

## Applying for EI – Regular Benefits

The following step by step guide has been built to help you during a difficult time. We know there are lots of questions. We tried to apply ourselves so we knew what the experience would be like and to help out.

- 1. Visit <u>https://srv270.hrdc-drhc.gc.ca/AW/introduction?GoCTemplateCulture=en-CA</u> to apply. Note all applications are to be done online. You will not be able to speak with someone from Service Canada unless you already have already applied for EI and have an access code.
- 2. You do not need your ROE to start the application process. As soon as you have been given notice, you may apply!
- Reference codes relate to a work-share program or group termination of 50 or more employees. If these do not apply to you, select "no" for this question. Work sharing details are here <u>https://www.canada.ca/en/employment-social-development/services/work-sharing.html</u>, an application must be submitted 30 days prior to the requested start date.

	Reference Code
	Answers to fields and questions with an asterisk (*) are mandatory.
Ļ	<ul> <li>Are you part of a group of employees in an Apprenticeship program, a Work-sharing program, a group layoff situation (including layoffs due to a natural disaster), or the automotive industry AND were you given a reference code to submit with this application?</li> <li>Yes</li> <li>No</li> </ul> Previous Continue
	Date modified: 2019-03-08

## Select the benefit type you are applying.

- 4. If you are unable to work due to temporary or permanent layoff, select "regular benefits".
- 5. Select "sickness benefit" if you have COVID-19 or are in quarantine.
- 6. "Family care giver" benefits would apply if you are taking care of someone who is self-isolating due to COVID-19.



7. If you choose to self-isolate (and you could still work for your employer), Service Canada will determine if you are eligible for El benefits.

### Benefit Type

Answers to fields and questions with an asterisk (\*) are mandatory.

\* What type of benefits are you applying for?

- Regular benefits: you have lost your job (through no fault of your own) and you are available for and able to work, but can't find a job.
- Fishing benefits: you are a self-employed person engaged in fishing.
- Sickness benefits: you are unable to work due to illness, injury or quarantine. This option also allows you to receive sickness benefits prior to maternity benefits.
- Maternity benefits: you are pregnant or have recently given birth. This option also allows you to receive maternity followed by parental benefits.
- Parental benefits: you are caring for a newborn or newly adopted child.
- Compassionate Care benefits; you are caring or supporting a family member who is gravely ill with a significant risk of death within 26 weeks.
- Family Caregiver benefits: you are providing care or support to a critically ill family member.

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# As soon as you have been given notice, you can start applying while you wait for your ROE.

8. An ROE is issued electronically by your payroll department but is not needed to begin the process

#### **Regular Benefits**

It is important to read the following instructions and gather the necessary information. This will help ensure that there are no delays in processing your application. You will need to provide the following **personal** information:

- · your Social Insurance Number (SIN) if your SIN begins with a 9, you will need to provide proof of your immigration status and work permit;
- your mother's maiden name;
- your mailing and residential addresses, including postal codes (if you do not have a usual place of residence, you must apply in person at your local Service Canada Centre);
- your complete banking information, including branch/transit number, financial institution name and number, and your account number (as shown on your cheque or bank statement), to have your payments deposited automatically into your bank account using direct deposit;
- if you are receiving or will receive a pension, you will need to provide the type of pension (e.g. <u>CPP/QPP</u>, insurance, retirement pension from an employer), the start date, amount, and who is paying the pension. If you do not have this information at this time, you will need to provide it to us by calling 1-800-206-7218.

You will need to provide the following employment information:

- the names, addresses and telephone numbers of all employers you worked for in the last 52 weeks, as well as the dates of employment and the reasons for separation from these employers;
- · your detailed version of the facts if you quit or were dismissed from any job in the last 52 weeks;
- If your earnings varied over the last year, you will need to provide the dates (Sunday to Saturday) and earnings for each of your highest paid weeks of
  insurable earnings in the last 52 weeks or since the start of your last El claim, whichever is the shorter period. This information will be used, along with your
  Record(s) of Employment, to calculate your weekly El benefit rate;
- Record(s) of Employment:
  - If your employer(s) submits ROEs electronically to Service Canada, you do not need to request copies from your employer(s), and you do not have to
    provide copies to Service Canada.
  - If your employer issues ROEs in paper format, you must request all ROEs issued during the last 52 weeks and provide them to Service Canada as soon as possible after you submit your El application. You must mail us your paper ROEs or drop them off in person at a Service Canada Centre.

#### Reactivating or terminating a previous El claim

If you started a new claim for EI benefits within the past 52 weeks, and there are weeks still payable on that claim, it will be reactivated when you complete this application online.

If you prefer to terminate your existing claim and begin another EI claim, do not start the application at this time. To terminate a claim, you must first contact us by calling 1-800-206-7218 (TTY: 1-800-529-3742). Your decision to terminate a claim is final and cannot be changed.

If your existing claim is reactivated and you have worked since the start of that claim, you may be able to establish a new claim when this claim runs out.

- . To establish a new claim, you must have enough insurable hours and meet the qualifying conditions.
- . If you start a new claim instead of reactivating your existing claim, the remaining weeks payable on the existing claim will be lost.
- · Before you start receiving benefits, there is a waiting period for which you will not be paid.



Make note of your temporary password. You will need it to re-enter your application and check the status.

Temporary Password	
Your temporary password is:	
4D6B-3383	

Check off any applicable statuses in the Programs and Services section.

9. As this section is voluntary, you can select "continue" should you choose not to complete it.

Programs and services	
Employment and Social Development Canada and its partners have a number of programs and services designed to assist workers who have particular employment needs. The information sought below is for determining your eligibility for these programs and services and also for statistical purposes.	
This information will also be used to determine how much income tax, if any, will be deducted from your benefits.	
Completion of this section is voluntary.	
l am	
Status Indian	
(Status Indian is someone who is registered with Crown-Indigenous Relations and Northern Affairs Canada as an Indian, or who is entitled to be so registered, according to the terms of the Indian Act)	
Non-status Indian	
🗆 Inuit	
Métis	
Person with a disability	
Visible minority	

## When completing your Last Employer information:

- 10. For Last Day worked: enter the last day you were present on the job.
- 11. For "Will you be returning to work with this employer?"
  - a. i. If you have been permanently laid off, select "no"
  - b. ii. If you have been temporarily laid off and know the anticipated return date (if indicated in your formal temporary layoff notice), select "yes" and enter the date of the return. (14 days for instance)
  - c. iii. If you have been temporarily laid off and do not know the anticipated return date, select "unknown"



Answers to fields and	questions with an asterisk (*) are mandatory.
* Business name of y	our most recent employer 1
Area Code and Telep	hone Number
If you are unable to p	rovide this information at this time, you must provide it after you complete your application or processing delays may occ
First day worked (DD	/MM/YYYY) 🚯
25/04/2013	
* Last day worked (DI	D/MM/YYYY) <b>()</b>
17/03/2020	<b>E</b>
• Will you be returning	g to work with this employer?
· Yes	
No	
Unknown	
* Do you know the da	te of your return?
· Yes	
© No	
• My date of return is:	(DD/MM/YYYY)
28/04/2020	

- 12. Select 'there was a shortage of work' whether you have been temporarily or permanently laid off.
- 13. If you are on sick live because you are self-isolating pick, "I am on sick leave".
- 14. If you are caring for someone select I am on family caregiver leave.



## **Reason for Separation**

Answers to fields and questions with an asterisk (\*) are mandatory. Employer: Name Phone Number (587) 316-6340 First day worked 25/04/2013 Last day worked 17/03/2020 \* Why are you no longer working? There was a shortage of work (includes layoff, end of contract or season and office closure). I quit (includes retirement, health reasons, moving to accompany a spouse or dependent). I was dismissed or suspended (includes unsuitable, terminated within probationary period or terminated without cause). I am on sick leave (includes illness, injury, surgery, recovery and medical leave of absence). I am on maternity leave. I am on parental leave (includes caring for a newborn or recently adopted child). I am on compassionate care leave (includes providing care or support for a person who requires end-of-life care). I am on family caregiver leave (includes providing care or support for a critically ill or injured person). My employer went bankrupt. I am on apprenticeship training. I have a work-sharing agreement. I am on strike or lockout. I am on a leave of absence. Continue Previous

## Complete the Rate of Pay section.

15. As this section is voluntary, you can select "continue" should you choose not to complete it.

Rate of Pa	ay				
What was your hourly	rate of pay or an	nual salary (before	e deductions)?		
\$	per	Y			
This information is so Previous Contin	ught to gather da ue	ta for Labour Mark	et Information. Co	mpletion of this section	on is voluntary.
Date modified: 2019-	03-08				



## Enter your Job Title Information.

16. If the exact match doesn't show as an option, select one which closely matches yours.

Job Title Information	
Answers to fields and questions with an asterisk (*) are mandatory.	
Employer:	
Name	
Phone Number	
First day worked 25/04/2013	
Last day worked 17/03/2020	
* Enter your job title (secretary, plumber) or your field of work (aviation, administrat entering a minimum of the first four letters of the job title (secretary or secr; plumb do not find the exact match, select the one that most closely matches your occupation [ Search job titles Previous Continue	ion) and click on "Search job titles". You can also try your search by er or plum) or the field of work (aviation or avia; administration or admi). If you on.

Unless otherwise indicated by your employer, your ROE will be issued electronically.

	Answers to fields and questions with an asterisk (*) are mandatory.
	Employer:
	Name
	Phone Number (403) 463-3593
	First day worked 23/09/2010
	Last day worked 16/03/2020
	* We need a Record of Employment (ROE) covering this period of work to process your claim. If your employer issued you an ROE with a serial number that begins with "S," "W" or "Y," Service Canada already has it.
	Select one of the following options: 10
+	I have a paper Record of Employment and will submit it or have submitted it to Service Canada or my employer submitted the Record of Employment electronically.
	I requested or will request the Record of Employment from my employer to be submitted promptly.
	My employer did not issue a Record of Employment to me due to bankruptcy, going out of business or moving.
	A Record of Employment is not issued because my employment is not insurable (examples: I am self-employed or I control more than 40% of the voting shares of the business I work in, etc.).



## Complete the Other Employers section, if applicable.

Other employers	
Answers to fields and questions with an asterisk (*) are mandatory.	
If you already reported your period of work with your last employer, do not report again here for the sai	me period.
* In the last 52 weeks, did you have any other periods of work? (with the same employer or other employers)	0
⊖ Yes	
O No	
You must give Service Canada any paper Records of Employment you received from employers in the last 52 eligibility for EI.	weeks. This extra information helps determine your
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- 17. You may receive this message if in the ROE Information Last Employer section, you selected 'I requested or will request a Record of Employment from my employer to be submitted promptly'.
- 18. For any previous employers where you are not able to obtain your ROE, call the Service Canada Centre for further guidance.



19. Complete the Information on Workers' Compensation Payments, if applicable.



## **Workers' Compensation Payments**

Answers to fields and questions with an asterisk (\*) are mandatory.

\* Have you received or will you receive money through Workers' Compensation?

Previous	Continue
No	
Yes	

15. Complete the Information on Pensions section, if applicable.

Information on pensions
Answers to fields and questions with an asterisk (*) are mandatory.
* Are you now or will you be receiving a pension within the next 52 weeks?
○ Yes
No
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16. Complete the Business Relationship Information section as it applies to you.



## **Business Relationship Information**

Answers to fields and questions with an asterisk (\*) are mandatory.

#### Family relationship with Employer

\* Are you related to any owner or part-owner of a business for which you worked, or to a shareholder who participated in running the business?

· Yes

\* No

Answer "Yes" if the owner, part-owner or shareholder is:

- · your father, mother, grandparent or great-grandparent (including adoptive, step and in-law);
- · your brother or sister (including step or in-law);
- · your son, daughter, grandchild or great-grandchild (including adoptive, step and in-law);
- your spouse (including common-law);
- · your aunt, uncle, niece, nephew or cousin

Note: You are not related to your employer for Employment Insurance purposes if you are a self-employed person engaged in fishing for which you receive a Record of Employment (ROE) Self-Employed Fisher form. If you are related to any of your other employers, select "Yes".

#### Shareholder in a corporation for which you worked

* Did you own more than 40 % of the shares of any corporation for which you worke	d? 🚺
© Yes	
* No	
A shareholder is a person who owns shares in a corporation (a business that has be	en legally incorporated)
Sole owner or partner in a business for which you w	orked
* Were you the owner or part-owner (partner) in any business for which you worked?	0

* Were you the owner or part-owner (partner) in any business for which you worked?	0
© Yes	
* No	

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17. Complete the Variable Best Weeks section as it applies to you.

Variable Best Weeks	
Answers to fields and questions with an asterisk (*) are mandatory.	
What is the variable best weeks calculation?	
Variable best weeks are the weeks of work (except self-employment) when you earned the most money. If your insurable earnings varied from will calculate your EI benefit rate based on the best weeks in your qualifying period (generally the last 52 weeks of work, or since the start of your qualifying period (generally the last 52 weeks of work).	week to week, we our last El claim).
Information to give	
Please give accurate and complete information about your best weeks because we use it and your Record(s) of Employment to calculate your Calculate your weekly earnings based on a <b>Sunday to Saturday</b> calendar week.	benefit rate.
For each week (Sunday to Saturday) that you earned the most money, please give the following information:	
<ul> <li>the dates; and</li> <li>your gross weekly pay (before deductions) including any vacation pay and statutory holiday pay included with each pay.</li> </ul>	
* In the last year did you work less than 20 weeks?	
© Yes	
* No	
* Did your earnings vary over the last 52 weeks?	
© Yes	
* No	
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18. Complete the Workforce History section as it applies to you.

Workforce History
► Help for this page
Answers to fields and questions with an asterisk (*) are mandatory.
During the last 2 years, were you at any time:
* in receipt of Workers' Compensation?
Yes
No
* unable to work for medical reasons? 🧊
Yes
No
* in receipt of group wage loss insurance benefits?
Yes
No
* prevented from working due to a labour dispute (strike or lockout)?
Yes
No
* on a training course to which you were referred by a designated authority? 🚺
Yes
No

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* in jail? 1
Yes
No
<ul> <li>* in receipt of a payment from the Wage Earner Protection Program?</li> <li>Yes</li> </ul>
No
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19. As an employee, you will select "no" for this section.

	Self-Employment Information
	Answers to fields and questions with an asterisk (*) are mandatory.
1	<ul> <li>* Are you self-employed, other than fishing or farming? </li> <li>Yes</li> </ul>
Ļ	No No
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20. Complete the course or Training program section as it applies to you.

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Course or training program
Answers to fields and questions with an asterisk (*) are mandatory.
<ul> <li>* Are you taking or will you be taking a course or training program?</li> <li>Yes</li> <li>No</li> </ul>
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21. Complete the Third Party Assistance section as it applies to you. It only applies if someone else was helping you apply (this worksheet would not apply!)

Third Party Assistance
Answers to fields and questions with an asterisk (*) are mandatory.
<ul> <li>Did someone assist you in completing this application? </li> <li>Yes</li> <li>No</li> </ul>
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#### 22. You will then be required to accept the attestation

#### Attestation

Answers to fields and questions with an asterisk (\*) are mandatory.

I declare that the information given to the questions on the Application for Employment Insurance benefits online and questionnaires is true to the best of my knowledge.

I understand that this information will be used to determine my eligibility for Employment Insurance Benefits (including Family Supplement) and/or Employment Benefits, Services and Training. I have read and understand the Rights and Responsibilities statement.

I understand that the information provided is subject to verification and that making a false statement on an Application for Employment Insurance benefits online is subject to an administrative penalty or criminal proceedings for knowingly making this false or misleading statement.



accept the above attestation and want to submit my Application for Employment Insurance benefits online.

@ do not accept the above attestation and wish to abandon my Application for Employment Insurance benefits online.

