for you. For more information visit [California PFL](http://edd.ca.gov/en/disability/paid-family-leave) (edd.ca.gov/en/disability/paid-family-leave).



STATE OF CALIFORNIA  
LABOR AND WORKFORCE DEVELOPMENT AGENCY  
EMPLOYMENT DEVELOPMENT DEPARTMENT

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

The 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 1-866-490-8879 (voice). TTY users, please call the California Relay Service at 711.



# Disability Insurance Provisions



## How Do I Apply for Disability Insurance Benefits?

1. Use [SDI Online](https://edd.ca.gov/SDI_Online) (edd.ca.gov/SDI\_Online) to file for benefits.

OR

You can request a paper claim form by:

- Visiting [Forms and Publications](https://forms.edd.ca.gov/forms) (forms.edd.ca.gov/forms).

- Calling 1-800-480-3287.

California state government employees covered by SDI should call 1-866-352-7675.

2. After you complete Part A – Claimant’s Statement, have your licensed health professional complete Part B - Physician/Practitioner’s Certificate online or by using a paper claim form. If you are filing online, SDI Online will provide you a receipt number once Part A is submitted. Your licensed health professional will need your receipt number to complete Part B.

A claim cannot begin more than seven days before you were examined by or under the care of a licensed health professional.

3. File online or submit your paper claim form within 49 days from the date your disability begins. If your claim is late, you may lose benefits. Visit [Appeals](https://edd.ca.gov/en/Disability/Appeals) (edd.ca.gov/en/Disability/Appeals) for more information.

## What Happens Next?

- A properly completed claim takes two weeks to be processed.
- We will mail you a *Notice of Computation* (DE 429D) confirming we received your claim and providing your estimated benefit amount.
- You will know we approved your claim once you receive an *Electronic Benefit Payment (EBP) Notification* (DE 2500E).
- If more information is needed or if the claim has been denied, we will contact you.
- The first seven days of your DI claim are a non-payable waiting period. If a claim is filed for the same or related condition within 60 days of the first claim, it will be added on as a continuation of the initial claim. There is no additional waiting period.
- Benefits are paid once all information is received and you are approved. Benefit periods are two weeks at a time. If you are eligible for additional benefits, you will be sent the needed forms to complete and return. Allow 10 days for processing. If your benefits end midweek, that week will be paid at the daily rate. This rate is one-seventh of your weekly benefit amount.
- You will receive your benefits by the payment method you choose when filing a claim.



## How Are My Benefits Calculated?

They are based on your paychecks during a specific 12-month period (called a base period) 5 to 18 months before the start of your claim. To qualify, you must have earned at least \$300 in your base period.

Visit the [Disability Insurance and Paid Family Leave Calculator](https://edd.ca.gov/PFL_Calculator) (edd.ca.gov/PFL\_Calculator) to get an estimate.

## What Affects My Ongoing Benefits?

You cannot be paid more than your normal weekly salary while receiving benefits. DI benefits are not affected by vacation pay you may receive.

## Is There a Maximum Amount to My Benefits?

The maximum amount is 52 times the weekly rate of your benefits, but not more than your total base period wages earned when you were employed.

Exception: For employers and self-employed individuals who elect SDI coverage, the maximum benefit amount is 39 times the weekly rate.

Keep in mind that benefits are payable only for a limited period to a resident in an alcoholic recovery home or drug-free residential facility that is both licensed and certified by the state in which the facility is located. However, disabilities related to acute or chronic alcoholism or drug abuse, being medically treated, do not have this limitation.

## What Are My Rights If My Benefits Are Denied?

- **You can** know the reason and basis for any decision that affects your benefits.
- **You can** appeal any decision about your eligibility for benefits. Appeals must be sent to the DI office in writing.
- **You can** request an appeal hearing before an Administrative Law Judge (ALJ). You may further appeal the ALJ’s decision to the California Unemployment Insurance Appeals Board and the courts.
- **Your privacy** – all claim information will be kept confidential except for the purposes allowed by law.

## Contact DI

- English 1-800-480-3287.
- Spanish 1-866-658-8846.
- By US mail addressed to PO Box 13140, Sacramento, CA 95813-3140. If you do not have a current claim, you may write to any DI office. Note: Do not mail claim forms to this PO Box.
- By TTY (for TTY users only) at 1-800-563-2441.
- In person by visiting any of the [DI Offices](https://edd.ca.gov/office_locator) (edd.ca.gov/office\_locator).

**If your disability is permanent** or is expected to continue for a year or more, contact the [US Social Security Administration](https://ssa.gov) (ssa.gov) or by phone at 1-800-772-1213 (TTY 1-800-325-0778).

# For Your Benefit:

## California's Programs for the Unemployed

**Unemployment Insurance**  
**Disability Insurance**  
**Paid Family Leave**  
**Workforce Services**

# For Your Benefit: California’s Programs for the Unemployed

This publication provides information about programs offered by the Employment Development Department (EDD) for unemployed Californians. This is for general information only and it is not a legal document.

For more information, visit [our website](http://edd.ca.gov) (edd.ca.gov).

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# Unemployment Insurance

Unemployment benefits are paid for by your employer and provide temporary income when you are unemployed and meet all eligibility requirements.

## Who Should File a UI Claim

You may apply for unemployment if you are out of work or your hours have been reduced.

To be eligible for benefits, you must have earned enough wages during the base period to set up a claim, and be:

- Totally or partially unemployed.
- Unemployed through no fault of your own.
- Physically able to work.
- Available for work.
- Ready and willing to accept work immediately.
- Actively looking for work.

## When to Apply

You may apply for benefits as soon as you are unemployed, or your work hours are reduced. Your claim will begin on the Sunday of the week in which you apply for benefits.

All claims have a one-week, unpaid, waiting period. The waiting period does not begin until you apply for unemployment, certify for benefits, and meet all eligibility requirements.

## What You Need to Apply

To apply, we need you:

- Name, (including all names you used while working) and Social Security number.
- Mailing and residence address (if different) and phone number.
- Last employer's complete name, address (mailing and physical location), and phone number.
- Last day worked and the reason you're no longer working (laid off, quit, fired, or left work because of a trade dispute).
- Work history during the 18 months prior to applying your claim, including out-of-state employment. Include all employers' names, dates employed, and wages earned.
- State-issued driver license number or identification card number.
- Citizenship status and if you have the legal right to work in the United States. If you indicate you're registered with the United States Citizenship and Immigration Services (USCIS, formerly Immigration and Naturalization Services) and authorized to work in the United States, you will be asked for the title of your employment authorization document and information from the USCIS document, such as the Alien Registration Number, card number, and expiration date.

**Note:** Your previous employers' names and addresses are very important, regardless of how long you worked for the employer(s). If you worked part-time, provide the number of hours you worked each week.

**If you served in the military** in the last 18 months, you will need to provide information from your **D214 Member Copy 4**.

**If you worked for the federal government** during the last 18 months, provide information from your *Notice to Federal Employees About Unemployment Insurance, Standard Form 8*.

## Important

Making a false statement or withholding information to receive benefits can be a felony. Penalties may include fines, loss of benefits, and criminal prosecution. See more information on fraud and penalties on page 13.

## ID.me

ID.me is an identity proofing and authentication platform used by government agencies. This is a faster and easier way to verify your identity and process your claim.

- Create an **ID.me** account and follow the prompts.
- You will need a mobile device, tablet, or a computer to take and send a photo.
- Allow ID.me to transfer your information to us.
- Having trouble connecting? Connect with a live video agent from 4:30 a.m. to 9 p.m. (Pacific Time), through your ID.me account and send a request for help at **help.id.me** within ID.me.

## Employer Notification

Your last employer is notified when you apply for unemployment. Although we determine your eligibility, employers fund the UI program and are required by law to provide any information that may affect your eligibility to receive benefits.

## Types of Claims

Your application depends on the type of employer you worked for and the states where you worked.

Your application will be filed as a:

- Regular California claim if you only worked in California, even if you now live outside of California.
- Federal claim if your employment was in civilian work for the federal government.
- Military claim if you served as a member of the United States Armed Forces.
- Combined wage claim if you earned wages in California and in at least one other state during the last 18 months.

- Interstate claim application if you now live in California and only worked in another state during the last 18 months. Apply for unemployment directly with the other state, the District of Columbia, Puerto Rico, or Canada. If you worked in the US Virgin Islands, contact us at 1-800-300-5616.

## How to Apply

You may apply for unemployment using one of the following methods:

- **Online**  
UI Online<sup>SM</sup> is the fastest and most convenient way to apply for unemployment. Visit [UI Online](http://edd.ca.gov/UI_Online) ([edd.ca.gov/UI\\_Online](http://edd.ca.gov/UI_Online)) to get started.
- **Phone**  
Speak to an EDD representative Monday through Friday between 8 a.m. and 5 p.m. (Pacific Time), except on state holidays. Refer to page 20 for a list of unemployment phone numbers.
- **Fax or Mail**  
When applying for benefits with UI Online, some customers will be instructed to fax or mail their application to us. If this occurs, the paper *Unemployment Insurance Application* (DE 11011) will display for you to complete and send.
- For faster and more secure processing, fax the completed form to the number listed on the form. If mailing your unemployment application, use the address on the form and allow more time for processing.

## Beginning Date of Claim

Your claim begins on the Sunday of the week in which you apply for benefits.

## Ending Date of Claim

Your claim ends on the Saturday, 52 weeks after your claim begins. If you exhaust your benefits prior to this date, you cannot apply for another California claim until the benefit year of the claim ends.

If you worked in another state during the last 18 months, you may be eligible to apply for a new claim in that state.

## Minimum Earnings to Establish a Valid Claim

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 1.25 times your highest quarter earnings in your total base period.

For example: If you have \$900 earnings in your highest quarter, you would also need to have earned a total of \$1,125 in the base period ( $\$900 \times 1.25 = \$1,125$ ).

## How Unemployment Benefits are Calculated

The quarter in which you were paid the highest wages during the base period determines your weekly benefit amount (WBA). The WBA ranges from \$40 to \$450 per week.

The maximum benefit amount is 26 times the weekly benefit amount or one-half of the total base period wages, whichever is less.

Refer to the **Unemployment Insurance Benefit Table** on page 17 to estimate your WBA.

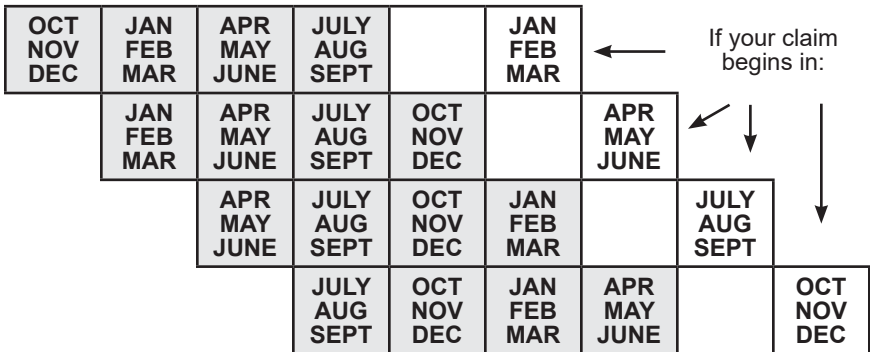
### Base Period

There are two types of base periods used to set up a claim: the standard base period and the alternate base period.

### Standard Base Period

The Standard Base Period (SBP) is the first four of the last five completed calendar quarters prior to the beginning date of the claim.

Refer to the chart below. The shaded area is the standard base period. The non-shaded area is the quarter the claim is filed.



### Alternate Base Period

If you do not have sufficient wages in the standard base period, you may qualify to file a claim using the Alternate Base Period (ABP).

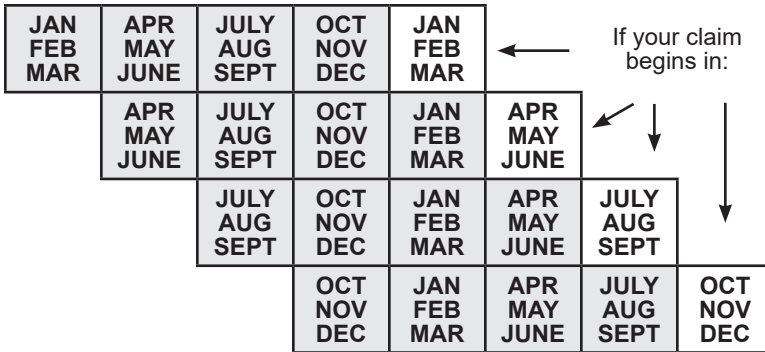
The ABP is the last four completed calendar quarters prior to the beginning date of the claim.

We will automatically file an ABP claim on your behalf if you're not eligible for a SBP claim.

You may be asked to give more wage information so we can correctly calculate your benefit amount. If you receive an Affidavit of Wages (DE 23A), gather the requested documents and return them to us.

**Note:** The ABP can only be used when there are not enough wages earned in the standard base period to set up a claim.

Refer to the chart below. The shaded area is the ABP. The non-shaded area is the quarter the claim is filed.



## Waiting Period

Unemployment claims have a mandatory, one-week, unpaid, waiting period. This waiting period generally takes effect on the first eligible week of a claim and prior to benefits being paid. Do not wait to apply because the waiting period cannot be served until a claim has been filed.

## How to Certify for Benefits

To serve your waiting period and receive benefit payments, you must meet all eligibility requirements and certify for benefits every two weeks.

There are three ways to certify for benefits:

- **UI Online:** ([edd.ca.gov/UI\\_Online](http://edd.ca.gov/UI_Online)) This is the fastest way to certify for benefits and report work and wages. To use UI Online, you must create an account through myEDD and complete a one-time registration for UI Online.
- **EDD Tele-Cert<sup>SM</sup>:** 1-866-333-4606  
Certify over the phone by calling 1-866-333-4606. Select **option 2** and follow all instructions. To access EDD Tele-Cert you must create a PIN.
- **Mail:** Complete, sign, and mail the *Continued Claim* (DE 4581) form to us.

**Note:** For faster processing, certify through UI Online or EDD Tele-Cert.

## Payments

Payments are issued after you certify for benefits and continue to meet all eligibility requirements for every week you claim benefits.

You have an option in how you receive your benefit payments. We issue benefit payments through a prepaid debit card or by check. The debit card is the fastest and most secure way to receive your benefits. However, you do not have to accept the debit card. Once your claim is filed, contact us if you wish to receive your benefits by paper check.

The debit card is valid for three years and used for disability, Paid Family Leave (PFL), and unemployment benefits.

If you were previously issued a debit card for prior unemployment, disability, or PFL benefits and need a replacement card, you must contact the Money Network's toll-free customer-service line at 1-800-684-7051 or 1-800-684-7053 (TTY).

Learn more about the [debit card](http://edd.ca.gov/debitcard) (edd.ca.gov/debitcard).

## Tax Requirements

Unemployment benefits are subject to federal income tax but exempt from California state income tax. Each time you certify for benefits, you can choose to withhold the 10 percent federal income tax from your weekly benefit payment. Otherwise, you may need to pay the tax at the end of the year when you file your tax return.

Each January, we mail a Form 1099G to individuals who received unemployment during the previous calendar year. Use the form to report important tax information on your federal tax return. You can access Form 1099G information for up to the past five years or request duplicate copies through UI Online or by calling 1-866-401-2849.

## Child Support Obligations

Your unemployment benefits may be reduced if you're required to pay child support payments to a court, District Attorney's office, or other child support enforcement agency.

## Report Earnings

You must report **all** work, wages, and other income to us during the week they were earned, not when you receive your pay. Failure to properly report your earnings can result in overpayments and penalties.

Types of income to report:

- Piece work
- Idle time pay
- Jury fees
- Commissions
- Witness fees
- Reuse pay
- Holiday pay
- Holding fees
- Residuals
- Awards
- Vacation pay
- In-lieu-of-notice pay
- Bonuses
- Tips
- Self-employment income
- Strike benefits
- Picket pay
- Standby pay
- Bereavement
- Back-pay
- Paid sick leave
- Workers' Compensation
- Pension
- Retirement
- Annuity

**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 us.

## **Pension or Retirement Pay**

Unemployment benefits may be reduced if you are receiving a pension, retirement pay, annuity, or other similar payment based on your previous work.

Social Security benefits are not deductible from unemployment benefits and do not need to be reported to us.

## **Part-Time Work**

If you work less than full-time, you must report that work to us. However, you may still be eligible for partial unemployment benefits. The first \$25 or 25 percent of your gross total earnings for the week (whichever is greater) will not be counted toward your benefit amount. The amount remaining will be deducted from your weekly benefit amount.

Example 1:

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 from your weekly benefit amount. You would receive \$45 (\$50 minus \$5) in unemployment benefits.

Example 2:

Your weekly benefit amount is \$400. You earn \$200. You must report \$200; however, the first 25 percent (\$50) is not counted, leaving \$150 to deduct from your weekly benefit amount. You would receive \$250 (\$400 minus \$150) in unemployment benefits.

## **How Your Eligibility is Determined**

To be eligible, you must be:

- Out of work through no fault of your own.
- Physically able to work.
- Ready to accept work.
- Actively looking for work.

If you were laid off, you're considered to be out of work through no fault of your own.

If you quit your last job, were fired, or are unemployed due to a strike or lockout, we will schedule a phone interview with you to collect information on the reason you are no longer working. Your unemployment benefits cannot be paid until your phone interview is complete, you certify for benefits, and we determine your eligibility.

You have the right to request more time to gather information, contact witnesses, or obtain the advice of a representative. If the eligibility issue

involves an employer, we may contact the employer.

If you are sent a written request for more information and you respond by mail, the interviewer will use the information you send to determine your eligibility.

If you are denied benefits for any reason throughout your claim, including insufficient wages to set up a claim, a written Notice of Determination (DE 1080CZ) will be mailed to you explaining the reason along with your appeal rights.

**Important:** Your benefits can be delayed or denied if you are not available for the interview or do not send the required information. We will decide your eligibility based on the information available.

## Appeals Process

If you are denied benefits, you have the legal right to appeal the decision by completing and mailing the *Appeal Form* (DE 1000M). To be considered timely, it must be mailed within 30 calendar days from the mailing date of the *Notice of Determination* (DE 1080CZ). If you miss the 30-day deadline, you may still appeal, but you must show good cause for the delay.

Your appeal will be heard by an independent administrative law judge. Hearings are informal, but all testimony is taken under oath and is subject to cross-examination. The office of appeal will let you know when and where the hearing will be held.

Before the hearing, you have the right to review all records affecting your appeal. Those records are provided by California Unemployment Insurance Appeals Board (CUIAB). You can request records from us to prepare for your hearing.

At the hearing, you may be represented by yourself, a union official, an attorney, or anyone else you select. You may bring any relevant documentation to support your case.

After the hearing, you are mailed the administrative law judge's decision. If you are not satisfied, you may send a second level appeal to the CUIAB.

For information on how the UI code is applied, including current case studies, see the [Benefit Determination Guide](http://edd.ca.gov/uibdg) ([edd.ca.gov/uibdg](http://edd.ca.gov/uibdg)).

**Important:** You must continue to certify for benefits while your claim is under appeal. If the original decision is reversed, we can quickly issue all back payments to you. **Failure to comply could result in your benefits being denied or delayed.**

## Canceling a Claim

You may cancel a claim if you meet **all** the following criteria:

- No benefits have been paid.
- You are not disqualified for benefits due to an eligibility issue.
- An overpayment has not been established on the claim.
- You notify us before the 52-week benefit year ends.

Once a claim is canceled, it cannot be re-established with the same beginning date. You must apply for a new claim, which will have a later beginning date.

## **Workers Not Covered by Unemployment Benefits**

The following groups of workers are not normally covered:

- Elected officials.
- Self-employed, unless participating in elective coverage.
- Students enrolled and regularly attending classes at the school or education institution where employed.
- Members of a Limited Liability Company (LLC) that are treated as a partnership for federal income tax reporting purposes.
- A student's spouse who is working for an educational institution in an employment program provided for the purpose of financially aiding the student.
- Parents employed by their children, or children under the age of 18 employed by their parents.
- Husbands and wives employed by each other.
- Registered domestic partner employed by their registered domestic partner.
- Certain state-licensed salespersons paid only by commissions.
- Caddies and jockeys.

For more information, refer to [Exempt Employment \(DE 231EE\) \(PDF\)](http://edd.ca.gov/siteassets/files/pdf_pub_ctr/de231ee.pdf) (edd.ca.gov/siteassets/files/pdf\_pub\_ctr/de231ee.pdf) and [Family Employment \(DE 231FAM\) \(PDF\)](http://edd.ca.gov/siteassets/files/pdf_pub_ctr/de231fam.pdf) (edd.ca.gov/siteassets/files/pdf\_pub\_ctr/de231fam.pdf) for additional information.

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

## **Elective Coverage**

Under certain conditions, employers of the individuals whose services are not covered may elect to cover those services. If you are not sure whether you are eligible for these benefits, contact us.

## **Request a Claim Print Out**

You may request a printout out of your claim through one of the following methods:

- Create a [UI Online](http://edd.ca.gov/UI_Online) (edd.ca.gov/UI\_Online) account.
- Select **Claim History** and print.
- Call us at 1-800-300-5616.

## Special Programs

### California Training Benefits

If you are attending school or training while receiving unemployment benefits, you may qualify for California Training Benefits (CTB).

If eligible, you can further your education, upgrade your skills, or learn a new trade while attending an EDD-approved training or school program to be more competitive in today's labor market.

While in school or training, you will be exempt from the requirements to be available for work, actively seek work, and accept work. You may also be eligible for additional weeks of benefits. To learn more visit [California Training Benefits](http://edd.ca.gov/en/unemployment/California_Training_Benefits) (edd.ca.gov/en/unemployment/California\_Training\_Benefits).

**Note:** We do **not** cover educational or training-related expenses such as tuition, fees, books, supplies, or transportation. However, there are state, federal, or employer programs that may fund your school or training.

### Training Extension

A Training Extension (TE) provides additional benefits to individuals who have been approved for CTB, while completing school or training. Only one TE is allowed for each CTB-approved training period.

If interested, you must contact us to inquire about a TE before receiving the 16th week of unemployment benefits. For claims that have less than 16 weeks of benefits, you must contact us before the claim reaches a zero balance.

### Disaster Unemployment Assistance

The federal Disaster Unemployment Assistance (DUA) program gives financial help to individuals whose employment or self-employment has been lost or interrupted as a direct result of a major disaster and who are not eligible for regular unemployment benefits. These benefits are available only when the President of the United States declares a major disaster and makes this special assistance available.

If DUA benefits are available, information will be posted on [our website](#) (edd.ca.gov).

### Trade Adjustment Assistance

The Trade Adjustment Assistance (TAA) program is a federally funded program that gives benefits and services to eligible workers who are certified by the US Department of Labor (DOL) as having lost their jobs, or had their hours and wages reduced, because of foreign trade. Types of benefits include training, employment and case-management services, job

search and relocation allowances, income support, and wage subsidies. To learn more, visit [TAA Programs](http://edd.ca.gov/en/jobs_and_training/trade_act) (edd.ca.gov/en/jobs\_and\_training/trade\_act).

The wage subsidy program provides wage subsidies to individuals aged 50 or older who return to work earning less than their former trade impacted employment.

## **Extended Benefits**

Extended benefits are available to workers who have exhausted regular unemployment insurance benefits when the unemployment rate equals or exceeds a certain percentage established by state or federal law or when the federal government approves special extended benefit legislation.

## **Work Sharing**

The Work Sharing program helps participating employers minimize or eliminate the need for layoffs if the business's production or services have been reduced. It allows employers to keep trained employees and quickly recover when business conditions improve.

To participate, an employer must apply and meet all requirements, including, but not limited to:

- Be a legally registered business in California.
- A minimum of two employees and at least 10 percent of your regular workforce must be affected by a reduction of at least 10 percent and no more than 60 percent in both hours worked and wages earned.
- Health and retirement benefits must stay the same as before, or they must meet the same standards as other employees who are not participating in Work Sharing.
- The employees' bargaining unit must agree to voluntarily participate and sign the application for Work Sharing.

With Work Sharing, participating employees whose hours and wages have been reduced can:

- Receive UI benefits corresponding to the percentage of their work hours and wages.
- Keep their current job.
- Avoid financial hardships.

To learn more, visit [Work Sharing Program](http://edd.ca.gov/en/Unemployment/Work_Sharing_Program) (edd.ca.gov/en/Unemployment/Work\_Sharing\_Program).

## **Partial Claims**

Like our Work Sharing Program, Partial Claims is an alternative to layoffs and allows employers to keep staff by reducing their earnings.

The employer certifies that the employee is expected to return to work

and gives the employee the [Notice of Reduced Earnings \(DE 2063\) \(PDF\)](#) (edd.ca.gov/siteassets/files/pdf\_pub\_ctr/de2063.pdf) or [Notice of Reduced Earnings \(Fisherperson\) \(DE 2063F\)](#) (edd.ca.gov/siteassets/files/pdf\_pub\_ctr/de2063f.pdf) to apply for unemployment.

Employees participating in this program are considered partially employed and are not required to look for a new job to receive benefits.

To learn more, visit [Partial Claims](#) (edd.ca.gov/en/unemployment/partial\_claims).

## **Railroad Unemployment Benefits**

Railroad workers may claim benefits under the U.S. Railroad Unemployment Insurance Act. This program is administered by the U.S. Railroad Retirement Board (RRB).

To apply, call the toll-free number at 1-877-772-5772 between 9 a.m. and 3:30 p.m., Monday through Friday to speak to an RRB representative or apply online at US Railroad Retirement Board at US Railroad Retirement Board\_(rrb.gov).

## **Unemployment Insurance Fraud Prevention and Detection**

We take the security of personal and confidential information very seriously. Therefore, all data submitted to us is encrypted. Additional safeguards are built in to further protect your personal information from imposter fraud and identity theft.

Imposter fraud occurs when someone intentionally applies for unemployment using another person's employment or personal information. We actively investigate cases of imposter fraud and are committed to protecting the identities of legitimate claimants.

If we suspect that there may be identity issues, you will receive a written request to confirm the information provided. We will also contact your former employers and governmental entities to verify your documents and information.

For more information, download the [Protect Your Identity and Stop Unemployment Insurance Imposter Fraud \(DE 2360EE\) \(PDF\)](#) brochure (edd.ca.gov/pdf\_pub\_ctr/de2360ee.pdf).

To report UI fraud, visit [Ask EDD](#) (askedd.edd.ca.gov) and select **Report Fraud** to send a Fraud Reporting Form online, or call the EDD toll-free fraud hotline at 1-800-229-6297.

## **Penalties**

Making a false statement or withholding information to receive benefits can be a felony. Penalties may include a loss of benefits, a false statement disqualification, and criminal prosecution.

A false statement disqualification denies benefits from 2 to 23 weeks. The disqualification stays on your record for three years or until served, whichever comes first. To serve false statement weeks, you must continue to certify for unemployment benefits, and meet all other eligibility requirements. You will not be paid during this time.

## **Benefit Audits**

We conduct audits by cross-referencing employer information with claim information to determine if a customer properly reported all work, wages, and other income to us while collecting unemployment benefits. Overpayments and penalties collected from these audits ensure the solvency of the UI Trust Fund and help reduce UI taxes.

## **Social Security Number Verification**

We may require you to verify your Social Security number (SSN) as issued to you by the Social Security Administration (SSA).

Your eligibility for benefits may be affected if:

- The SSN provided is assigned to a different name or belongs to another individual.
- The SSN is not valid.
- The SSN was never issued by the SSA.
- The wages in the base period belong to another individual.
- The date of birth at the SSA is different than the date of birth you gave when you applied.

If we require you to verify your SSN, you may be asked to send a complete copy of your Annual Social Security Statement. To obtain a copy of your complete Social Security Statement visit the SSA online ([ssa.gov](http://ssa.gov)).

A copy of your Social Security card will not satisfy this requirement.

## **State Disability Insurance (SDI)**

State Disability Insurance (SDI) is made up of Disability Insurance (DI) and Paid Family Leave (PFL). The program is funded entirely by California workers through employee payroll deductions, noted as CASDI on paystubs.

### **Exceptions:**

- 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 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.

**Note:** Citizenship and immigration status do not affect eligibility for SDI.

## Disability Insurance

Disability Insurance (DI) provides short-term, partial wage replacement benefits to eligible workers who are unable to work due to a non-work-related illness, injury, or pregnancy.

When to file a claim: Submit your claim no earlier than 9 days after the first day your disability begins, but no later than 49 days after your disability begins or you may lose benefits.

For faster processing, file your claim using [SDI Online](http://edd.ca.gov/en/Disability/SDI_Online) ([edd.ca.gov/en/Disability/SDI\\_Online](http://edd.ca.gov/en/Disability/SDI_Online)).

**Exception:** If a claim is filed for the same or related cause or condition within 60 days of the initial claim, there is no new waiting period.

To file a claim or learn more, visit [State Disability Insurance](http://edd.ca.gov/disability) ([edd.ca.gov/disability](http://edd.ca.gov/disability)). EDD staff are available from Monday through Friday between 8 a.m. and 5 p.m. (Pacific Time), except on state holidays.

Refer to page 20 for a list of DI phone numbers.

## Paid Family Leave

Paid Family Leave (PFL) provides short-term, partial wage replacement benefits to eligible workers who need to take time off work to care for a seriously ill child, parent, parent-in-law, grandparent, grandchild, sibling, spouse, or registered domestic partner. Benefits are available to parents who need time to bond with a new child entering their family either by birth, adoption, or foster care placement. Benefits are also available for individuals who need time off work to participate in a qualifying event resulting from a spouse, registered domestic partner, parent, or child's military deployment to a foreign country.

When to file a claim: Submit your claim no earlier than the first day your family leave begins, but no later than 41 days after your family leave begins or you may lose benefits.

For faster processing, file your claim using [SDI Online](http://edd.ca.gov/en/Disability/SDI_Online) ([edd.ca.gov/en/Disability/SDI\\_Online](http://edd.ca.gov/en/Disability/SDI_Online)).

To file, or learn more visit [Paid Family Leave](http://edd.ca.gov/en/disability/paid-family-leave) ([edd.ca.gov/en/disability/paid-family-leave](http://edd.ca.gov/en/disability/paid-family-leave)).

Our staff are available Monday through Friday between 8 a.m. and 5 p.m. (Pacific Time), except on state holidays.

Refer to page 20 for a list of PFL phone numbers.

## Workforce Services

In partnership with state and local agencies, we offer a range of employment and training services, for job seekers at no cost, through the America's Job Center of California<sup>SM</sup> (AJCC).

Through the AJCCs, we support job seekers with job search and resume workshops, job fairs, and referrals to other workforce partners, and much more. For more information, find your nearest AJCC by using the [Office Locator](http://edd.ca.gov/Office_Locator) (edd.ca.gov/Office\_Locator).

## **CalJOBS<sup>SM</sup>**

CalJOBS is California's online resource to help job seekers and employers navigate our workforce services. CalJOBS<sup>SM</sup> allows users to easily search for jobs, build resumes, access career resources, find qualified candidates for employment, and gather information on education and training programs.

Job seekers can:

- Create a resume or upload multiple resumes.
- Search and apply for job openings.
- Set up alerts for job openings.
- Research employers.
- Make customized resumes viewable to employers.

**Note:** Registering for a CalJOBS account and posting a resume is an eligibility requirement for many unemployment claimants. To register, visit [CalJOBS](http://CalJOBS) (caljobs.ca.gov).

## **Migrant and Seasonal Farmworkers Outreach Program**

The Migrant and Seasonal Farmworker (MSFW) Outreach program helps farmworkers unfamiliar with the services provided at the AJCC. These no cost services include:

- Referrals to local supportive services.
- General information about unemployment and disability insurance.
- Help with employment services and employment related law complaints.
- Information about farmworker employment rights.
- Help with job search, job screening and referrals to jobs.

## **Services for Veterans**

We offer services for veterans to help them achieve their employment and training goals. Services include labor market information, veteran 24-hour priority hold on all job listings, customized job search help, job fairs, workshops, employer recruitments, and other resources.

## **Youth Employment Opportunity Program**

The Youth Employment Opportunity Program provides special services to help youth, ages 15 to 25 years, achieve 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.

For more information on the programs and services listed above, visit [Jobs and Training](http://Jobs_and_Training) (edd.ca.gov/Jobs\_and\_Training).

Unemployment Insurance Benefit Table  
For New Claims with a Beginning Date of January 2, 2005 or After

Amount of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount
\$ 900.00 – 948.99	\$40	\$ 2,210.01 – 2,236.00	\$86	\$ 3,406.01 – 3,432.00	\$132
949.00 – 974.99	41	2,236.01 – 2,262.00	87	3,432.01 – 3,458.00	133
975.00 – 1,000.99	42	2,262.01 – 2,288.00	88	3,458.01 – 3,484.00	134
1,001.00 – 1,026.99	43	2,288.01 – 2,314.00	89	3,484.01 – 3,510.00	135
1,027.00 – 1,052.99	44	2,314.01 – 2,340.00	90	3,510.01 – 3,536.00	136
1,053.00 – 1,078.99	45	2,340.01 – 2,366.00	91	3,536.01 – 3,562.00	137
1,079.00 – 1,117.99	46	2,366.01 – 2,392.00	92	3,562.01 – 3,588.00	138
1,118.00 – 1,143.99	47	2,392.01 – 2,418.00	93	3,588.01 – 3,614.00	139
1,144.00 – 1,169.99	48	2,418.01 – 2,444.00	94	3,614.01 – 3,640.00	140
1,170.00 – 1,195.99	49	2,444.01 – 2,470.00	95	3,640.01 – 3,666.00	141
1,196.00 – 1,221.99	50	2,470.01 – 2,496.00	96	3,666.01 – 3,692.00	142
1,222.00 – 1,247.99	51	2,496.01 – 2,522.00	97	3,692.01 – 3,718.00	143
1,248.00 – 1,286.99	52	2,522.01 – 2,548.00	98	3,718.01 – 3,744.00	144
1,287.00 – 1,312.99	53	2,548.01 – 2,574.00	99	3,744.01 – 3,770.00	145
1,313.00 – 1,338.99	54	2,574.01 – 2,600.00	100	3,770.01 – 3,796.00	146
1,339.00 – 1,364.99	55	2,600.01 – 2,626.00	101	3,796.01 – 3,822.00	147
1,365.00 – 1,403.99	56	2,626.01 – 2,652.00	102	3,822.01 – 3,848.00	148
1,404.00 – 1,429.99	57	2,652.01 – 2,678.00	103	3,848.01 – 3,874.00	149
1,430.00 – 1,455.99	58	2,678.01 – 2,704.00	104	3,874.01 – 3,900.00	150
1,456.00 – 1,494.99	59	2,704.01 – 2,730.00	105	3,900.01 – 3,926.00	151
1,495.00 – 1,520.99	60	2,730.01 – 2,756.00	106	3,926.01 – 3,952.00	152
1,521.00 – 1,546.99	61	2,756.01 – 2,782.00	107	3,952.01 – 3,978.00	153
1,547.00 – 1,585.99	62	2,782.01 – 2,808.00	108	3,978.01 – 4,004.00	154
1,586.00 – 1,611.99	63	2,808.01 – 2,834.00	109	4,004.01 – 4,030.00	155
1,612.00 – 1,637.99	64	2,834.01 – 2,860.00	110	4,030.01 – 4,056.00	156
1,638.00 – 1,676.99	65	2,860.01 – 2,886.00	111	4,056.01 – 4,082.00	157
1,677.00 – 1,702.99	66	2,886.01 – 2,912.00	112	4,082.01 – 4,108.00	158
1,703.00 – 1,741.99	67	2,912.01 – 2,938.00	113	4,108.01 – 4,134.00	159
1,742.00 – 1,767.99	68	2,938.01 – 2,964.00	114	4,134.01 – 4,160.00	160
1,768.00 – 1,806.99	69	2,964.01 – 2,990.00	115	4,160.01 – 4,186.00	161
1,807.00 – 1,832.99	70	2,990.01 – 3,016.00	116	4,186.01 – 4,212.00	162
1,833.00 – 1,846.00	71	3,016.01 – 3,042.00	117	4,212.01 – 4,238.00	163
1,846.01 – 1,872.00	72	3,042.01 – 3,068.00	118	4,238.01 – 4,264.00	164
1,872.01 – 1,898.00	73	3,068.01 – 3,094.00	119	4,264.01 – 4,290.00	165
1,898.01 – 1,924.00	74	3,094.01 – 3,120.00	120	4,290.01 – 4,316.00	166
1,924.01 – 1,950.00	75	3,120.01 – 3,146.00	121	4,316.01 – 4,342.00	167
1,950.01 – 1,976.00	76	3,146.01 – 3,172.00	122	4,342.01 – 4,368.00	168
1,976.01 – 2,002.00	77	3,172.01 – 3,198.00	123	4,368.01 – 4,394.00	169
2,002.01 – 2,028.00	78	3,198.01 – 3,224.00	124	4,394.01 – 4,420.00	170
2,028.01 – 2,054.00	79	3,224.01 – 3,250.00	125	4,420.01 – 4,446.00	171
2,054.01 – 2,080.00	80	3,250.01 – 3,276.00	126	4,446.01 – 4,472.00	172
2,080.01 – 2,106.00	81	3,276.01 – 3,302.00	127	4,472.01 – 4,498.00	173
2,106.01 – 2,132.00	82	3,302.01 – 3,328.00	128	4,498.01 – 4,524.00	174
2,132.01 – 2,158.00	83	3,328.01 – 3,354.00	129	4,524.01 – 4,550.00	175
2,158.01 – 2,184.00	84	3,354.01 – 3,380.00	130	4,550.01 – 4,576.00	176
2,184.01 – 2,210.00	85	3,380.01 – 3,406.00	131	4,576.01 – 4,602.00	177

Unemployment Insurance Benefit Table  
For New Claims with a Beginning Date of January 2, 2005 or After

Amount of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount
\$ 4,602.01 – 4,628.00	\$178	\$ 5,798.01 – 5,824.00	\$224	\$ 6,994.01 – 7,020.00	\$270
4,628.01 – 4,654.00	179	5,824.01 – 5,850.00	225	7,020.01 – 7,046.00	271
4,654.01 – 4,680.00	180	5,850.01 – 5,876.00	226	7,046.01 – 7,072.00	272
4,680.01 – 4,706.00	181	5,876.01 – 5,902.00	227	7,072.01 – 7,098.00	273
4,706.01 – 4,732.00	182	5,902.01 – 5,928.00	228	7,098.01 – 7,124.00	274
4,732.01 – 4,758.00	183	5,928.01 – 5,954.00	229	7,124.01 – 7,150.00	275
4,758.01 – 4,784.00	184	5,954.01 – 5,980.00	230	7,150.01 – 7,176.00	276
4,784.01 – 4,810.00	185	5,980.01 – 6,006.00	231	7,176.01 – 7,202.00	277
4,810.01 – 4,836.00	186	6,006.01 – 6,032.00	232	7,202.01 – 7,228.00	278
4,836.01 – 4,862.00	187	6,032.01 – 6,058.00	233	7,228.01 – 7,254.00	279
4,862.01 – 4,888.00	188	6,058.01 – 6,084.00	234	7,254.01 – 7,280.00	280
4,888.01 – 4,914.00	189	6,084.01 – 6,110.00	235	7,280.01 – 7,306.00	281
4,914.01 – 4,940.00	190	6,110.01 – 6,136.00	236	7,306.01 – 7,332.00	282
4,940.01 – 4,966.00	191	6,136.01 – 6,162.00	237	7,332.01 – 7,358.00	283
4,966.01 – 4,992.00	192	6,162.01 – 6,188.00	238	7,358.01 – 7,384.00	284
4,992.01 – 5,018.00	193	6,188.01 – 6,214.00	239	7,384.01 – 7,410.00	285
5,018.01 – 5,044.00	194	6,214.01 – 6,240.00	240	7,410.01 – 7,436.00	286
5,044.01 – 5,070.00	195	6,240.01 – 6,266.00	241	7,436.01 – 7,462.00	287
5,070.01 – 5,096.00	196	6,266.01 – 6,292.00	242	7,462.01 – 7,488.00	288
5,096.01 – 5,122.00	197	6,292.01 – 6,318.00	243	7,488.01 – 7,514.00	289
5,122.01 – 5,148.00	198	6,318.01 – 6,344.00	244	7,514.01 – 7,540.00	290
5,148.01 – 5,174.00	199	6,344.01 – 6,370.00	245	7,540.01 – 7,566.00	291
5,174.01 – 5,200.00	200	6,370.01 – 6,396.00	246	7,566.01 – 7,592.00	292
5,200.01 – 5,226.00	201	6,396.01 – 6,422.00	247	7,592.01 – 7,618.00	293
5,226.01 – 5,252.00	202	6,422.01 – 6,448.00	248	7,618.01 – 7,644.00	294
5,252.01 – 5,278.00	203	6,448.01 – 6,474.00	249	7,644.01 – 7,670.00	295
5,278.01 – 5,304.00	204	6,474.01 – 6,500.00	250	7,670.01 – 7,696.00	296
5,304.01 – 5,330.00	205	6,500.01 – 6,526.00	251	7,696.01 – 7,722.00	297
5,330.01 – 5,356.00	206	6,526.01 – 6,552.00	252	7,722.01 – 7,748.00	298
5,356.01 – 5,382.00	207	6,552.01 – 6,578.00	253	7,748.01 – 7,774.00	299
5,382.01 – 5,408.00	208	6,578.01 – 6,604.00	254	7,774.01 – 7,800.00	300
5,408.01 – 5,434.00	209	6,604.01 – 6,630.00	255	7,800.01 – 7,826.00	301
5,434.01 – 5,460.00	210	6,630.01 – 6,656.00	256	7,826.01 – 7,852.00	302
5,460.01 – 5,486.00	211	6,656.01 – 6,682.00	257	7,852.01 – 7,878.00	303
5,486.01 – 5,512.00	212	6,682.01 – 6,708.00	258	7,878.01 – 7,904.00	304
5,512.01 – 5,538.00	213	6,708.01 – 6,734.00	259	7,904.01 – 7,930.00	305
5,538.01 – 5,564.00	214	6,734.01 – 6,760.00	260	7,930.01 – 7,956.00	306
5,564.01 – 5,590.00	215	6,760.01 – 6,786.00	261	7,956.01 – 7,982.00	307
5,590.01 – 5,616.00	216	6,786.01 – 6,812.00	262	7,982.01 – 8,008.00	308
5,616.01 – 5,642.00	217	6,812.01 – 6,838.00	263	8,008.01 – 8,034.00	309
5,642.01 – 5,668.00	218	6,838.01 – 6,864.00	264	8,034.01 – 8,060.00	310
5,668.01 – 5,694.00	219	6,864.01 – 6,890.00	265	8,060.01 – 8,086.00	311
5,694.01 – 5,720.00	220	6,890.01 – 6,916.00	266	8,086.01 – 8,112.00	312
5,720.01 – 5,746.00	221	6,916.01 – 6,942.00	267	8,112.01 – 8,138.00	313
5,746.01 – 5,772.00	222	6,942.01 – 6,968.00	268	8,138.01 – 8,164.00	314
5,772.01 – 5,798.00	223	6,968.01 – 6,994.00	269	8,164.01 – 8,190.00	315

Unemployment Insurance Benefit Table  
For New Claims with a Beginning Date of January 2, 2005 or After

Amount of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount	Amount of Wages in Highest Quarter	Weekly Benefit Amount
\$ 8,190.01 – 8,216.00	\$316	\$ 9,386.01 – 9,412.00	\$362	\$10,582.01 – 10,608.00	\$408
8,216.01 – 8,242.00	317	9,412.01 – 9,438.00	363	10,608.01 – 10,634.00	409
8,242.01 – 8,268.00	318	9,438.01 – 9,464.00	364	10,634.01 – 10,660.00	410
8,268.01 – 8,294.00	319	9,464.01 – 9,490.00	365	10,660.01 – 10,686.00	411
8,294.01 – 8,320.00	320	9,490.01 – 9,516.00	366	10,686.01 – 10,712.00	412
8,320.01 – 8,346.00	321	9,516.01 – 9,542.00	367	10,712.01 – 10,738.00	413
8,346.01 – 8,372.00	322	9,542.01 – 9,568.00	368	10,738.01 – 10,764.00	414
8,372.01 – 8,398.00	323	9,568.01 – 9,594.00	369	10,764.01 – 10,790.00	415
8,398.01 – 8,424.00	324	9,594.01 – 9,620.00	370	10,790.01 – 10,816.00	416
8,424.01 – 8,450.00	325	9,620.01 – 9,646.00	371	10,816.01 – 10,842.00	417
8,450.01 – 8,476.00	326	9,646.01 – 9,672.00	372	10,842.01 – 10,868.00	418
8,476.01 – 8,502.00	327	9,672.01 – 9,698.00	373	10,868.01 – 10,894.00	419
8,502.01 – 8,528.00	328	9,698.01 – 9,724.00	374	10,894.01 – 10,920.00	420
8,528.01 – 8,554.00	329	9,724.01 – 9,750.00	375	10,920.01 – 10,946.00	421
8,554.01 – 8,580.00	330	9,750.01 – 9,776.00	376	10,946.01 – 10,972.00	422
8,580.01 – 8,606.00	331	9,776.01 – 9,802.00	377	10,972.01 – 10,998.00	423
8,606.01 – 8,632.00	332	9,802.01 – 9,828.00	378	10,998.01 – 11,024.00	424
8,632.01 – 8,658.00	333	9,828.01 – 9,854.00	379	11,024.01 – 11,050.00	425
8,658.01 – 8,684.00	334	9,854.01 – 9,880.00	380	11,050.01 – 11,076.00	426
8,684.01 – 8,710.00	335	9,880.01 – 9,906.00	381	11,076.01 – 11,102.00	427
8,710.01 – 8,736.00	336	9,906.01 – 9,932.00	382	11,102.01 – 11,128.00	428
8,736.01 – 8,762.00	337	9,932.01 – 9,958.00	383	11,128.01 – 11,154.00	429
8,762.01 – 8,788.00	338	9,958.01 – 9,984.00	384	11,154.01 – 11,180.00	430
8,788.01 – 8,814.00	339	9,984.01 – 10,010.00	385	11,180.01 – 11,206.00	431
8,814.01 – 8,840.00	340	10,010.01 – 10,036.00	386	11,206.01 – 11,232.00	432
8,840.01 – 8,866.00	341	10,036.01 – 10,062.00	387	11,232.01 – 11,258.00	433
8,866.01 – 8,892.00	342	10,062.01 – 10,088.00	388	11,258.01 – 11,284.00	434
8,892.01 – 8,918.00	343	10,088.01 – 10,114.00	389	11,284.01 – 11,310.00	435
8,918.01 – 8,944.00	344	10,114.01 – 10,140.00	390	11,310.01 – 11,336.00	436
8,944.01 – 8,970.00	345	10,140.01 – 10,166.00	391	11,336.01 – 11,362.00	437
8,970.01 – 8,996.00	346	10,166.01 – 10,192.00	392	11,362.01 – 11,388.00	438
8,996.01 – 9,022.00	347	10,192.01 – 10,218.00	393	11,388.01 – 11,414.00	439
9,022.01 – 9,048.00	348	10,218.01 – 10,244.00	394	11,414.01 – 11,440.00	440
9,048.01 – 9,074.00	349	10,244.01 – 10,270.00	395	11,440.01 – 11,466.00	441
9,074.01 – 9,100.00	350	10,270.01 – 10,296.00	396	11,466.01 – 11,492.00	442
9,100.01 – 9,126.00	351	10,296.01 – 10,322.00	397	11,492.01 – 11,518.00	443
9,126.01 – 9,152.00	352	10,322.01 – 10,348.00	398	11,518.01 – 11,544.00	444
9,152.01 – 9,178.00	353	10,348.01 – 10,374.00	399	11,544.01 – 11,570.00	445
9,178.01 – 9,204.00	354	10,374.01 – 10,400.00	400	11,570.01 – 11,596.00	446
9,204.01 – 9,230.00	355	10,400.01 – 10,426.00	401	11,596.01 – 11,622.00	447
9,230.01 – 9,256.00	356	10,426.01 – 10,452.00	402	11,622.01 – 11,648.00	448
9,256.01 – 9,282.00	357	10,452.01 – 10,478.00	403	11,648.01 – 11,674.00	449
9,282.01 – 9,308.00	358	10,478.01 – 10,504.00	404	11,674.01 – and over	450
9,308.01 – 9,334.00	359	10,504.01 – 10,530.00	405		
9,334.01 – 9,360.00	360	10,530.01 – 10,556.00	406		
9,360.01 – 9,386.00	361	10,556.01 – 10,582.00	407		

# How to Get Help

## Online

- To learn more about EDD services and programs, visit [EDD](http://edd.ca.gov) online (edd.ca.gov).
- To ask us a question, access your UI Online or SDI account visit [Ask EDD](http://askedd.edd.ca.gov) (askedd.edd.ca.gov).
- To find your nearest AJCC, visit the [Office Locator](http://edd.ca.gov/en/Office_Locator) online (edd.ca.gov/en/Office\_Locator).

## Phone

All our phone numbers are toll free. For relay service, provide one of the numbers below to the operator.

### Unemployment Insurance

EDD staff are available Monday through Friday between 8 a.m. and 5 p.m. (Pacific Time), except on state holidays.

English	1-800-300-5616	Mandarin	1-866-303-0706
Spanish	1-800-326-8937	Vietnamese	1-800-547-2058
Armenian	1-855-528-1518	Tagalog	1-866-395-1513
Cantonese	1-800-547-3506	TTY	1-800-815-9387
Korean	1-844-660-0877		

### Disability Insurance

EDD staff are available Monday through Friday between 8 a.m. and 5 p.m. (Pacific Time), except on state holidays.

English	1-800-480-3287
Spanish	1-866-658-8846
TTY	1-800-563-2441

### Paid Family Leave

EDD staff are available Monday through Friday between 8 a.m. and 5 p.m. (Pacific Time), except on state holidays.

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



**STATE OF CALIFORNIA**

**LABOR AND WORKFORCE DEVELOPMENT AGENCY**

**EMPLOYMENT DEVELOPMENT DEPARTMENT**

This *For Your Benefit: California's Programs for the Unemployed* (DE 2320) publication can be viewed, printed, and ordered online by visiting [Online Forms and Publications](https://forms.edd.ca.gov/forms) ([forms.edd.ca.gov/forms](https://forms.edd.ca.gov/forms)).

The EDD is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities.

Disclaimer: If you opted out of receiving paper forms, it may still be necessary for the EDD to send some documents via U.S. mail.



## About Paid Family Leave

Paid Family Leave program was created for the moments that matter. Benefits are available to care for a seriously ill family member, to bond with a new child, or participate in a qualifying military event.

## Facts About Paid Family Leave

- Provides up to eight weeks of partial-wage-replacement benefits. Leave doesn't have to be taken all at once.
- Provides approximately 70 to 90 percent of your weekly salary.
- Funded through your State Disability Insurance tax withholding, noted as "CASDI" on paystubs, or a qualifying voluntary plan paid into in the past 5 to 18 months.
- To bond with a new child, leave can be taken anytime within the first 12 months of a child entering your family.
- Citizenship and immigration status do not affect eligibility.

## What if My Claim Is Denied?

If your claim is denied, you have the right to:

- Know the reason for denial.
- Appeal decisions about your eligibility for benefits. Visit [Appeals](https://edd.ca.gov/en/Disability/Appeals) (edd.ca.gov/en/Disability/Appeals) for more information.

All claim information is confidential except for purposes allowed by law.



### Paid Family Leave

Be there for the moments that matter.

### PFL Phone Number

Our toll-free number is **1-877-238-4373**. Representatives are available Monday through Friday from 8 a.m. to 5 p.m., except on holidays. After a brief message, you must select a language.

- Press 1 for English
- Press 2 for Spanish
- Press 3 for All Other Languages. Interpreter services are available free of charge.

### TTY Phone Number

Our toll-free number is **1-880-445-1312**.

For more information, visit [State Disability Insurance](https://edd.ca.gov/en/Disability/Contact_SDI) (edd.ca.gov/en/Disability/Contact\_SDI)

For more information, visit [Paid Family Leave](https://edd.ca.gov/PaidFamilyLeave) (edd.ca.gov/PaidFamilyLeave).

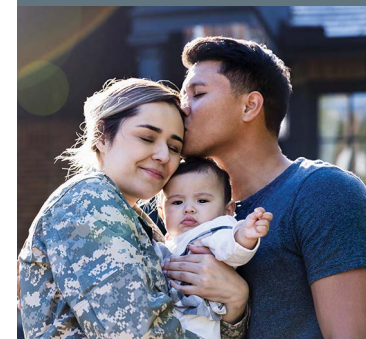
The EDD is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Requests for services, aids, and/or alternate formats need to be made by calling 1-866-490-8879 (voice). TTY users, please call the California Relay Service at 711.



Paid Family Leave



Helping Californians be present for the moments that matter.





## Do I Qualify for Paid Family Leave?

To qualify for Paid Family Leave benefits, you must:

- Take time off from work to care for a seriously ill family member, to bond with a new child or to participate in a qualifying military event.
- Be covered by State Disability Insurance or a voluntary plan in lieu of State Disability Insurance.
- Have earned at least \$300 in the past 5 to 18 months.
- Submit your claim no later than 41 days after you begin your family leave. Do not file before your first day of leave.

## How Are Benefit Amounts Calculated?

Benefits are 70 to 90 percent of your highest quarterly earnings 5 to 18 months before your claim begins.

Estimate your benefits at [Disability Insurance and Paid Family Leave Calculator](http://edd.ca.gov/PFL_Calculator) (edd.ca.gov/PFL\_Calculator).



## Does Paid Family Leave Provide Job Protection?

Paid Family Leave does not provide job protection. Job protection may be provided if you qualify under other laws:

- Federal [Family and Medical Leave Act](http://dol.gov/agencies/whd/fmla) (dol.gov/agencies/whd/fmla).
- California Family Rights Act. [Civil Rights Department](http://calcivilrights.ca.gov) (calcivilrights.ca.gov).

Notify your employer of your plan to take leave and the reason for taking leave according to your company's policy.

## How Do I Apply for Benefits?

You can apply for Paid Family Leave benefits at [myEDD](http://myEDD) (myedd.edd.ca.gov).

To file by mail, you must complete and submit a *Claim for Paid Family Leave (PFL) Benefits* (DE 2501F) form. Learn more at [File a Paid Family Leave Claim by Mail](http://File_a_Paid_Family_Leave_Claim_by_Mail) (edd.ca.gov/en/disability/How\_to\_File\_a\_PFL\_Claim\_by\_Mail).

## Caregiving Claims

Provide medical certification for your seriously ill family member who requires your care. This certification needs to be from their licensed health professional. You must also provide information about the family member you are caring for and their signature.

## Bonding Claims

Provide documents that show your relationship to your child. This can be a copy of your child's birth certificate, adoptive placement agreement, or foster care placement record.

If you are currently receiving pregnancy-related Disability Insurance benefits, it is not necessary to request a Paid Family Leave claim form. The form to file for bonding will be sent through your [myEDD](http://myEDD) (myedd.edd.ca.gov) account or by mail when your pregnancy-related disability claim ends.

## Military Assist Claims

Military assist claims require two types of supporting documents. This can be proof of covered active duty or call to covered active duty and documentation of the qualifying event.

## Voluntary Plans

If you are covered by a voluntary plan, contact your employer for information about your coverage and instructions on how to apply for benefits.



Civil Rights  
Department  
STATE OF CALIFORNIA

# SEXUAL HARASSMENT

## THE FACTS

Sexual harassment is a form of discrimination based on sex/gender (including pregnancy, childbirth, or related medical conditions), gender identity, gender expression, or sexual orientation. Individuals of any gender can be the target of sexual harassment. Unlawful sexual harassment does not have to be motivated by sexual desire. Sexual harassment may involve harassment by a person of the same gender, regardless of either person's sexual orientation or gender identity.

## THERE ARE TWO TYPES OF SEXUAL HARASSMENT

1. *"Quid pro quo"* (Latin for "this for that") sexual harassment is when someone conditions a job, promotion, or other work benefit on your submission to sexual advances or other conduct based on sex.
2. *"Hostile work environment"* sexual harassment occurs when unwelcome comments or conduct based on sex unreasonably interferes with your work performance or creates an intimidating, hostile, or offensive work environment. You may experience sexual harassment even if the offensive conduct was not aimed directly at you.

The harassment must be severe or pervasive to be unlawful. A single act of harassment may be sufficiently severe to be unlawful.

## BEHAVIORS THAT MAY BE SEXUAL HARASSMENT

1. Unwanted sexual advances
2. Offering employment benefits in exchange for sexual favors
3. Leering; gestures; or displaying sexually suggestive objects, pictures, cartoons, or posters
4. Derogatory comments, epithets, slurs, or jokes
5. Graphic comments, sexually degrading words, or suggestive or obscene messages or invitations
6. Physical touching or assault, as well as impeding or blocking movements

# SEXUAL HARASSMENT



Civil Rights  
Department  
STATE OF CALIFORNIA

Actual or threatened retaliation for rejecting advances or complaining about harassment is also unlawful.

Employees or job applicants who believe that they have been sexually harassed or retaliated against may file a complaint of discrimination with CRD within three years of the last act of harassment or retaliation. CRD serves as a neutral fact-finder and attempts to help the parties voluntarily resolve disputes.

If CRD finds sufficient evidence to establish that discrimination occurred and settlement efforts fail, the Department may file a civil complaint in state or federal court to address the causes of the discrimination and on behalf of the complaining party. CRD may seek court orders changing the employer's policies and practices, punitive damages, and attorney's fees and costs if it prevails in litigation. Employees can also pursue the matter through a private lawsuit in civil court after a complaint has been filed with CRD and a Right-to-Sue Notice has been issued.

## EMPLOYER RESPONSIBILITY & LIABILITY

All employers, regardless of the number of employees, are covered by the harassment provisions of California law. Employers are liable for harassment by their supervisor or agents. Employees accused of harassment, including both supervisory and non-supervisory personnel, may be held personally liable for harassment or for aiding and abetting harassment. The law requires employers to take reasonable steps to prevent harassment. If an employer fails to take such steps, that employer can be held liable for the harassment. In addition, an employer may be liable for the harassment by a non-employee (for example, a client or customer) of an employee, applicant, or person providing services for the employer. An employer will only be liable for this form of harassment if it knew or should have known of the harassment, and failed to take immediate and appropriate corrective action.

Employers have an affirmative duty to take reasonable steps to prevent and promptly correct discriminatory and harassing conduct, and to create a workplace free of harassment.

A program to eliminate sexual harassment from the workplace is not only required by law, but it is the most practical way for an employer to avoid or limit liability if harassment occurs.

## ALL EMPLOYERS MUST TAKE THE FOLLOWING ACTIONS TO PREVENT HARASSMENT AND CORRECT IT WHEN IT OCCURS:

1. Distribute copies of this document or an alternative writing that complies with Government Code 12950. This document may be duplicated in any quantity.
2. Post a copy of the CRD employment poster "California Law Prohibits Workplace Discrimination and Harassment."
3. Develop a harassment, discrimination, and retaliation prevention policy in accordance with 2 CCR 11023.

*The policy must:*

- Be in writing.
- List all protected groups under the FEHA.
- Indicate that the law prohibits coworkers and third parties, as well as supervisors and managers with whom the employee comes into contact, from engaging in prohibited harassment.
- Create a complaint process that ensures confidentiality to the extent possible; a timely response; an impartial and timely investigation by qualified personnel; documentation and tracking for reasonable progress; appropriate options for remedial actions and resolutions; and timely closures.
- Provide a complaint mechanism that does not require an employee to complain directly to their immediate supervisor.
- That complaint mechanism must include, but is not limited to including: provisions for direct communication, either orally or in writing, with a designated company representative; and / or a complaint hotline; and/ or access to an ombudsperson; and/

or identification of CRD and the United States Equal Employment Opportunity Commission as additional avenues for employees to lodge complaints.

- Instruct supervisors to report any complaints of misconduct to a designated company representative, such as a human resources manager, so that the company can try to resolve the claim internally. Employers with 50 or more employees are required to include this as a topic in mandated sexual harassment prevention training (see 2 CCR 11024).
  - Indicate that when the employer receives allegations of misconduct, it will conduct a fair, timely, and thorough investigation that provides all parties appropriate due process and reaches reasonable conclusions based on the evidence collected.
  - Make clear that employees shall not be retaliated against as a result of making a complaint or participating in an investigation.
4. Distribute its harassment, discrimination, and retaliation prevention policy by doing one or more of the following:
    - Printing the policy and providing a copy to employees with an acknowledgment form for employees to sign and return.
    - Sending the policy via email with an acknowledgment return form.
    - Posting the current version of the policy on a company intranet with a tracking system to ensure all employees have read and acknowledged receipt of the policy.
    - Discussing policies upon hire and/or during a new hire orientation.
    - Using any other method that ensures employees received and understand the policy.
  5. If the employer's workforce at any facility or establishment contains ten percent or more of persons who speak a language other than English as their spoken language, that employer shall translate the harassment, discrimination, and retaliation policy into every language spoken by at least ten percent of the workforce.
  6. In addition, employers who do business in California and employ 5 or more part-time or full-time employees must provide at least one hour of training regarding the prevention of sexual harassment, including harassment based on gender identity, gender expression, and sexual orientation, to each non-supervisory employee; and two hours of such training to each supervisory employee. All employees must be trained by January 1, 2023. New supervisory employees must be trained within six months of assuming their supervisory position, and new non-supervisory employees must be trained within six months of hire. Employees must be retrained once every two years. Please see Gov. Code 12950.1 and 2 CCR 11024 for further information.

## CIVIL REMEDIES

1. Damages for emotional distress from each employer or person in violation of the law
2. Hiring or reinstatement
3. Back pay or promotion
4. Changes in the policies or practices of the employer

To schedule an appointment, contact the Communication Center below.

If you have a disability that requires a reasonable accommodation, the CRD can assist you by scribing your intake by phone or, for individuals who are Deaf or Hard of Hearing or have speech disabilities, through the California Relay Service (711), or you can contact us below.

## TO FILE A COMPLAINT

Civil Rights Department  
[calcivilrights.ca.gov/complaintprocess](http://calcivilrights.ca.gov/complaintprocess)  
Toll Free: 800.884.1684 / TTY: 800.700.2320  
California Relay Service (711)

Have a disability that requires a reasonable accommodation?  
CRD can assist you with your complaint.

# SURVIVORS OF VIOLENCE AND FAMILY MEMBERS OF VICTIMS RIGHT TO LEAVE AND ACCOMMODATIONS

## NOTICE



Civil Rights  
Department  
STATE OF CALIFORNIA

**Note:** Employers must provide this information to workers when hired, annually, upon request, and to any worker who informs the employer that they are a victim of violence or the family member of a victim of violence. Victims of violence include victims of domestic violence, sexual assault, stalking, violent threats, acts involving the use or presence of a dangerous weapon, or any violence causing injury.

## YOUR RIGHT TO TAKE TIME OFF

- You have the right to take time off work for jury service or to appear in court as a witness to comply with a subpoena or court order. All employees have this right, no matter the size of the employer.
- If you are a victim of violence, you have the right to take time off work to get relief (like a restraining order) to protect you or your child's health, safety, or welfare. All employees have this right, no matter the size of the employer.
- If you are a victim of violence or the family member of a victim of violence, and your employer has 25 or more workers, you have the right to take time off work for any of the following reasons:
  - To take part in safety planning or other actions to help keep you or your family member safe from future violence
  - To prepare for, participate in, or attend civil, administrative, or criminal legal proceedings, such as a court hearing, related to the violence
  - To seek, get, or provide childcare or care to a dependent adult if the care is necessary to keep the child or adult safe after an act of violence
  - To care for a family member recovering from injuries caused by violence
  - To get, or help a family member get, the following services relating to the violence: civil or criminal legal services; a restraining order or other relief; medical attention for injuries; services from a domestic violence shelter or program, rape crisis center, or victim services organization or agency; psychological counseling; mental health services; or housing, including relocating, securing temporary or permanent housing, and enrolling children in a new school or childcare
- If you are a victim of violence or the family member of a deceased victim of violence, you can take up to 12 weeks off work for any of these reasons. If you are the family member of a living victim of violence but are not yourself a victim, you may take up to 10 days off work for these reasons, with the exception of relocation, for which you can take up to five days.
- You may use available vacation, paid time off, personal leave, or paid sick leave to take time off for any of the reasons described in this notice.
- You must give your employer advance notice before taking time off, unless it is not possible. If you do not give advance notice, your employer cannot discipline you if you provide documentation to the employer within a reasonable time supporting the reason for your absence.

## YOUR RIGHT TO CONFIDENTIALITY

- If you are a victim or the family member of a victim, your employer must keep information about your request for time off or reasonable accommodation confidential unless federal or state law requires disclosure, or disclosure is necessary to protect your safety at work. If your employer plans to disclose information about you or your circumstances, your employer must tell you in advance.

# SURVIVORS OF VIOLENCE AND FAMILY MEMBERS OF VICTIMS RIGHT TO LEAVE AND ACCOMMODATIONS



Civil Rights  
Department  
STATE OF CALIFORNIA

## NOTICE

### YOUR RIGHT TO REASONABLE ACCOMMODATION FOR YOUR SAFETY

- If you or your family member is a victim of violence, you have the right to ask for a reasonable accommodation to make sure you are safe at work. Your employer must work with you to see what changes can be made.
- Your employer can ask you for a statement certifying that your request is related to being a victim or the family member of a victim.

### YOUR RIGHT TO BE FREE FROM RETALIATION AND DISCRIMINATION

Your employer cannot discipline you, treat you differently, or fire you because:

- You are a survivor or the family member of a victim or survivor of domestic violence, sexual assault, stalking, violent threats, or violence causing injury.
- You asked for time off work to recover from or get help related to the violence.
- You asked for accommodations to make sure you are safe at work.

### YOU MAY ALSO HAVE PROTECTIONS UNDER OTHER LAWS:

- **Wage Replacement:** You may be eligible for wage replacement if you are unable to work because of your health or because you need to care for a family member with a serious health condition. **State Disability Insurance (SDI)** provides short-term wage replacement when you are temporarily disabled from working. **Paid Family Leave (PFL)** provides short-term wage replacement so you can care for a seriously ill family member, among other reasons. Learn more or file a claim for wage replacement by contacting the Employment Development Department (EDD) online (<https://edd.ca.gov/>) or by phone at 800-480-3287 (for SDI) or 877-238-4373 (for PFL).

- **Family and medical leave:** Under the California Family Rights Act, you may have the right to take time off work for your own or a family member's serious health condition or because of the birth, adoption, or foster care placement of a child. Learn more about family and medical leave by visiting [bit.ly/CRD-leave](http://bit.ly/CRD-leave). You can file a complaint with CRD if you believe your rights have been violated.
- **Bereavement leave:** Bereavement leave allows eligible employees to take up to five days off work within three months of the family member's death. Leave does not need to be taken all at once. Learn more about bereavement leave protections by visiting [bit.ly/CRD-Bereavement](http://bit.ly/CRD-Bereavement). You can file a complaint with CRD if you believe your rights have been violated.
- **Leave to attend court for certain crimes:** If you are a victim of certain crimes or the family member of a victim of certain crimes, you have the right to take time off work to attend related court proceedings under Labor Code sections 230.2 and 230.5. You can learn more information or file a complaint with the Labor Commissioner's Office within the Department of Industrial Relations by visiting [bit.ly/DIR-Retaliation](http://bit.ly/DIR-Retaliation).

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### TO FILE A COMPLAINT

Contact the Civil Rights Department if you have questions about your rights or to file a complaint:

#### Civil Rights Department

Online at <http://ccrs.calcivilrights.ca.gov/s/>

By mail at 651 Bannon Street, Suite 200,  
Sacramento, CA 95811

By calling 800-884-1684 (voice), 800-700-2320  
(TTY), or California's Relay Service at 711

For more information about your right to leave and accommodations as a victim or the family member of a victim, visit [bit.ly/CRD-Survivors-of-Violence-FAQ](http://bit.ly/CRD-Survivors-of-Violence-FAQ)

# YOUR RIGHTS AND OBLIGATIONS AS A PREGNANT EMPLOYEE



Civil Rights  
Department  
STATE OF CALIFORNIA

**IF YOU ARE PREGNANT, HAVE A PREGNANCY-RELATED MEDICAL CONDITION, OR ARE RECOVERING FROM CHILDBIRTH, PLEASE READ THIS NOTICE.**

## OBLIGATIONS OF EMPLOYERS WITH FIVE OR MORE EMPLOYEES

- Reasonably accommodate your medical needs related to pregnancy, childbirth, or related conditions (such as temporarily modifying your work duties, providing you with a stool or chair, or allowing more frequent breaks);
- Transfer you to a less strenuous or hazardous position (if one is available) or duties if medically needed because of your pregnancy;
- Provide you with pregnancy disability leave (PDL) of up to four months (the working days you normally would work in one-third of a year or 17 1/3 weeks) and return you to your same job when you are no longer disabled by your pregnancy or, in certain instances, to a comparable job. Taking PDL does not protect you from non-leave related employment actions, such as a layoff;
- Provide a reasonable amount of break time and use of a room or other location close to the employee's work area to express breast milk in private as set forth in the Labor Code; and
- Never discriminate, harass, or retaliate on the basis of pregnancy.  
*Employers with one or more employees must not harass employees on the basis of pregnancy.*

## PREGNANCY DISABILITY LEAVE

- Although PDL can last up to four months, you are entitled to take PDL only for the period of time during which you are disabled by pregnancy, a pregnancy-related medical condition, or childbirth. Your health care provider determines how much time you need.
- After you inform your employer that you need to take PDL, your employer must guarantee in writing that you can return to work in your same or a comparable position if you request a written guarantee.
- Your employer may require you to submit written medical certification from your health care provider supporting the need for your leave.
- PDL may include, but is not limited to, additional or more frequent breaks, time for prenatal or postnatal medical appointments, and doctor-ordered bed rest, and covers conditions such as severe morning sickness, gestational diabetes, pregnancy-induced hypertension, preeclampsia, recovery from childbirth or loss or end of pregnancy and/or post-partum depression.
- PDL does not need to be taken all at once but can be taken on an as-needed basis as required by your health care provider, including intermittent leave or a reduced work schedule.
- Your leave will be paid or unpaid depending on your employer's policy for other types of medical leave. You may also be eligible for state disability insurance, administered by the California Employment Development Department.
- You may choose to use any vacation or other paid time off during your PDL.
- Your employer may require or you may choose to use any available sick leave during your PDL.
- Your employer is required to continue your group health coverage during your PDL at the same level and under the same conditions that coverage would have been provided if you had continued in employment continuously for the duration of your leave.
- Taking PDL may impact certain benefits and your seniority date; please contact your employer for details.

## YOUR OBLIGATIONS AS AN EMPLOYEE

- Give your employer reasonable notice. To receive a reasonable accommodation, obtain a transfer, or take PDL, you must give your employer sufficient notice for your employer to make appropriate plans. Sufficient notice means 30 days advance notice if the need for the reasonable accommodation, transfer, or PDL is foreseeable, or as soon as practicable if the need is an emergency or unforeseeable.
- Provide a written medical certification from your health care provider. Except in a medical emergency where there is no time to obtain it, your employer may require you to provide a written medical certification from your health care provider of the medical need for your reasonable accommodation, transfer, or PDL. If the need is an emergency or unforeseeable, you must provide this certification within the time frame your employer requests, unless it is not practicable for you to do so under the circumstances despite your diligent, good faith efforts. *Your employer must give you at least 15 calendar days to submit the certification.* Ask if your employer has a copy of a medical certification form for your health care provider to complete.
- If you do not give your employer notice or written medical certification of your medical need (if required), either in advance or as soon as practicable, your employer may be justified in delaying your reasonable accommodation, transfer, or PDL.

## ADDITIONAL LEAVE UNDER THE CALIFORNIA FAMILY RIGHTS ACT (CFRA)

Under CFRA you may have a right to take family care or medical leave (CFRA leave) to bond with a new child. If you gave birth to the child, you would generally take CFRA bonding leave after taking PDL. CFRA leave may be up to 12 workweeks in a 12-month period for the birth, adoption, or foster care placement of your child\*. You must take it within one year of these events.

In addition to taking leave to bond with a new child, you can also take CFRA leave because of your own serious health condition (not related to pregnancy) or that of your child, parent\*\*, spouse, domestic partner, grandparent, grandchild, sibling, or "designated person" related by blood or with whom you have a family-like relationship.

You are eligible for CFRA leave if you have more than 12 months of service with an employer, have worked at least 1,250 hours in the 12-month period before the date you want to begin your leave, and your employer has five or more employees.

Your employer may, but is not required to, pay you while you are out on CFRA leave, but they must allow you to use any accrued paid time-off while on CFRA leave. You may also be eligible for benefits administered by the Employment Development Department, including state disability insurance (for your own health condition) or Paid Family Leave (for bonding with a new child or for caring for a family member with a serious health condition). For more information, visit [edd.ca.gov/disability](http://edd.ca.gov/disability)

If you are improperly denied pregnancy or childbirth-related reasonable accommodations or protected leave under PDL or CFRA, file a complaint with the Civil Rights Department (CRD).

### TO FILE A COMPLAINT

[calcivilrights.ca.gov/complaintprocess](http://calcivilrights.ca.gov/complaintprocess)

Toll Free: 800.884.1684 / TTY: 800.700.2320

California Relay Service (711)

Have a disability that requires a reasonable accommodation? CRD can assist you with your complaint.

*For translations of this poster, visit:*

[www.civilrights.ca.gov/posters/required](http://www.civilrights.ca.gov/posters/required)

\*"Child" means a biological, adopted, or foster child, a stepchild, a legal ward, or a child of an employee or the employee's domestic partner, or a person to whom the employee stands in loco parentis (in place of a parent).

\*\*"Parent" includes a biological, foster, or adoptive parent, a parent-in-law, a stepparent, a legal guardian, or other person who stood in loco parentis to the employee when the employee was a child.



Civil Rights  
Department  
STATE OF CALIFORNIA

# CALIFORNIA LAW PROHIBITS WORKPLACE DISCRIMINATION & HARASSMENT

**The California Civil Rights Department (CRD) enforces laws that protect you from illegal discrimination and harassment in employment based on your actual or perceived:**

- **ANCESTRY**
- **AGE** (40 and above)
- **COLOR**
- **DISABILITY** (physical, developmental, mental health/psychiatric, and HIV/AIDS)
- **GENETIC INFORMATION**
- **GENDER EXPRESSION**
- **GENDER IDENTITY**
- **MARITAL STATUS**
- **MEDICAL CONDITION** (genetic characteristics, cancer, or a record or history of cancer)
- **MILITARY OR VETERAN STATUS**
- **NATIONAL ORIGIN** (includes language restrictions and possession of a driver's license issued to undocumented immigrants)
- **RACE** (includes traits associated with race, such as hair texture and hairstyle)
- **RELIGION** (includes religious dress and grooming practices)
- **REPRODUCTIVE HEALTH DECISIONMAKING**
- **SEX/GENDER** (includes pregnancy, childbirth, breastfeeding and/or related medical conditions)
- **SEXUAL ORIENTATION**



# CALIFORNIA LAW PROHIBITS WORKPLACE DISCRIMINATION & HARASSMENT

## THE FAIR EMPLOYMENT AND HOUSING ACT PROTECTS YOUR CIVIL RIGHTS AT WORK.

### HARASSMENT

1. The law prohibits harassment of employees, applicants, unpaid interns, volunteers, and independent contractors by any person. This includes a prohibition against harassment based on any characteristic listed in this poster, including sexual harassment. The law prohibits harassment based on a single protected characteristic or a combination of two or more protected characteristics.
2. All employers must take reasonable steps to prevent all forms of harassment, and they must provide each employee with information about the illegal nature of sexual harassment and available legal remedies.
3. Employers with five or more employees and public employers must train their employees regarding the prevention of sexual harassment, including harassment based on gender identity, gender expression, and sexual orientation.

### DISCRIMINATION/REASONABLE ACCOMMODATIONS

1. California law prohibits employers with five or more employees and public employers from discriminating based on any protected characteristic listed in this poster when making decisions about hiring, promotion, pay, benefits, terms of employment, layoffs, and other aspects of employment. The law prohibits discrimination based on a single protected characteristic or a combination of two or more protected characteristics.
2. Employers cannot limit or prohibit the use of any language in any workplace unless justified by business necessity. The employer must notify employees of the language restriction and consequences for violation.
3. Employers cannot discriminate against an applicant or employee because they possess a California driver's license or ID issued to an undocumented person.
4. Employers must reasonably accommodate the religious beliefs and practices of an employee, unpaid intern, or job applicant, including the wearing of clothing, jewelry, and facial or body hair that are part of an individual's observance of their religious beliefs.
5. Employers must reasonably accommodate an employee or job applicant with a disability to enable them to perform the essential functions of a job.
6. Employers cannot discriminate or retaliate against an employee because of their status, or because of their family member's status, as a victim of domestic violence, sexual assault, stalking, and certain other types of violence – as long as the employer knows of this status. Employers must also provide such employees safety-related reasonable accommodations.

### ADDITIONAL PROTECTIONS

California law offers additional protections to those who work for employers with five or more employees. Some exceptions may apply. These additional protections include:

1. Specific protections and hiring procedures for people with criminal histories who are looking for employment protections against discrimination based on an employee or job applicant's use of cannabis off the job and away from the workplace

2. Up to 12 weeks of job-protected leave to eligible employees to care for themselves, a family member (child of any age, spouse, domestic partner, parent, parent-in-law, grandparent, grandchild, sibling) or a designated person (with blood or family-like relationship to employee); to bond with a new child; or for certain urgent military needs
3. Up to five days of job-protected bereavement leave within three months of the death of a family member (child, spouse, parent, sibling, grandparent, grandchild, domestic partner, or parent-in-law)
4. Up to four months of job-protected leave to employees disabled because of pregnancy, childbirth, or a related medical condition, as well as the right to reasonable accommodations, on the advice of their health care provider, related to their pregnancy, childbirth, or a related medical condition
5. Up to five days of job-protected leave following a reproductive loss event (failed adoption, failed surrogacy, miscarriage, stillbirth, or unsuccessful assisted reproduction)
6. Protections for an employee who takes time off work to serve on a jury, if they have given reasonable notice to the employer, or to testify in court
7. Protections for an employee who takes time off work to go to court or seek legal relief (such as a restraining order) after they are the victim of a crime or certain types of violence
8. Protections against retaliation when a person opposes, reports, or assists another person to oppose unlawful discrimination, including filing an internal complaint or a complaint with CRD

### REMEDIES/FILING A COMPLAINT

1. The law provides remedies for individuals who experience prohibited discrimination, harassment, or retaliation in the workplace. These remedies can include hiring, front pay, back pay, promotion, reinstatement, cease-and-desist orders, expert witness fees, reasonable attorney's fees and costs, punitive damages, and emotional distress damages.
2. If you believe you have experienced discrimination, harassment, or retaliation, you may file a complaint with CRD. Independent contractors and volunteers: If you believe you have been harassed, you may file a complaint with CRD.
3. Complaints must be filed within three years of the last act of discrimination/harassment/retaliation. For those who are under the age of 18, complaints must be filed within three years after the last act of discrimination/harassment/retaliation or one year after their eighteenth birthday, whichever is later.

**If you have been subjected to discrimination, harassment, or retaliation at work, file a complaint with the Civil Rights Department (CRD).**

### TO FILE A COMPLAINT

Civil Rights Department  
[calcivilrights.ca.gov/complaintprocess](http://calcivilrights.ca.gov/complaintprocess)  
Toll Free: 800.884.1684 / TTY: 800.700.2320  
California Relay Service (711)

Have a disability that requires a reasonable accommodation?  
CRD can assist you with your complaint.

The Fair Employment and Housing Act is codified at Government Code sections 12900 -12999. The regulations implementing the Act are at Code of Regulations, title 2, division 4.1

Government Code section 12950 and California Code of Regulations, title 2, section 11023, require all employers to post this document. It must be conspicuously posted in hiring offices, on employee bulletin boards, in employment agency waiting rooms, union halls, and other places employees gather. Any employer whose workforce at any facility or establishment consists of more than 10% of non-English speaking persons must also post this notice in the appropriate language or languages.

# FAMILY CARE & MEDICAL LEAVE & PREGNANCY DISABILITY LEAVE



Civil Rights  
Department  
STATE OF CALIFORNIA



**Under California law, an employee may have the right to take job-protected leave to care for their own serious health condition or a family member with a serious health condition, or to bond with a new child (via birth, adoption, or foster care). California law also requires employers to provide job-protected leave and accommodations to employees who are disabled by pregnancy, childbirth, or a related medical condition.**

Under the California Family Rights Act of 1993 (CFRA), many employees have the right to take job-protected leave, which is leave that will allow them to return to their job or a similar job after their leave ends. This leave may be up to 12 work weeks in a 12-month period for:

- The employee's own serious health condition
- The serious health condition of a child, spouse, domestic partner, parent, parent-in-law, grandparent, grandchild, sibling, or someone else with a blood or family-like relationship with the employee ("designated person")
- The birth, adoption, or foster care placement of a child

If an employee takes leave for their own or a family member's serious health condition, leave may be taken on an intermittent or reduced work schedule when medically necessary, among other circumstances.

**Eligibility.** To be eligible for CFRA leave, an employee must have more than 12 months of service with their employer, have worked at least 1,250 hours in the 12-month period before the date they want to begin their leave, and their employer must have five or more employees.

**Pay and Benefits During Leave.** While the law guarantees only unpaid leave, some employers pay their employees during CFRA leave. In addition, employees may choose (or employers may require) use of accrued paid leave while taking CFRA leave in certain circumstances. Employees on CFRA leave may also be eligible for benefits administered by the Employment Development Department, including Paid Family Leave. For more information, visit [bit.ly/EDD-PFL](https://bit.ly/EDD-PFL).

Taking CFRA leave may impact certain employee benefits and an employee's seniority date. If employees want more information regarding eligibility for leave and/or the impact of the leave on seniority and benefits, they should contact their employer.

**Pregnancy Disability Leave.** When an employee is disabled by pregnancy, childbirth, or a related medical condition, the employee is entitled to take a pregnancy disability leave of up to four months, depending on their period(s) of actual disability. If the employee is also eligible for CFRA leave, they have the right to take both pregnancy disability leave and CFRA leave related to the birth of their child.

**Reinstatement.** Both CFRA leave and pregnancy disability leave guarantee reinstatement to the same position or, in certain instances, a comparable position at the end of the leave, subject to any defense allowed under the law.

**Notice.** When possible, employees must provide 30 days' advance notice before taking leave for foreseeable event, such as the expected the birth of a child or a planned medical procedure. For unforeseeable events, employees should notify their employers, at least verbally, as soon as they learn of the need for the leave. Failing to provide notice is grounds for, and may result in, deferral of the requested leave until the employee complies with this notice policy.

**Certification.** Employers may require certification from an employee's health care provider before allowing leave for pregnancy disability or for the employee's own serious health condition. Employers may also require certification from the health care provider of the employee's family member, including a designated person, who has a serious health condition, before granting leave to take care of that family member.

Want to learn more?

Visit: [calcivilrights.ca.gov/family-medical-pregnancy-leave/](https://calcivilrights.ca.gov/family-medical-pregnancy-leave/)

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If you have been subjected to discrimination, harassment, or retaliation at work, or have been improperly denied protected leave, file a complaint with the Civil Rights Department (CRD).

## TO FILE A COMPLAINT

**Civil Rights Department**  
[calcivilrights.ca.gov/complaintprocess](https://calcivilrights.ca.gov/complaintprocess)

Toll Free: 800.884.1684 / TTY: 800.700.2320

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# THE RIGHTS OF EMPLOYEES WHO ARE TRANSGENDER OR GENDER NONCONFORMING

**CALIFORNIA LAW PROTECTS TRANSGENDER AND GENDER NONCONFORMING PEOPLE FROM DISCRIMINATION, HARASSMENT, AND RETALIATION AT WORK. THESE PROTECTIONS ARE ENFORCED BY THE CIVIL RIGHTS DEPARTMENT (CRD).**

## THINGS YOU NEED TO KNOW

### 1. Does California law protect transgender and gender nonconforming employees from employment discrimination?

Yes. All employees, job applicants, unpaid interns, volunteers, and contractors are protected from discrimination at work when based on a protected characteristic, such as their gender identity, gender expression, sexual orientation, race, or national origin. This means that private employers with five or more employees may not, for example, refuse to hire or promote someone because they identify as – or are perceived to identify as – transgender or non-binary, or because they express their gender in non-stereotypical ways.

Employment discrimination can occur at any time during the hiring or employment process. In addition to refusing to hire or promote someone, unlawful discrimination includes discharging an employee, subjecting them to worse working conditions, or unfairly modifying the terms of their employment because of their gender identity or gender expression.

### 2. Does California law protect transgender and gender nonconforming employees from harassment at work?

Yes. All employers are prohibited from harassing any employee, intern, volunteer, or contractor because of their gender identity or gender expression. For example, an employer can be liable if co-workers create a hostile work environment – whether in person or virtual – for an employee who is undergoing a gender transition. Similarly, an employer can be liable when customers or other third parties harass an employee because of their gender identity or expression, such as intentionally referring to a gender-nonconforming employee by the wrong pronouns or name.

### 3. Does California law protect employees who complain about discrimination or harassment in the workplace?

Yes. Employers are prohibited from retaliating against any employee who asserts their right under the law to be free from discrimination or harassment. For example, an employer commits unlawful retaliation when it responds to an employee making a discrimination complaint – to their supervisor, human resources staff, or CRD – by cutting their shifts.

### 4. If bathrooms, showers, and locker rooms are sex-segregated, can employees choose the one that is most appropriate for them?

Yes. All employees have a right to safe and appropriate restroom and locker room facilities. This includes the right to use a restroom or locker room that corresponds to the employee's gender identity, regardless of the employee's sex assigned at birth. In addition, where possible, an employer should provide an easily accessible, gender-neutral (or "all-gender"), single user facility for use by any employee. The use of single stall restrooms

and other facilities should always be a matter of choice. Employees should never be forced to use one, as a matter of policy or due to harassment.

### 5. Does an employee have the right to be addressed by the name and pronouns that correspond to their gender identity or gender expression, even if different from their legal name and gender?

Yes. Employees have the right to use and be addressed by the name and pronouns that correspond with their gender identity or gender expression. These are sometimes known as "chosen" or "preferred" names and pronouns. For example, an employee does not need to have legally changed their name or birth certificate, nor have undergone any type of gender transition (such as surgery), to use a name and/or pronouns that correspond with their gender identity or gender expression. An employer may be legally obligated to use an employee's legal name in specific employment records, but when no legal obligation compels the use of a legal name, employers and co-workers must respect an employee's chosen name and pronouns. For example, some businesses utilize software for payroll and other administrative purposes, such as creating work schedules or generating virtual profiles. While it may be appropriate for the business to use a transgender employee's legal name for payroll purposes when legally required, refusing or failing to use that person's chosen name and pronouns, if different from their legal name, on a shift schedule, nametag, instant messaging account, or work ID card could be harassing or discriminatory. CRD recommends that employers take care to ensure that each employee's chosen name and pronouns are respected to the greatest extent allowed by law.

### 6. Does an employee have the right to dress in a way that corresponds with their gender identity and gender expression?

Yes. An employer who imposes a dress code must enforce it in a non-discriminatory manner. This means that each employee must be allowed to dress in accordance with their gender identity and expression. While an employer may establish a dress code or grooming policy in accord with business necessity, all employees must be held to the same standard, regardless of their gender identity or expression.

### 7. Can an employer ask an applicant about their sex assigned at birth or gender identity in an interview?

No. Employers may ask non-discriminatory questions, such as inquiring about an applicant's employment history or asking for professional references. But an interviewer should not ask questions designed to detect a person's gender identity or gender transition history such as asking about why the person changed their name. Employers should also not ask questions about a person's body or whether they plan to have surgery.

Want to learn more?

Visit: <https://bit.ly/3hTG1EO>

## TO FILE A COMPLAINT

### Civil Rights Department

[calcivilrights.ca.gov/complaintprocess](http://calcivilrights.ca.gov/complaintprocess)

Toll Free: 800.884.1684 / TTY: 800.700.2320

California Relay Service (711)

Have a disability that requires a reasonable accommodation?  
CRD can assist you with your complaint.



**Employee Certificate of Receipt & Acknowledgement**

I, the undersigned employee, acknowledge that I have received and reviewed the following documents: Disability Insurance Provisions (DE 2515, Rev. 68, 1-22), Programs for the Unemployed (DE 2320, Rev. 67, 1-24), Paid Family Leave (DE 2511, Rev. 23, 5-25), Sexual Harassment Policy, Survivor's Right to Time Off Notice, Rights and Obligations as a Pregnant Employee, Workplace Discrimination and Harassment Policy, Family Care and Medical Leave Policy, and Rights of Transgender and Gender Nonconforming Employees.

I understand that I am responsible for reading and complying with the provisions outlined in these documents as a condition of my employment. By signing below, I confirm that I am aware of the behaviors prohibited by these policies and acknowledge that violations may result in disciplinary action, up to and including termination.

**Policy Receipt and Review**

I certify that I have read and agree to each of the following Policies by initialing in the space provided:

\_\_\_\_\_ **Disability Insurance Provisions** (DE 2515, Rev. 68, 1-22)

\_\_\_\_\_ **Programs for the Unemployed** (DE 2320, Rev. 67, 1-24)

\_\_\_\_\_ **Paid Family Leave** (DE 2511, Rev. 23, 5-25)

\_\_\_\_\_ **Sexual Harassment Policy**

\_\_\_\_\_ **Survivor's Right to Time Off Notice**

\_\_\_\_\_ **Rights and Obligations as a Pregnant Employee**

\_\_\_\_\_ **Workplace Discrimination and Harassment Policy**

\_\_\_\_\_ **Family Care and Medical Leave Policy**

\_\_\_\_\_ **Rights of Transgender and Gender Nonconforming Employees**

**Certification of Understanding and Compliance**

By my signature below, I further confirm:

1. Compliance: I understand my duty to comply with and abide by all policies.
2. Access: I know that copies of these policies are available to me at any time on hireupss.com in the "Employee Resources" section.
3. Clarification: I understand that if I have any questions or concerns about the policies, I can and should seek assistance from a representative of Hire Up before or after signing this document.
4. Copy: I understand that I may request and receive a copy of this signed Certificate of Receipt.

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Signature

Date

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Full Name