

MAINE BUC

ReEmployME SYSTEM TRAINING

SELF SERVICE OPTIONS FOR CLAIMANTS



SELF SERVICE OPTIONS FOR CLAIMANTS

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ReEmployME System Navigation Overview



- **Radio Button**


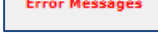



! Only one Radio Button may be selected per answer (Yes/No)

! If a Radio Button is selected in error: **Double Click** it to deselect

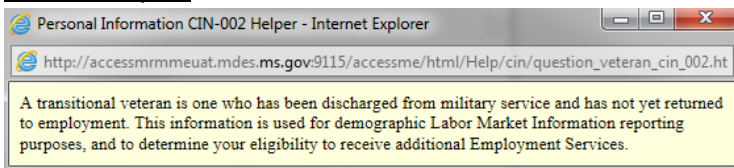
- **A Red Asterisk** indicates a required Field



Not all fields that need to be filled in will have  but an error  message will appear if a question is missed.

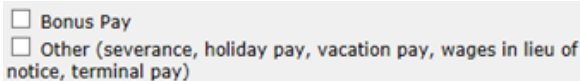
- **Helper Text** buttons, shown as Question Marks , provide additional information about questions asked. An additional window will pop up on the screen with a brief explanation of the question.

For example:



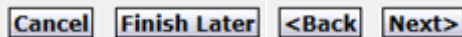
! To close the Helper Text Window, click on the Red X in the top right hand corner of the window

- **Check Boxes**



! Multiple Check Boxes may be selected at the same time (“Check all that apply”)

- **Command Buttons**



help with basic navigation through the system between screens

- **Hyperlinks**



provide additional information if needed

- **Drop-Down Menus**



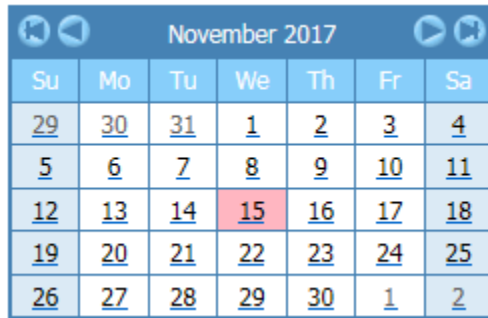
can be expanded to allow the user to select the appropriate option.

For example:



- Select-
Asian
African American
American Indian/Alaskan Native
Pacific Islander
Caucasian

- **Calendar** MM / DD / YYYY  

Clicking on the little square next to date fields brings up a calendar, which makes it easier to select specific dates:



November 2017						
Su	Mo	Tu	We	Th	Fr	Sa
29	30	31	1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	1	2

! Clicking   moves the calendar to a prior month, or following month

! Clicking   moves the calendar to a prior year, or following year

Section 1: Claimant sign-up:

Scenario 1a: Claimant – Create New Account

Step 1: Navigate to www.maine.gov/reemployme and click the Claimant Signup link on the home page of the ReEmployME Unemployment filing system:

Maine.gov Agencies | Online Services | Help | Search Maine.gov

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Welcome LOGIN-001

Unemployment Services Login
* Required Information

* User ID

* Password (Case sensitive) **Submit**

[Forgot User ID](#) [Forgot Password](#)

If you are a Claimant, Select --> [Claimant Signup](#) to signup

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Services

Figure 1: ReEmployME Login screen

Step 2: Complete the information for New User Sign Up and click the **Next>** button:

Note: A red asterisk (*) indicates a required field

The screenshot shows the 'New User Sign Up' page. At the top, there are logos for 'REEMPLOY ME' and 'MAINE DEPARTMENT OF LABOR'. The page title is 'New User Sign Up' with a sub-header '* Required Information'. The form consists of six numbered fields: 1. * SSN (with three input boxes), 2. * Confirm SSN (with three input boxes), 3. * First Name (with a single input box), 4. Middle Initial (with a single input box), 5. * Last Name (with a single input box), and 6. * Date of Birth (with three input boxes for MM, DD, and YYYY). Below the fields is a reCAPTCHA box with the text 'I'm not a robot' and a 'Next>' button. A blue arrow points down to the 'Next>' button. On the left, there is a 'Cancel' button. The footer contains a 'Stay Informed' section with social media links, a 'Find it by Topic' section with various links, a 'Find it by Audience' section, a 'Find it by Agency' section, and a 'Services' section with logos for REEMPLOY ME, CareerCenter, and SafetyWorks!

Figure 2: New User Sign Up screen

Step 3: Click the “I’m not a robot” box, which brings up an image with instructions. Continue to select the required fields until the “I am not a robot” question shows a green checkmark ✓

The claimant will be returned to the New User Sign Up Screen; click Next to continue

Note: In this case, the instructions are to “Select all squares with street signs” (instructions vary)

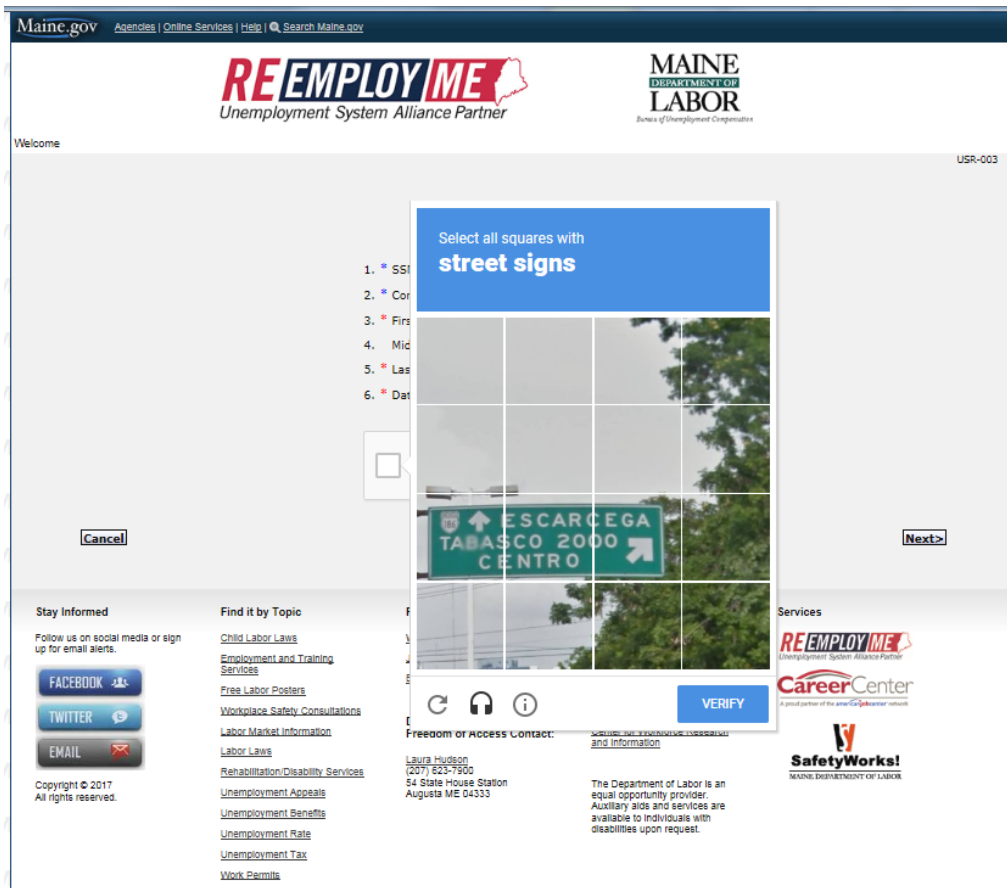
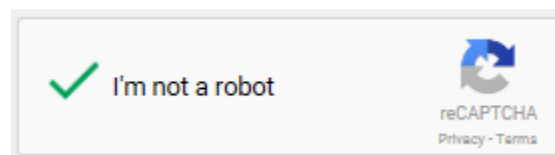


Figure 3: CAPTCHA screen



Step 4: Create your username and password, security questions, and enter a valid email address. Click the **Submit** button.

- The User ID must be 6-30 characters and must start with a letter. If the email address meets these requirements, it may be a good choice for the User ID because it is easy to remember
- The password must be 8-15 characters and must contain 1 uppercase letter, 1 lowercase letter, 1 number, and 1 symbol
- Select and answer a security question; enter a valid email address; confirm the valid email address by entering it again. Click the “submit” button

The screenshot shows the 'Create User ID and Password' screen. At the top, there is a navigation bar with 'Maine.gov' and links for 'Agencies', 'Online Services', 'Help', and 'Search Maine.gov'. Below this are the 'REEMPLOY ME' and 'MAINE DEPARTMENT OF LABOR' logos. The main heading is 'Create User ID and Password' with a note that asterisks indicate required information. The form consists of seven steps: 1. Create User ID (6-30 characters, must start with a letter), 2. Create Password (8-15 characters, must contain 1 uppercase, 1 lowercase, 1 number, and 1 symbol), 3. Confirm Password, 4. Security Question (selected from a dropdown), 5. Answer, 6. Enter Email Address, and 7. Confirm Email Address. A blue arrow points to the 'Submit' button. The footer contains social media links (Facebook, Twitter, Email), a 'Find it by' section with links for various services, and contact information for the Department of Labor.

Figure 4: Create User ID and Password screen

Step 5: The Successful Registration Confirmation screen is displayed. Click the button to return to the login screen

Unemployment Services

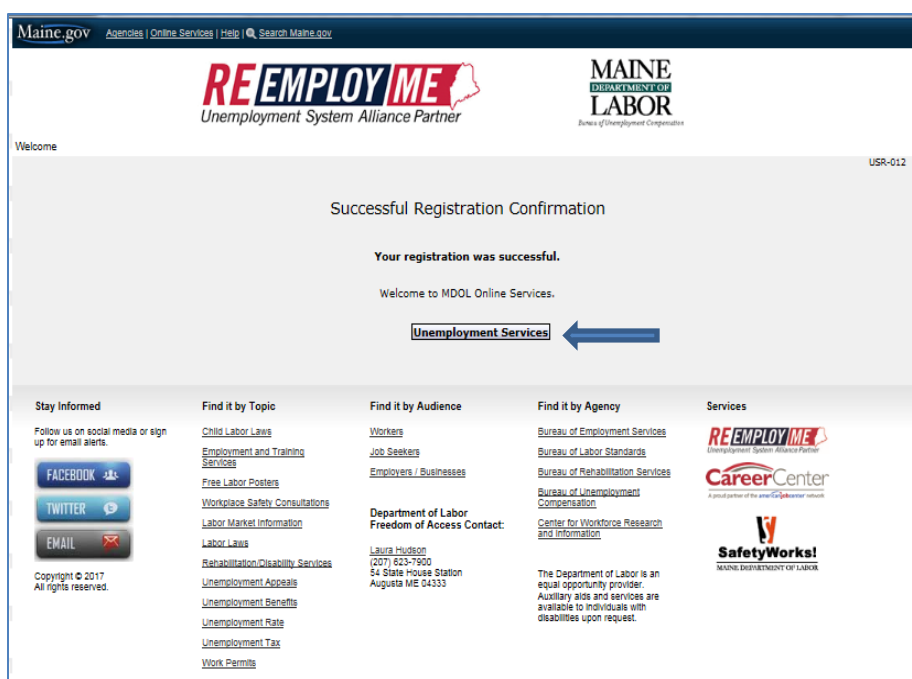


Figure 5: Successful Registration Confirmation screen

Step 6: At this time , claimants should next check their email account in order to activate it:

1. Claimants will receive an email at the email address provided. This email will come from enotification@maine.gov. The subject line will be: ME DOL Accounts: E-mail Verification. Please allow 15 minutes for this message to arrive in the Inbox. If the email is not received, check the spam folder.

Open and read the email message, which contains a verification code. Write it down. Claimants will need this code to activate the email address within the ReEmployME system. This allows the Maine Bureau of Unemployment Compensation to send them information regarding claims.

2. Return to www.maine.gov/reemploye to log in using the new User ID and password.

Step 7: On the login screen, enter the new User ID and Password. Click 

Figure 6: ReEmployME Login screen

Step 8: On the home screen, look for the tab marked “Benefit Maintenance”. Click on it. Click “Update Claimant Profile,” then select “Verify Email”

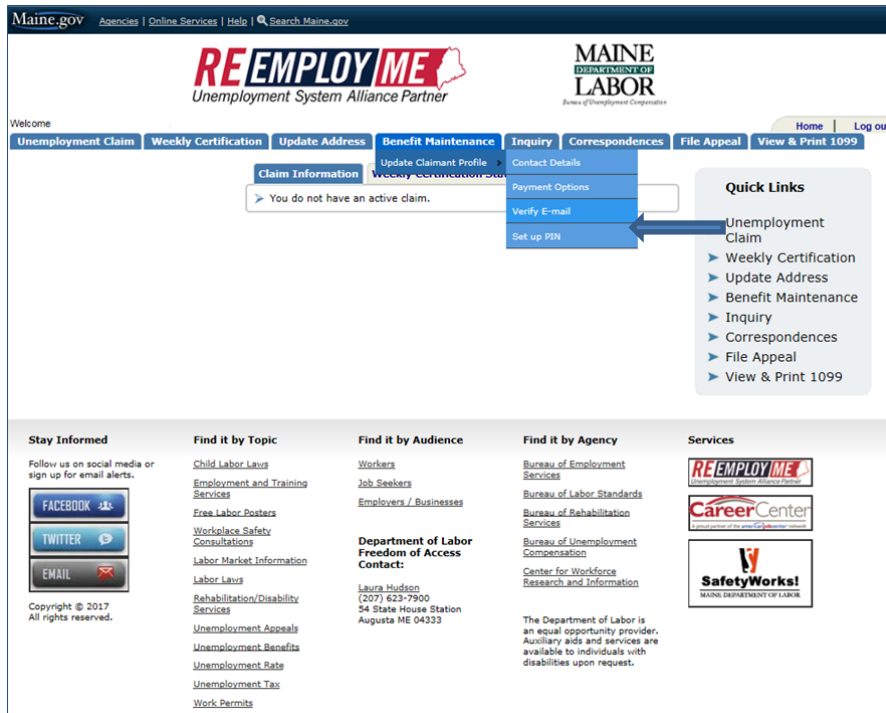


Figure 7: Verify Email path

Step 9: Enter the Verification Code, received in the email message from enotification@maine.gov, and click Next

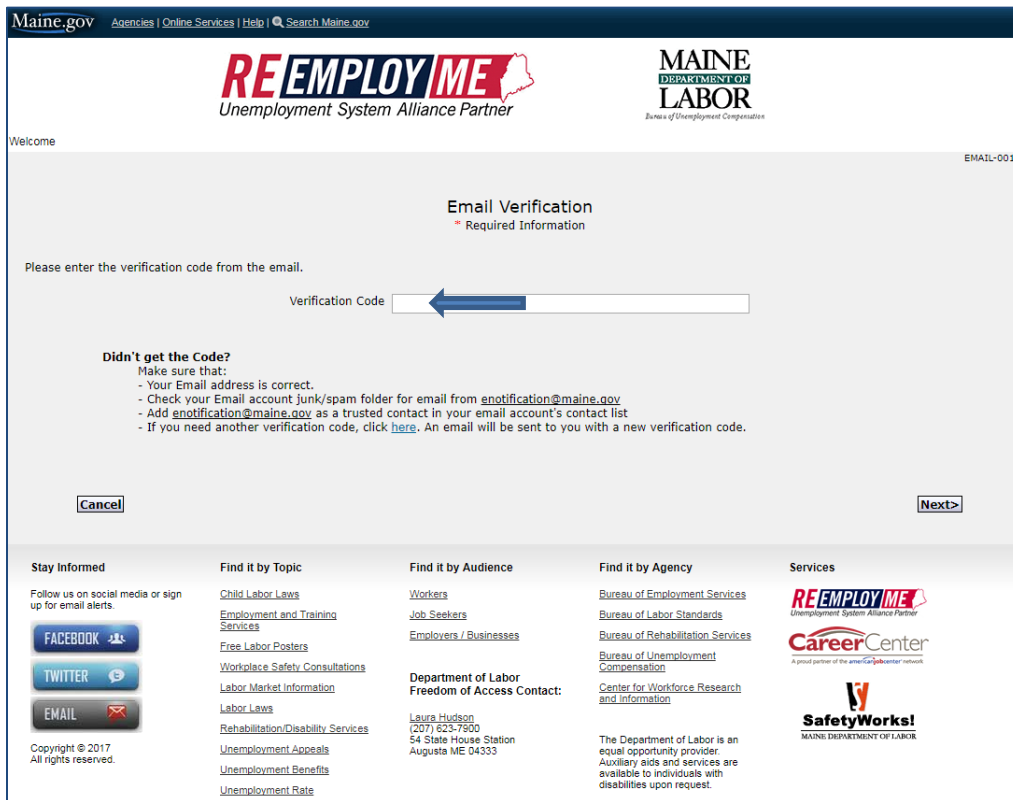


Figure 8: Email Verification screen

Step 10: Email verification screen will show

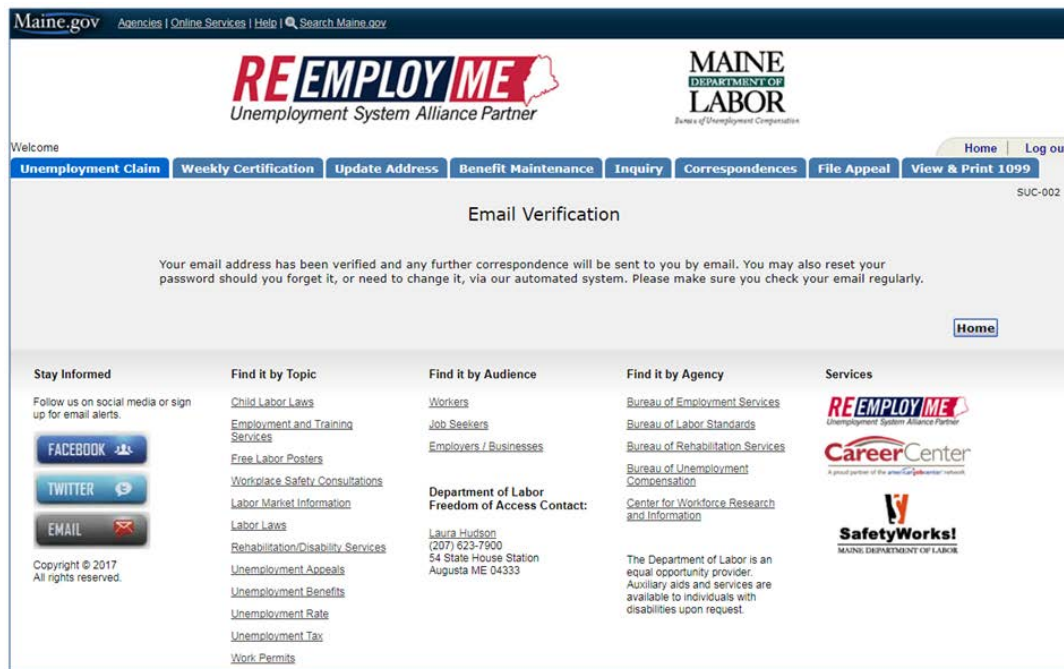


Figure 9: Email Verification Screen

Scenario 1b: Set up PIN*

Setting up a PIN is required to do the following:

1. It will allow a claimant to file Weekly Certifications on the IVR
2. It will serve as an identity verification tool when contacting an Unemployment Customer Service Representative by phone

*Claimants who already have a PIN established prior to transitioning to the new system will not need to set up a new PIN. The existing PIN will transfer over to the new system

Step 1: Navigate to www.maine.gov/reemploye. On the login screen, enter the User ID and Password. Click

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Bureau of Unemployment Compensation

Welcome LOGIN-001

Unemployment Services Login
* Required Information

* User ID

* Password (Case sensitive)

[Forgot User ID](#) [Forgot Password](#)

If you are a Claimant, Select --> [Claimant Signup](#) to signup MRM_ME_UAT_20171014-0631

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Figure 10: ReEmployME Login Screen

Step 2: From the home screen, navigate to Benefit Maintenance. Click “Update Claimant Profile,” and “Set up PIN”

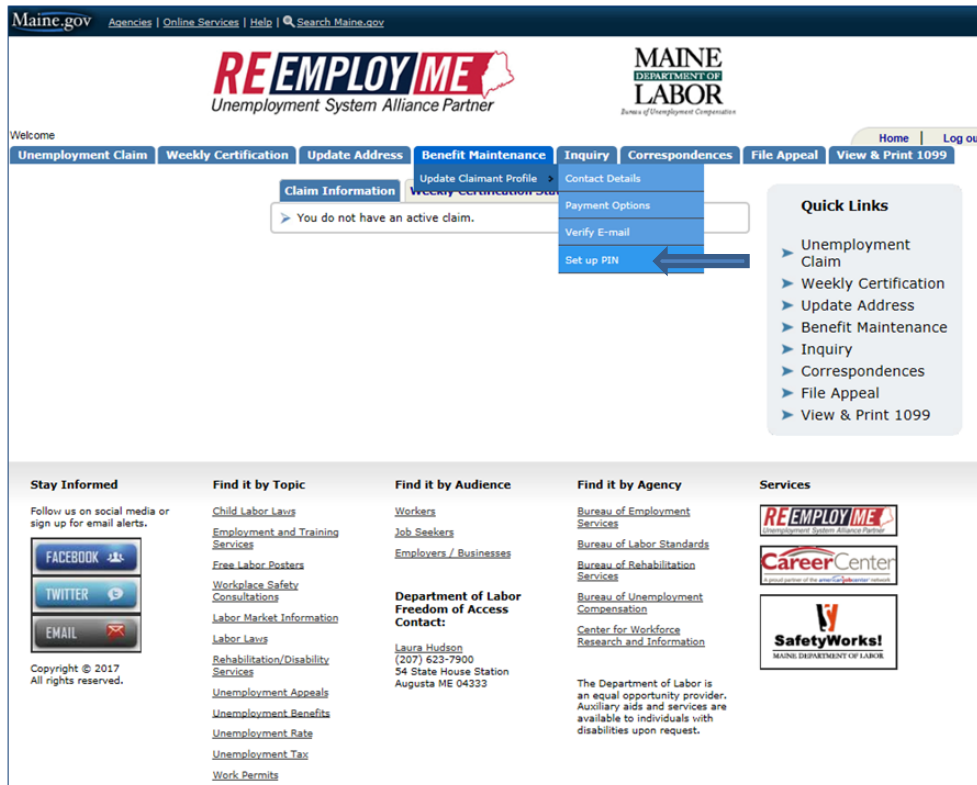


Figure 11: Set up PIN path

Step 3: Enter selected 4-digit PIN. Click Submit to set PIN

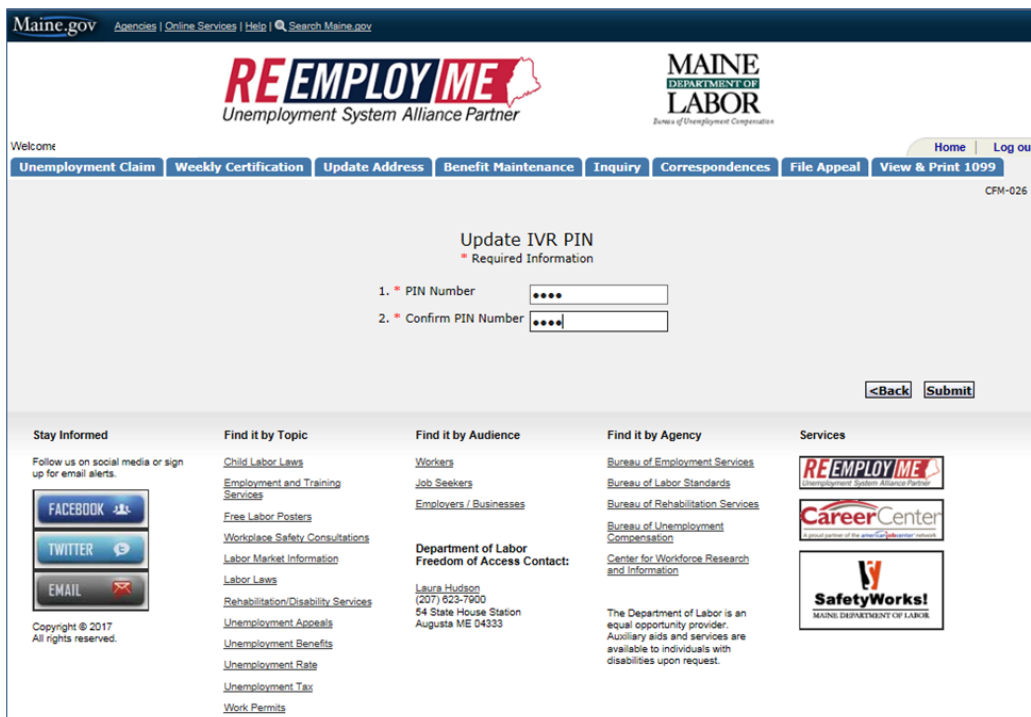


Figure 12: Update IVR PIN screen

Section 2: Self-Service Options:

Scenario 2a: Update Contact Information

Step 1: Navigate to www.maine.gov/reemploye. On the login screen, enter the User ID and Password. Click **Submit**

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LABOR
Bureau of Unemployment Compensation

Welcome LOGIN-001

Unemployment Services Login
* Required Information

* User ID

* Password (Case sensitive) **Submit**

[Forgot User ID](#) [Forgot Password](#)

If you are a Claimant, Select --> [Claimant Signup](#) to signup MRM_ME_UAT_20171014-0631

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Figure 13: ReEmployME Login screen

Step 2: From the home screen, navigate to Benefit Maintenance. Click “Update Claimant Profile,” and “Contact Details”

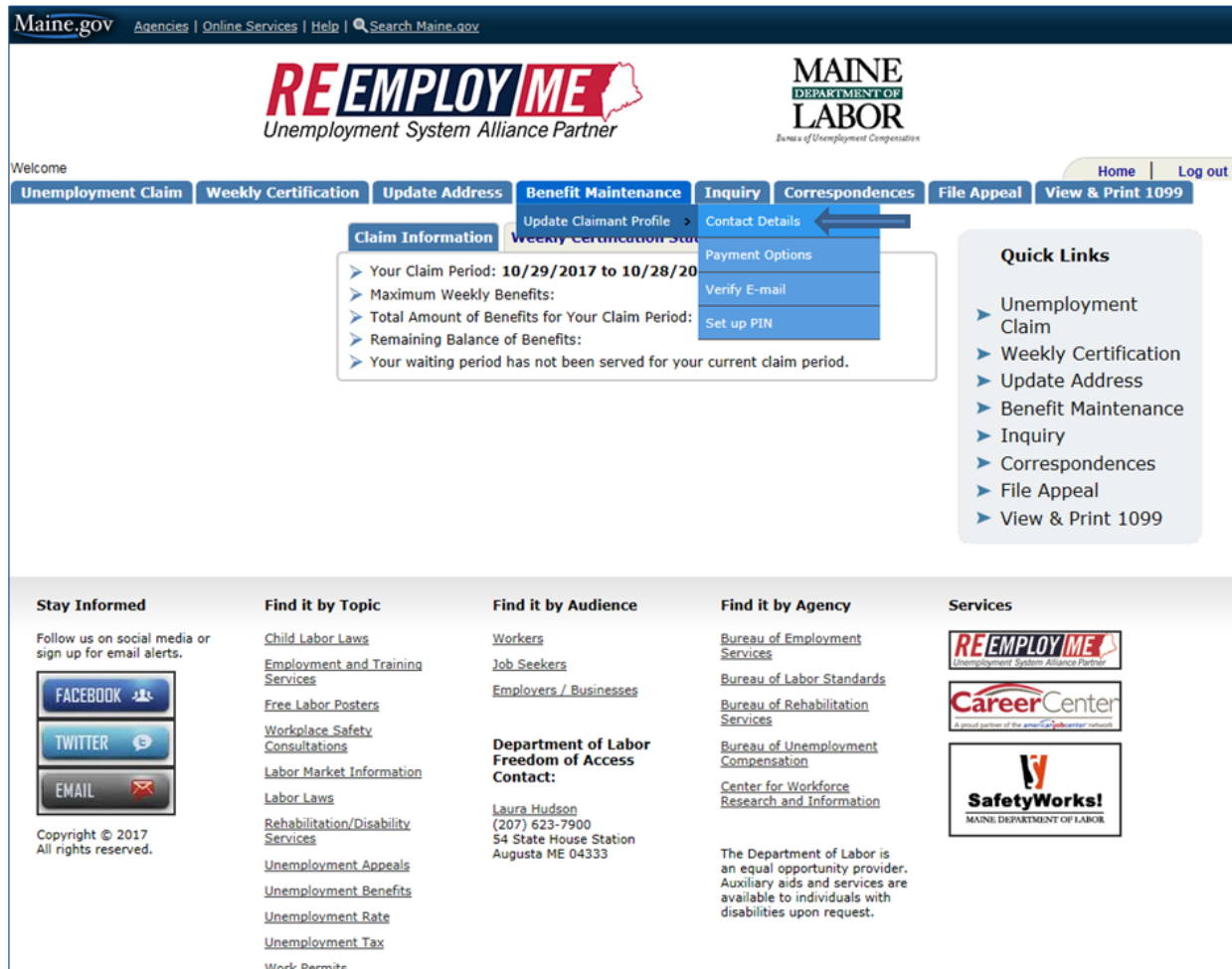


Figure 14: Contact Details path

Step 3: Complete the Update Contact Information screen and make any necessary changes. Click the **Submit** button to confirm

The screenshot shows the 'Update Contact Information' page on the Maine.gov website. The page header includes the 'REEMPLOY ME' logo and the 'MAINE DEPARTMENT OF LABOR' logo. A navigation bar contains links for 'Unemployment Claim', 'Weekly Certification', 'Update Address', 'Benefit Maintenance', 'Inquiry', 'Correspondences', 'File Appeal', and 'View & Print 1099'. The main content area is titled 'Update Contact Information' with a sub-header '* Required Information'. The form consists of several numbered sections:

- 1. Claimant SSN
- a. Gender: Radio buttons for Male and Female (Female is selected).
- 2. * First Name
- 3. Middle Initial
- 4. * Last Name
- 5. * Mailing Address: Fields for Address Line 1 (1 NEW ADDRESS), Address Line 2, City (AUGUSTA), State/Province (Maine), ZIP Code (04330), and Country (United States).
- 6. * Residential Address is: Radio buttons for 'Same as Mailing Address' (selected) and 'Different'.
- 7. * Residential Address: Fields for Address Line 1 (1 NEW ADDRESS), Address Line 2, City (AUGUSTA), State/Province (Maine), ZIP Code (04330), and Country (United States).
- 8. If Maine resident, select town: Dropdown menu showing 'Augusta-04330'.
- 9. Telephone Number(s):
 - a. Primary Number: Fields for 111, 111, 1111.
 - b. Secondary Number: Fields for 111, 111, 1111.
- 10. * How may we contact you?: Dropdown menu showing 'USPS Mail'.
- a. Email Acknowledgment: A scrollable box containing 'TERMS AND CONDITIONS: By checking "I Agree", you agree and consent to receive notification of unemployment insurance correspondence by email. You will receive an email.' Below this is a checkbox for 'I AGREE to the Terms and Conditions of MDOL regarding electronic notifications.' and a note about spam blockers.
- 11. * E-mail Address: Field containing 'newemailaddress@mai'.
- 12. * Confirm E-mail Address: Field containing 'newemailaddress@mai'.

At the bottom right of the form, there are two buttons: '<Back' and 'Submit'. A blue arrow points to the 'Submit' button.

Figure 15: Update Contact Information screen

If the email address associated with the account was previously activated, changing the email address will require activation of the new email address. Click [here](#) for further instructions

Step 4: Confirm the changes made on the Update Contact Information – Address Verification screen. Click the **Next>** button to move to the next screen. Click the **<Back** button go back to the prior screen if changes are needed



Figure 16: Update Contact Information - Address Verification screen

Step 5: Review Update Contact Information screen. Click **Home** to return to the main home page

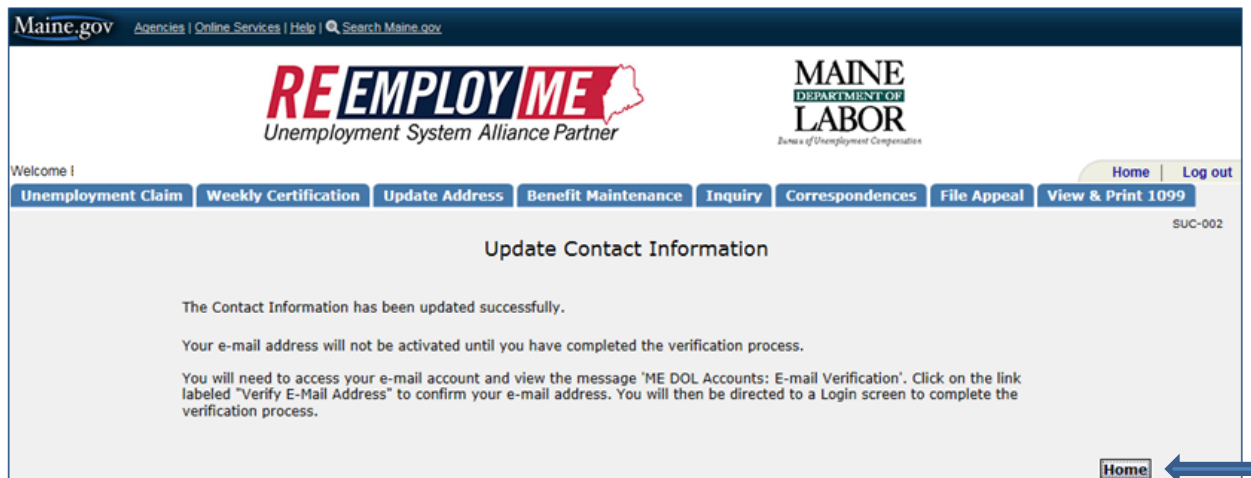


Figure 17: Update Contact Confirmation screen

Scenario 2b: Check Claim Status

Step 1: Navigate to www.maine.gov/reemployme. On the login screen, enter the User ID and Password. Click **Submit**

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Welcome LOGIN-001

Unemployment Services Login
* Required Information

* User ID

* Password (Case sensitive) **Submit**

[Forgot User ID](#) [Forgot Password](#)

If you are a Claimant, Select --> [Claimant Signup](#) to signup

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Figure 18: ReEmployME Login screen

Step 2: From the home screen, navigate to Inquiry. Click “Benefits,” and “Claimant / Claim Inquiry”

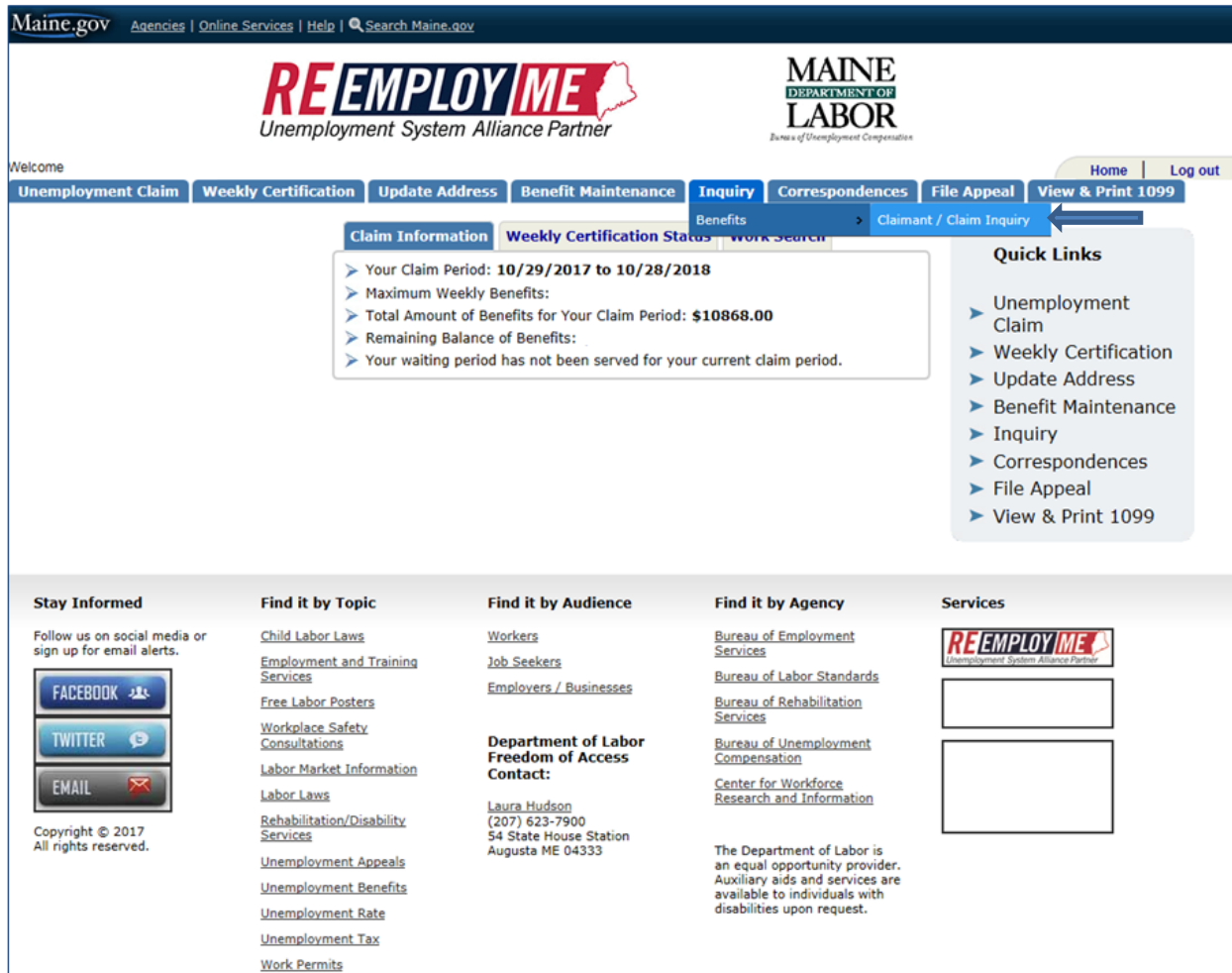


Figure 19: Claimant / Claim Inquiry path

Step 3: Review Claim Summary screen, which will show the benefit year start and date date, the Weekly Benefit Amount and Balance, any Pending or Processed Weekly Certifications

The screenshot displays the 'Claim Summary' page on the Maine.gov website. At the top, there are navigation links for 'Unemployment Claim', 'Weekly Certification', 'Update Address', 'Benefit Maintenance', 'Inquiry', 'Correspondences', 'File Appeal', and 'View & Print 1099'. The page is titled 'Claim Summary' and includes the following information:

Claimant Details		Claimant Name	
Claimant SSN		Claimant Name	
		Claimant Id	
Mailing Address	1 NEW ADDRESS AUGUSTA ME 04330	Telephone Number	111-111-1111
Residential Address	1 NEW ADDRESS AUGUSTA ME 04330	Date of Birth	
		Gender	Female
		Report Location	N/A
		Residence County	
Claim Details		Status	Active
Type	Regular -UI Only	Base Period	Jul-Sep 2016
Claim Start Date	10/29/2017		Oct-Dec 2016
Claim End Date	10/28/2018		Jan-Mar 2017
Weekly Amount	\$ 418.00		Apr-Jun 2017
Maximum Amount	\$ 10,868.00		
Balance	\$ 10,868.00		
Pension	N/A		
Adjusted Weekly Amount	N/A		

Pending Weekly Certification(s)
No pending weekly certifications.

Processed Weekly Certification(s)
No Processed Weekly Certifications

[Unemployment Verification](#)

[<Back](#)

Figure 20: Claim Summary screen

Scenario 2c: View and Print History Record for LIHEAP, etc.

Step 1: Navigate to www.maine.gov/reemployme. On the login screen, enter the User ID and Password. Click **Submit**

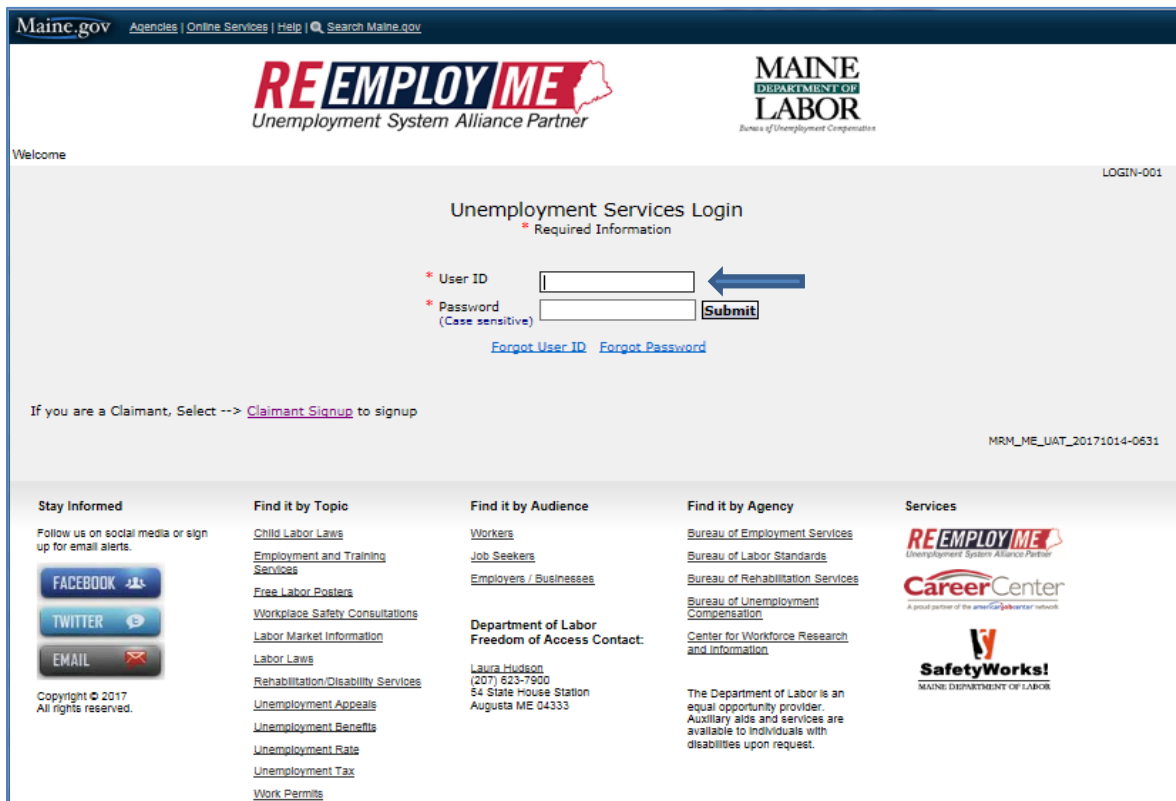


Figure 21: ReEmployME Login screen

Step 2: From the home screen, navigate to Inquiry. Click “Benefits,” and “Claimant / Claim Inquiry”

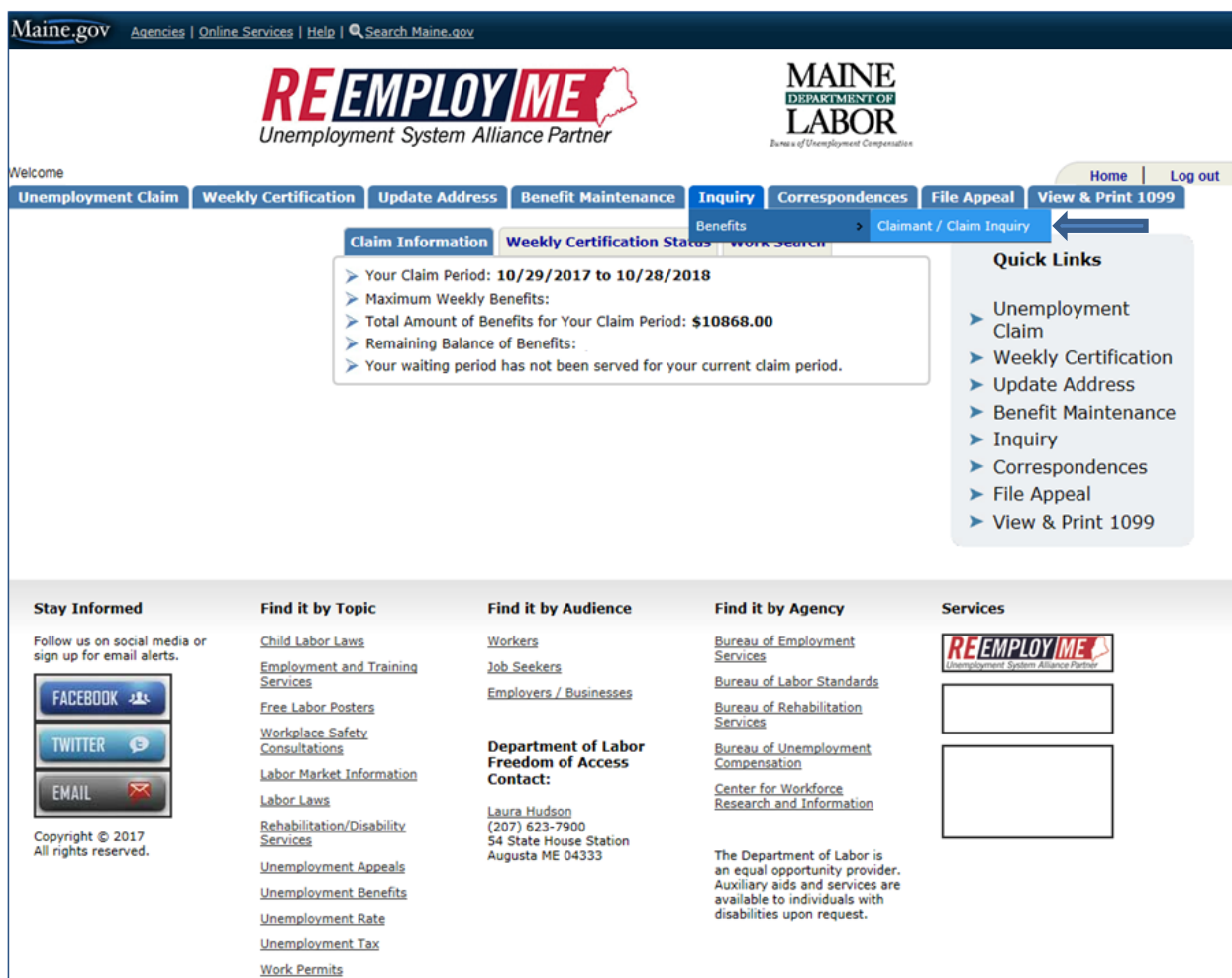


Figure 22: Claimant / Claim Inquiry path

Step 3: From the Claim Summary screen, click on the [Unemployment Verification](#) hyperlink

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INQ-001

Claim Summary

Claimant SSN	Claimant Name
	Claimant Id

Claimant Details			
Mailing Address	1 NEW ADDRESS AUGUSTA ME 04330	Telephone Number	111-111-1111
		Date of Birth	
		Gender	Female
Residential Address	1 NEW ADDRESS AUGUSTA ME 04330	Report Location	N/A
		Residence County	

Claim Details			
Type	Regular -UI Only	Status	Active
Claim Start Date	10/29/2017	Base Period	Jul-Sep 2016
Claim End Date	10/28/2018		Oct-Dec 2016
Weekly Amount	\$ 418.00		Jan-Mar 2017
Maximum Amount	\$ 10,868.00		Apr-Jun 2017
Balance	\$ 10,868.00		
Pension	N/A		
Adjusted Weekly Amount	N/A		

Pending Weekly Certification(s) _____
No pending weekly certifications.

Processed Weekly Certification(s) _____
No Processed Weekly Certifications

[Unemployment Verification](#) ←

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Figure 23: Claim Summary screen

Step 4: Review Maine Department of Labor Unemployment Verification screen. Click the [Print](#) hyperlink to print screen

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Unemployment Claim Weekly Certification Update Address Benefit Maintenance Inquiry Correspondences File Appeal View & Print 1099

INQ-002

Maine Department of Labor
Unemployment Verification

11/16/2017

Claimant Name
Mailing Address 1 NEW ADDRESS
AUGUSTA ME 04330

Claimant SSN

Monetary Information

Benefit Year From 10/29/2017 To 10/28/2018

1.	Weekly Benefit Amount	\$418.00
2.	Maximum Benefit Amount	\$10,868.00
3.	Balance of Benefits for Benefit Year	\$10,868.00
4.	Date Most Recent Weekly Certification Filed	

Reason Claimant is not receiving benefits

1.	Insufficient Wages	No
2.	Disqualified	N/A
3.	Issue Pending	Yes

Processed Weekly Certification(s)
No Processed Weekly Certifications

[Print](#) ← [<Back](#)

Figure 24: Maine Department of Labor Unemployment Verification screen

Scenario 2d: Change Payment Method

Step 1: Navigate to www.maine.gov/reemployme. On the login screen, enter the User ID and Password. Click **Submit**

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Welcome LOGIN-001

Unemployment Services Login
* Required Information

* User ID

* Password (Case sensitive) **Submit**

[Forgot User ID](#) [Forgot Password](#)

If you are a Claimant, Select --> [Claimant Signup](#) to signup MRM_ME_UAT_20171014-0631

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Services

Figure 25: ReEmployME Login screen

Step 2: From the home screen, navigate to Benefit Maintenance. Click “Update Claimant Profile,” and “Payment Options”

The screenshot shows the Maine Department of Labor website interface. At the top, there is a navigation bar with links for 'Unemployment Claim', 'Weekly Certification', 'Update Address', 'Benefit Maintenance', 'Inquiry', 'Correspondences', 'File Appeal', and 'View & Print 1099'. A dropdown menu is open under 'Benefit Maintenance', showing options for 'Update Claimant Profile', 'Contact Details', 'Payment Options', 'Verify E-mail', and 'Set up PIN'. A blue arrow points to the 'Payment Options' link. Below the navigation bar, there is a 'Claim Information' section with details about the claim period (10/29/2017 to 10/28/2017), maximum weekly benefits, total amount of benefits, and remaining balance. To the right, there is a 'Quick Links' section with links to 'Unemployment Claim', 'Weekly Certification', 'Update Address', 'Benefit Maintenance', 'Inquiry', 'Correspondences', 'File Appeal', and 'View & Print 1099'. At the bottom, there are sections for 'Stay Informed' (social media links), 'Find it by Topic' (various labor-related topics), 'Find it by Audience' (Workers, Job Seekers, Employers/Businesses), 'Find it by Agency' (Bureau of Employment Services, Bureau of Labor Standards, Bureau of Rehabilitation Services, Bureau of Unemployment Compensation, Center for Workforce Research and Information), and 'Services' (REEMPLOY ME, Career Center, SafetyWorks!).

Figure 26: Payment Options path

Step 3: Update Federal/State Tax withholding status, or payment method. If Direct Deposit is selected, complete the required fields. Click the **Submit** button to confirm

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Unemployment Claim Weekly Certification Update Address Benefit Maintenance Inquiry Correspondences File Appeal View & Print 1099

CFM-004

Update Payment Information

* Required Information

1. Claimant SSN
2. Date of Birth
3. First Name
4. Middle Initial
5. Last Name
6. Federal Tax Withheld Yes No
7. State Tax Withheld Yes No
8. Select your preferred method of receiving benefit payments Direct Deposit Debit Card

If you selected Direct Deposit, enter the following information:

a. Name on Bank Account	<input type="text" value="First Name Last Name"/>
b. Account Type	<input type="text" value="Checking Account"/>
c. Bank Account Number	<input type="text" value="*****"/>
d. Confirm Bank Account Number	<input type="text" value="1111111111"/>
e. Bank Routing Number	<input type="text" value="*****"/>
f. Confirm Bank Routing Number	<input type="text" value="211000000"/>

<Back Submit

Figure 27: Update payment Information screen

Step 4: The Update payment Information Confirmation screen will show. Click **Home** to return to the main home page

Figure 28: Update Payment Information Confirmation screen

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Welcome Home Log out

Unemployment Claim Weekly Certification Update Address Benefit Maintenance Inquiry Correspondences File Appeal View & Print 1099

SUC-002

Update Payment Information Confirmation

The Payment Information has been updated successfully.

Home

Scenario 2e: File an Appeal

Step 1: Navigate to www.maine.gov/reemploye. On the login screen, enter the User ID and Password. Click **Submit**

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Welcome LOGIN-001

Unemployment Services Login
* Required Information

* User ID

* Password (Case sensitive) **Submit**

[Forgot User ID](#) [Forgot Password](#)

If you are a Claimant, Select --> [Claimant Signup](#) to signup MRM_ME_UAT_20171014-0631

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Figure 29: ReEmployME Login screen

Step 2: From the home screen, navigate to File Appeal. Click “File Appeal”

The screenshot shows the main interface of the Maine Department of Labor's unemployment benefits portal. At the top, there is a navigation bar with 'Maine.gov' and links for 'Agencies', 'Online Services', 'Help', and a search function. The main header features the 'REEMPLOY ME' logo and the 'MAINE DEPARTMENT OF LABOR' logo. Below this is a 'Welcome' message and a series of menu tabs: 'Unemployment Claim', 'Weekly Certification', 'Update Address', 'Benefit Maintenance', 'Inquiry', 'Correspondences', 'File Appeal', and 'View & Print 1099'. The 'File Appeal' tab is highlighted in blue. Underneath, there are three sub-tabs: 'Claim Information', 'Weekly Certification Status', and 'Work Search'. The 'Claim Information' sub-tab is active, displaying a list of claim details: 'Your Claim Period: 08/27/2017 to 08/26/2018', 'Maximum Weekly Benefits', 'Total Amount of Benefits for Your Claim Period: \$10868.00', 'Remaining Balance of Benefits:', and 'Your weekly certification for 09/09/2017 was used as your waiting period for the current claim period and will not be paid.' To the right of this information is a 'Quick Links' sidebar with a list of navigation options: 'Unemployment Claim', 'Weekly Certification', 'Update Address', 'Benefit Maintenance', 'Inquiry', 'Correspondences', 'File Appeal', and 'View & Print 1099'. The bottom section of the page is divided into five columns: 'Stay Informed' (with social media links for Facebook, Twitter, and Email), 'Find it by Topic' (with links for Child Labor Laws, Employment and Training Services, Free Labor Posters, Workplace Safety Consultations, Labor Market Information, Labor Laws, Rehabilitation/Disability Services, Unemployment Appeals, Unemployment Benefits, Unemployment Rate, Unemployment Tax, and Work Permits), 'Find it by Audience' (with links for Workers, Job Seekers, and Employers / Businesses, plus contact information for the Department of Labor Freedom of Access), 'Find it by Agency' (with links for Bureau of Employment Services, Bureau of Labor Standards, Bureau of Rehabilitation Services, Bureau of Unemployment Compensation, and Center for Workforce Research and Information), and 'Services' (with logos for REEMPLOY ME, CareerCenter, and SafetyWorks!).

Figure 30: File Appeal path

Step 3: Select the Radio Button for the decision to be appealed. Click the **Next>** button to move to the next screen

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Home | Log out

APP-003

List of Decisions
* Required Information

Claimant SSN Claimant Name

Claims Adjudicator Decision(s)

Select	Decision	Issue Description - Issue Details	Employer Name	Decision Mail Date	Appeal Status
<input type="radio"/>	Denied	Discharge - Misconduct -	TARGET CORPORATION	11/13/2017	Appealed
<input type="radio"/>	Denied	Remuneration - REM - Only One Partial Week	MCCAIN FOODS USA INC	11/13/2017	Not Appealed

Next>

Figure 31: List of Decisions screen

A decision with "Appeal Status": Appealed, cannot be Appealed again until the current Appeal is resolved

Step 4: Complete the required fields on the File Appeal Information screen. Click the **Submit** button to complete the appeal filing process

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Welcome

Unemployment Claim Weekly Certification Update Address Benefit Maintenance Inquiry Correspondences **File Appeal** View & Print 1099 Home Log out

APP-011

File Appeal Information
* Required Information

Claimant SSN	MDOL SEIN	Claimant Name	
Issue Description	Remuneration	Employer Name	MCCAIN FOODS USA INC
Issue Details	REM - Only One Partial Week	Decision Mail Date	11/13/2017
		Decision Detail	Denied

1. * Appeal Filed Date: 11 / 16 / 2017

2. * Reason for Appeal: (Must not exceed 1000 characters)

3. * Interpreter Required: Yes No

a. If Yes, Select the Language: -Select-

i. If Other, enter language:

<Back Submit

Figure 32: File Appeal Information screen



Step 5: Review File Appeal Confirmation screen. Take note of the docket number provided, which may be requested when contacting the Bureau of Unemployment Compensation regarding the appeal



Figure 33: File Appeal Confirmation screen

Scenario 2f: View/print outgoing system correspondence

Step 1: Navigate to www.maine.gov/reemploye. On the login screen, enter the User ID and Password. Click

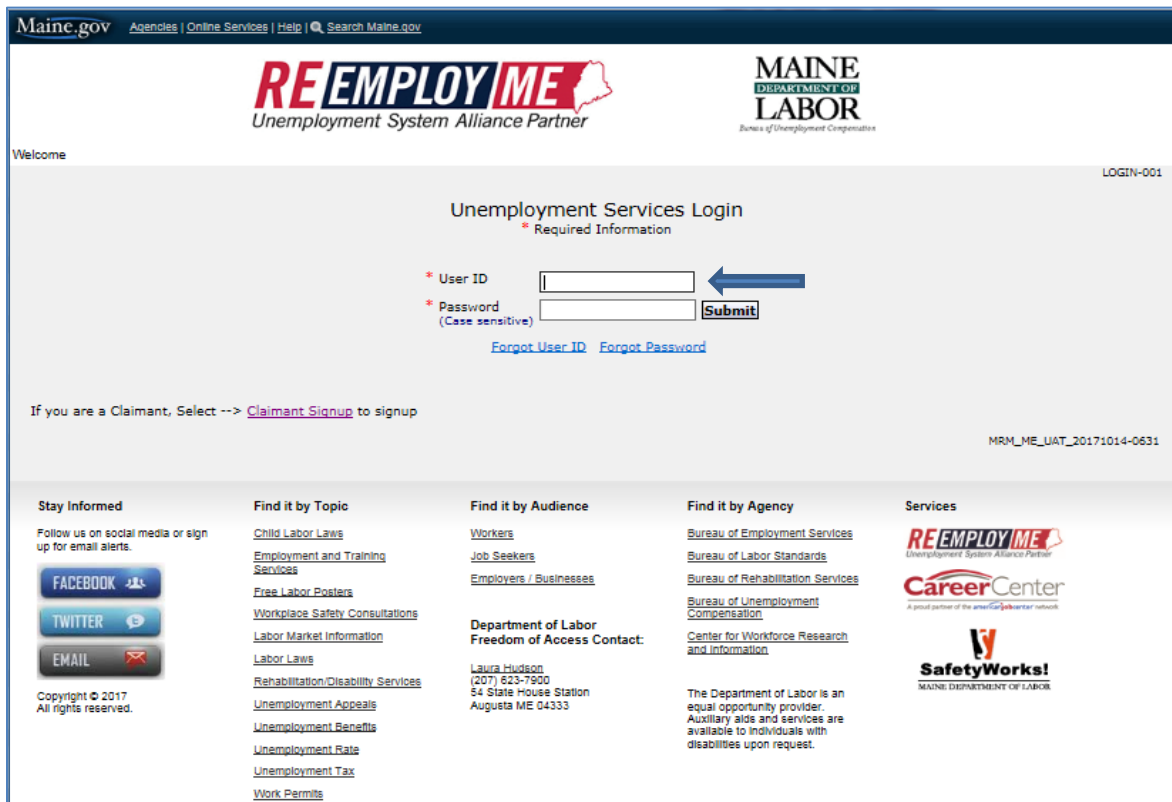


Figure 34: ReEmployME Login screen

Step 2: From the home screen, navigate to Correspondences. Click “Claimant Correspondence”, and “Benefits”

The screenshot displays the user interface of the Maine Department of Labor's online services. At the top, there is a navigation bar with 'Maine.gov' and links for 'Agencies', 'Online Services', and 'Help'. The main header features the 'REEMPLOY ME' logo and the 'MAINE DEPARTMENT OF LABOR' logo. Below the header, a 'Welcome' message is followed by a series of navigation tabs: 'Unemployment Claim', 'Weekly Certification', 'Update Address', 'Benefit Maintenance', 'Inquiry', 'Correspondences', 'File Appeal', and 'View & Print 1099'. The 'Correspondences' tab is active, showing sub-tabs for 'Claimant Correspondences' and 'Benefits'. A 'Quick Links' sidebar on the right lists various services. The main content area displays 'Claim Information' with details about the claim period, benefits, and certification. At the bottom, there are sections for 'Stay Informed', 'Find it by Topic', 'Find it by Audience', 'Find it by Agency', and 'Services'.

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Bureau of Unemployment Compensation

Welcome

Unemployment Claim | Weekly Certification | Update Address | Benefit Maintenance | Inquiry | **Correspondences** | File Appeal | View & Print 1099

Home | Log out

Claimant Correspondences | **Benefits**

Quick Links

- Unemployment Claim
- Weekly Certification
- Update Address
- Benefit Maintenance
- Inquiry
- Correspondences
- File Appeal
- View & Print 1099

Claim Information | Weekly Certification Status | Work

- Your Claim Period: **08/27/2017 to 08/26/2018**
- Maximum Weekly Benefits
- Total Amount of Benefits for Your Claim Period: **\$10868.00**
- Remaining Balance of Benefits:
- Your weekly certification for **09/09/2017** was used as your waiting period for the current claim period and will not be paid.

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Figure 35: Correspondence path

Step 3: Select the year for which to view Correspondence sent from the system, and [Search](#). Click on any of the document hyperlinks to load the corresponding PFD. Print as needed

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[Unemployment Claim](#) [Weekly Certification](#) [Update Address](#) [Benefit Maintenance](#) [Inquiry](#) [Correspondences](#) [File Appeal](#) [View & Print 1099](#)

Claimant Correspondences NMON-504

Year [Search](#)

51 items found, displaying 1 to 25. 1, 2, 3 [≥] [>>]

Correspondence Type	Correspondence Date
MONETARY DETERMINATION	11/16/2017
Notice of appointment to Claimant	11/16/2017
TARGET CORPORATION	11/15/2017
TARGET CORPORATION	11/15/2017
Declaration Of Dependency	11/15/2017
Non-mon Decision Letter	11/14/2017
Non-mon Decision Letter	11/14/2017
Non-mon Decision Letter	11/14/2017
TARGET CORPORATION	11/13/2017
MCCAIN FOODS USA INC	11/13/2017
TARGET CORPORATION	11/13/2017
Non-mon Decision Letter	11/13/2017
BUD'S SHOP N SAVE	11/13/2017
Non-mon Decision Letter	11/13/2017
BUD'S SHOP N SAVE	11/13/2017
MCCAIN FOODS USA INC	11/13/2017
RITE AID OF MAINE INC	11/08/2017
Non-mon Decision Letter	11/08/2017
RITE AID OF MAINE INC	11/08/2017
POULIN & TODD MCCOLLAR, JIM	11/08/2017
POULIN & TODD MCCOLLAR, JIM	11/08/2017
Demand for Payment Notice	11/03/2017
Address Change Notice	11/03/2017

51 items found, displaying 1 to 25. 1, 2, 3 [≥] [>>]

[Home](#)

Figure 36: Claimant Correspondences screen

Section 3: File Initial Claim / Weekly Certifications from claimant perspective

Scenario 3a: Instructions to file an Initial Claim

Step 1: Go to www.maine.gov/reemployme Login with username and password .

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Welcome LOGIN-001

Unemployment Services Login
* Required Information

* User ID

* Password (Case sensitive) **Submit**

[Forgot User ID](#) [Forgot Password](#)

If you are a Claimant, Select --> [Claimant Signup](#) to signup

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Figure 37: ReEmployME Login screen

Step 2: Select Unemployment Claim, then File Unemployment Claim from the first tab or from the Quick Links menu on the right side of the screen, and select File Unemployment Claim

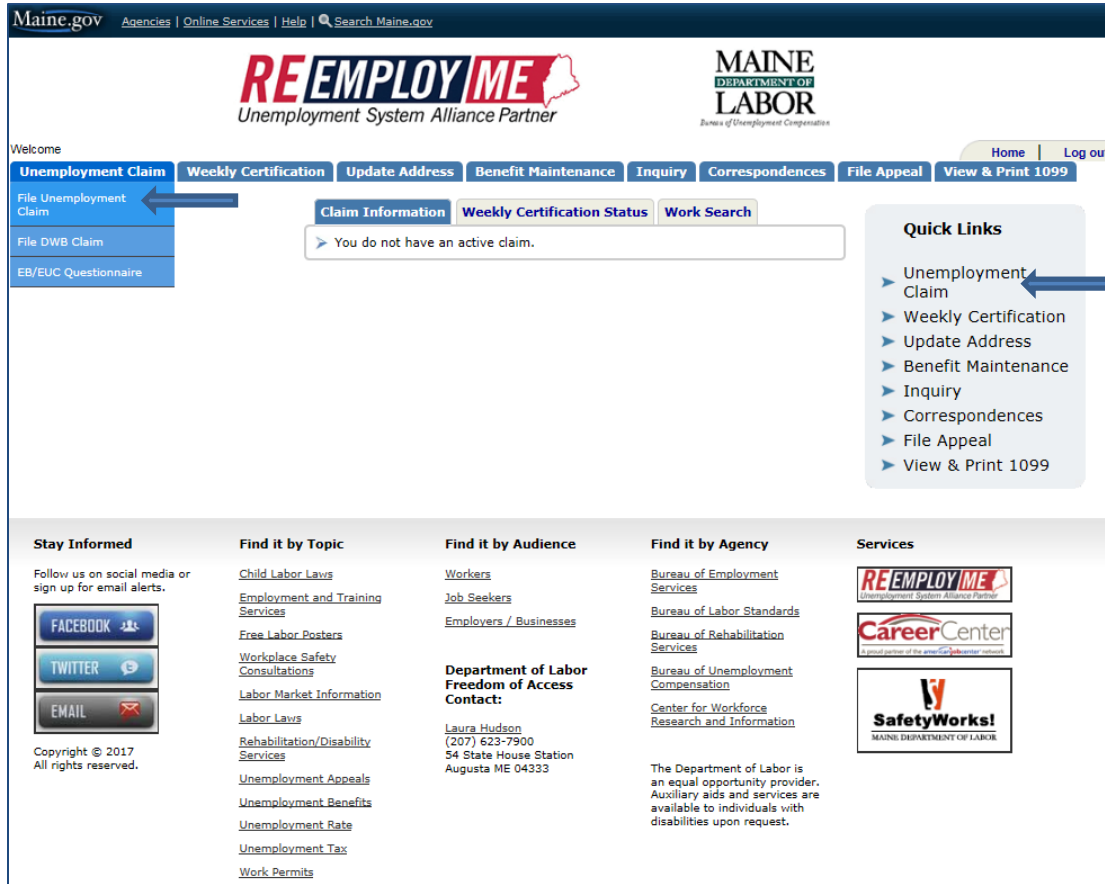


Figure 38: File Unemployment Claim path

Step 3: The Claim Filing Notification screen displays what information is needed to complete the initial claim. Click the **Next>** button to begin filing the Initial Claim

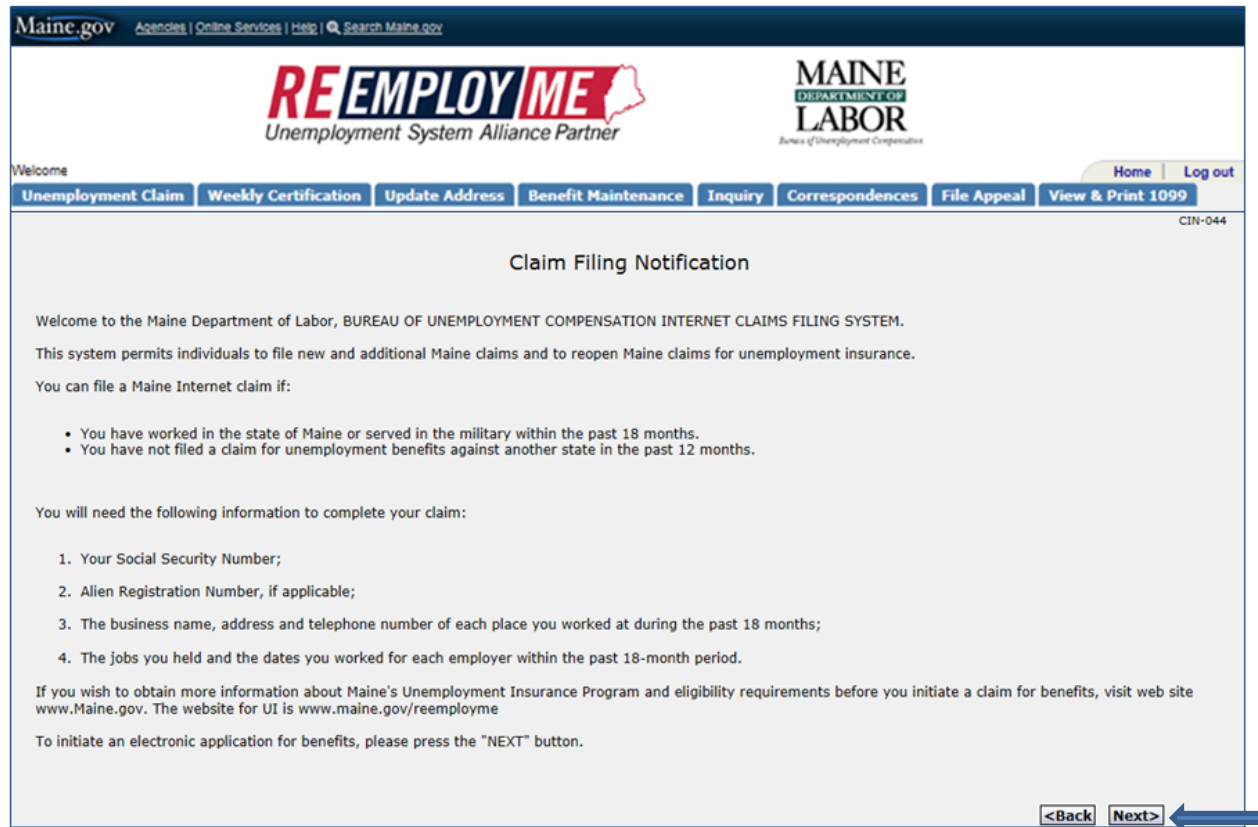


Figure 39: Claim Filing Notification screen

Step 4: Complete the Personal Information screen by answering all required questions, which are marked with a red asterisk (*). Click the **Next>** button to move to the next screen

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Unemployment Claim Weekly Certification Update Address Benefit Maintenance Inquiry Correspondences File Appeal View & Print 1099

CIN-002

Personal Information

* Required Information

- SSN
- * First Name
- Middle Initial
- * Last Name
- Other last name worked under since 07/01/2016
- * Date of Birth / /
- * Gender Male Female
- * Race ?
- * Ethnicity Not Hispanic / Latino Hispanic / Latino
- * Are you a U.S. citizen? Yes No
If No, provide following information
 - Alien Document Type
 - Alien Number
 - Expiration Date / /
- Do you have a disability? Yes No ?
a. If Yes, select type of disability
- * Are you a military veteran, transitional veteran or spouse of a military veteran? Yes No ?
- * Select the highest grade completed in school
- * Do you have a language preference? Yes No
a. If Yes, select the language
- * If you are the primary support of dependent children, do you wish to file for a dependency allowance? Yes No
a. If yes, Do you have dependent details? Yes No

Cancel **<Back** **Next>**

Figure 40: Personal Information screen

Step 5: Complete the Contact Details screen by answering all required questions, which are marked with a red asterisk (*). Make sure to enter a valid email address on questions 7 and 8. Click the **Next>** button to move to the next screen

Contact Details
* Required Information

Claimant SSN _____ Claimant Name _____

1. * Mailing Address
Address Line 1
Address Line 2
City
State/Province
ZIP Code
Country

2. * Residential Address
 Same as Mailing Address
 Different

3. * If Different, provide details below
Address Line 1
Address Line 2
City
State/Province
ZIP Code
Country

4. If Maine resident, select town

5. Telephone Number(s)
a. Primary Number
b. Secondary Number

6. * How may we contact you?
a. Email Acknowledgment
TERMS AND CONDITIONS:
By checking "I Agree", you agree and consent to receive notification of unemployment insurance correspondence by email. You will receive an email
 I AGREE to the Terms and Conditions of MDOL regarding electronic notifications.
(Note: If you are using an email spam blocker, you may need to add @maine.gov to your list of trusted email addresses or domain names in order to properly receive email correspondence from MDOL.)
By providing your email address you can receive important information faster and more efficiently. You can also reset your password using our convenient automated system.

7. * Email Address
8. * Confirm Email Address

Figure 41: Contact Details screen

Step 6: Verify Contact Details. Click the **Next>** button to move to the next screen

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Unemployment Claim Weekly Certification Update Address Benefit Maintenance Inquiry Correspondences File Appeal View & Print 1099

CIN-999

Verify Contact Details

Claimant SSN Claimant Name

Verify the mailing address you have created. To modify the address, select **Back**.

Claimant Mailing Address:
Address Line 1
Address Line 2
City
State
ZIP Code
Country

<Back Next>

Figure 42: Verify Contact Details screen

Step 7: Enter First and Last Name, and Date of Birth **exactly** as they appear on the Social Security Card. A mismatch may result in a delay of benefits. Click the **Next>** button to move to the next screen

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CIN-046

Security Confirmation

* Required Information

Claimant SSN Claimant Name

The Maine Department of Labor will validate identity information you provide with other state and federal agencies. Please enter your first name and last name as it appears on your Social Security Card and review the information to insure that it is correct before clicking "next".

1. SSN
2. * First Name on SSN Card
3. * Last Name on SSN Card
4. * Date of Birth / /

(If your Social Security Number is incorrect, you must contact the MDOL Call Center at 1-800-593-7660. A Customer Service Representative is available to assist you Monday through Friday from 8:00 AM to 12:30 PM.)

Figure 43: Security Confirmation screen

Step 8: Complete the File Claim screen by answering all required questions, which are marked with a red asterisk (*). Click the button to move to the next screen

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Welcome Home | Log out

Unemployment Claim | Weekly Certification | Update Address | Benefit Maintenance | Inquiry | Correspondences | File Appeal | View & Print 1099 CIN-051

File Claim

* Required Information

Claimant SSN Claimant Name

1. * From which location are you filing your claim? -Select- ▾
2. * Were you employed with the Federal government performing Federal civilian service after July 1, 2016?
a. If Yes, where did you work? -Select- ▾
3. * Were you discharged from the U.S. Military after July 1, 2016? Yes No
4. * Have you worked for any employer since July 1, 2016? Yes No
5. Select all the states where you worked after July 1, 2016 excluding Federal (Outside of USA) or Military employment. ?

<input type="checkbox"/> Alabama	<input type="checkbox"/> Guam	<input type="checkbox"/> Massachusetts	<input type="checkbox"/> New York	<input type="checkbox"/> Tennessee
<input type="checkbox"/> Alaska	<input type="checkbox"/> Hawaii	<input type="checkbox"/> Michigan	<input type="checkbox"/> North Carolina	<input type="checkbox"/> Texas
<input type="checkbox"/> Arizona	<input type="checkbox"/> Idaho	<input type="checkbox"/> Minnesota	<input type="checkbox"/> North Dakota	<input type="checkbox"/> Utah
<input type="checkbox"/> Arkansas	<input type="checkbox"/> Illinois	<input type="checkbox"/> Mississippi	<input type="checkbox"/> Ohio	<input type="checkbox"/> Vermont
<input type="checkbox"/> California	<input type="checkbox"/> Indiana	<input type="checkbox"/> Missouri	<input type="checkbox"/> Oklahoma	<input type="checkbox"/> Virgin Islands
<input type="checkbox"/> Colorado	<input type="checkbox"/> Iowa	<input type="checkbox"/> Montana	<input type="checkbox"/> Oregon	<input type="checkbox"/> Virginia
<input type="checkbox"/> Connecticut	<input type="checkbox"/> Kansas	<input type="checkbox"/> Nebraska	<input type="checkbox"/> Pennsylvania	<input type="checkbox"/> Washington
<input type="checkbox"/> Delaware	<input type="checkbox"/> Kentucky	<input type="checkbox"/> Nevada	<input type="checkbox"/> Puerto Rico	<input type="checkbox"/> West Virginia
<input type="checkbox"/> District Of Columbia	<input type="checkbox"/> Louisiana	<input type="checkbox"/> New Hampshire	<input type="checkbox"/> Rhode Island	<input type="checkbox"/> Wisconsin
<input type="checkbox"/> Florida	<input checked="" type="checkbox"/> Maine	<input type="checkbox"/> New Jersey	<input type="checkbox"/> South Carolina	<input type="checkbox"/> Wyoming
<input type="checkbox"/> Georgia	<input type="checkbox"/> Maryland	<input type="checkbox"/> New Mexico	<input type="checkbox"/> South Dakota	
6. * Do you have a definite date to return to work with your most recent employer?
a. If Yes, indicate the date you expect to return to work Yes No
MM / DD / YYYY
7. * Have you applied for Unemployment Insurance benefits in any state other than Maine in the last 12 months? Yes No
8. * Are you currently receiving or have you received Short Term Disability since July 1, 2016 ? Yes No
9. * Are you currently receiving or have you received Workers Comp. since July 1, 2016 ? Yes No

Cancel Finish Later <Back Next>

Figure 44: File Claim screen

Certain types of claimants require the assistance of a Bureau of Unemployment Compensation Customer Service Representative to complete. If the claim type falls into that category, the claimant will be directed to the toll-free number to speak to a representative

Step 9: The next few sections to be completed will ask about the claimant's Employment History. Click the **Next>** button to move to the next screen

The screenshot shows the 'REEMPLOY ME' portal interface. At the top, there are navigation links for 'Maine.gov', 'Agencies', 'Online Services', 'Help', and a search bar. The main header includes the 'REEMPLOY ME' logo and the 'MAINE DEPARTMENT OF LABOR' logo. A navigation menu contains buttons for 'Unemployment Claim', 'Weekly Certification', 'Update Address', 'Benefit Maintenance', 'Inquiry', 'Correspondences', 'File Appeal', and 'View & Print 1099'. The page title is 'Employment History'. Below the title, there are fields for 'Claimant SSN' and 'Claimant Name'. A message states: 'The following screens will ask you to provide details of your employment history during the past 18 months.' At the bottom, there are buttons for 'Cancel', 'Finish Later', '<Back', and 'Next>'. The user ID 'CIN-071' is visible in the top right corner.

Figure 45: Employment History screen

Step 10: Enter the Job Title which reflects the claimant's skills, job history, and interest. Click the **Search** button to show job titles that match the job description provided

The screenshot shows the 'Primary Job Title/Description Search' screen. It features the same navigation and branding as Figure 45. The page title is 'Primary Job Title/Description Search' with a note '* Required Information'. There are fields for 'Claimant SSN' and 'Claimant Name'. A message reads: 'Enter a Job Title which reflects your skills, job history and interest. This will help our system classify the types of jobs that may meet your qualifications and interest.' Below this, there is a list item '1. * Job Title' followed by a text input field and a question mark icon. A 'Search' button is positioned below the input field. At the bottom, there are buttons for 'Cancel', 'Finish Later', '<Back', and 'Next>'. The user ID 'CIN-075' is visible in the top right corner.

Figure 46: Primary Job Title/Description Search screen

Step 11: Select the Job Description that most closely matches the claimant’s skills, job history, and interest. Click the **Next>** button to move to the next screen

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CIN-075

Primary Job Title/Description Search

* Required Information

Claimant SSN Claimant Name

Enter a Job Title which reflects your skills, job history and interest. This will help our system classify the types of jobs that may meet your qualifications and interest.

1. * Job Title [?](#)

Search

*Select	Job Title	Job Description
<input type="radio"/>	Cooks, Institution and Cafeteria	Prepare and cook large quantities of food for institutions, such as schools, hospitals, or cafeterias.
<input type="radio"/>	Cooks, Fast Food	Prepare and cook food in a fast food restaurant with a limited menu. Duties of these cooks are limited to preparation of a few basic items and normally involve operating large-volume single-purpose cooking equipment.
<input type="radio"/>	Cooks, Restaurant	Prepare, season, and cook dishes such as soups, meats, vegetables, or desserts in restaurants. May order supplies, keep records and accounts, price items on menu, or plan menu.
<input type="radio"/>	Cooks, Short Order	Prepare and cook to order a variety of foods that require only a short preparation time. May take orders from customers and serve patrons at counters or tables.
<input type="radio"/>	Chefs and Head Cooks	Direct and may participate in the preparation, seasoning, and cooking of salads, soups, fish, meats, vegetables, desserts, or other foods. May plan and price menu items, order supplies, and keep records and accounts.
<input type="radio"/>	Cooks, All Other	All cooks not listed separately.

Cancel **Finish Later** **<Back** **Next>**

Figure 47: Primary Job Title/Description Search screen

Step 12: Confirm the Job Description that most closely matches the claimant's skills, job history, and interest. Add additional job skills as desired (up to five). Click the **Next>** button to move to the next screen

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CIN-076

Job Title Summary

* Required Information

Claimant SSN : Claimant Name :

Job Title Summary

Job Description	Work Experience ?	Last Job Skill ?	
Cooks, Restaurant	<input type="text"/> Year(s) <input type="text"/> Month(s)	<input checked="" type="radio"/>	Delete

1. * Do you want to add another skill, job history or interest?
(You can add up to five (5) skills, job history or interest.) Yes No

[Cancel](#) [Finish Later](#) [<Back](#) [Next>](#)

Figure 48: Job Title Summary screen

Step 13: The system will review all wages reported by all employers for the claimant in the past 18 months, and will ask the claimant to provide Employment Details for each one. Complete the Employment Detail screen(s) by answering all required questions, which are marked with a red asterisk (*). Click the **Next>** button to move to the next screen

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CIN-072

Employment Details

Claimant SSN _____ Claimant Name _____

Employer Name EMPLOYER NAME [More Information](#)

1. * Did you work for this employer? Yes No

If Yes, provide the following information

a. Employment Start Date MM / DD / YYYY

b. Employment End Date MM / DD / YYYY

c. Job Title/Description _____

d. What was your rate of pay? _____

e. Reason you are no longer working with this employer
 i. If Voluntary Quit, select reason -Select-

f. Have you applied for, or are you receiving, a pension from this employer?
 (Do not include severance pay or Social Security benefits.) Yes No

g. Employer Telephone Number _____

h. Are you being paid by this employer during the time you are off work? Yes No

i. Are you receiving or have you received any short-term disability benefits from this employer since July 1, 2016? Yes No

j. During your current period of unemployment, have you received or will you receive any remuneration pay from this employer?
 i. If Yes, select all the remuneration type that you are receiving
 Bonus Pay
 Other (severance, holiday pay, vacation pay, wages in lieu of notice, terminal pay)

Cancel **Finish Later** **<Back** **Next>**

Figure 49: Employment Details screen

Step 14: Verify Employment Summary, which will list all employers in the last 18 months. Select to add additional employers if any are missing (for example a recent employer who has not yet reported any quarterly wages). Click the **Next>** button to move to the next screen

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CIN-005

Employment Summary

* Required Information

Claimant SSN Claimant Name

Employer Name	Employment Start Date	Employment End Date	Reason You Left	Action
	07/01/2016	09/30/2017	Lack of work / Laid off	Edit

1. * Have you worked for any other employer since July 1, 2016 ?
a. If Yes, select type of employer

Yes No


-Select-

Cancel Finish Later <Back Next>


Figure 50: Employment Summary screen

Step 15: Complete the Able and Available Details screen by answering all required questions, which are marked with a red asterisk (*). Click the **Next>** button to move to the next screen

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CIN-004

Able and Available Details

* Required Information

Claimant SSN	Claimant Name
1. * Are you currently self-employed?	<input type="radio"/> Yes <input type="radio"/> No
2. * Are you a corporate officer?	<input type="radio"/> Yes <input type="radio"/> No
3. * Are you currently working on commission basis?	<input type="radio"/> Yes <input type="radio"/> No
4. * Are you a professional athlete?	<input type="radio"/> Yes <input type="radio"/> No
5. * Have you refused an offer of work since your last day of employment?	<input type="radio"/> Yes <input type="radio"/> No
6. * Are you currently attending school or training?	<input type="radio"/> Yes <input type="radio"/> No
7. * Do you have a medical condition, disability or illness that will limit your ability to perform your normal work?	<input type="radio"/> Yes <input type="radio"/> No
8. * Can you accept full-time work?	<input type="radio"/> Yes <input type="radio"/> No
a. If No, select all the reasons that apply	<input type="checkbox"/> Child Care <input type="checkbox"/> Illness of immediate Family <input type="checkbox"/> Out of Area <input type="checkbox"/> Transportation <input type="checkbox"/> Other
9. * Are you a member of a union?	<input type="radio"/> Yes <input type="radio"/> No
a. If Yes, do you obtain job placement through the union hall? <small>Note: If you obtain job placement through a union hall, weekly check-ins with your union business agent may satisfy your work search requirements for the first six weeks that you are unemployed. You must provide a copy of union card showing current membership and dues paid to date. You must record your contacts with your union hall on your work search log you received in the mail.</small>	<input type="radio"/> Yes <input type="radio"/> No
10. * Does your regular occupation require shift work?	<input type="radio"/> Yes <input type="radio"/> No
a. If Yes, are you available to work in all shifts required by that occupation?	<input type="radio"/> Yes <input type="radio"/> No
i. If No, which shifts are you unable to work?	<input type="checkbox"/> First Shift <input type="checkbox"/> Second Shift <input type="checkbox"/> Third Shift
1. If Third Shift, select the reason	<input type="text" value="-Select-"/>
a. If Other, explain (Must not exceed 1000 characters)	<div style="border: 1px solid #ccc; height: 30px; width: 100%;"></div>
11. * How many hours per week did you normally work during last 18 months?	<input type="text"/>
12. * How many hours per week are you currently able and available to work?	<input type="text"/>

Figure 51: Able and Available Details screen

Step 16: Unemployment Insurance Benefits are subject to both State and Federal Tax withholding. Select whether the claimant wishes to have taxes withheld before payment is made. Click the **Next>** button to move to the next screen

The screenshot shows the 'Tax Withholding and Payment Option' screen. At the top, there is a navigation menu with options: Unemployment Claim, Weekly Certification, Update Address, Benefit Maintenance, Inquiry, Correspondences, File Appeal, and View & Print 1099. Below the menu is a progress bar with five green dots. The main heading is 'Tax Withholding and Payment Option' with a sub-heading 'Required Information'. There are two input fields: 'Claimant SSN' and 'Claimant Name'. Below these are two questions:

1. Do you want to have 10% of your Unemployment Insurance benefit payment withheld for Federal income tax? Yes No ?
2. Do you want to have 5% of your Unemployment Insurance benefit payment withheld for State income tax? Yes No ?

At the bottom, there is a note: 'You will automatically be enrolled to receive your benefit payments by an **Electronic Payment Card (EPC)**. If you would rather receive your payments by Direct Deposit into a checking or savings account, please go to the Benefits Maintenance Tab after submitting your claim, select Update Claimant Profile, and then Select Payment Options.' Below the note are buttons for 'Cancel', 'Finish Later', '<Back', and 'Next>'.

Figure 52: Tax Withholding and Payment Option screen

Step 17: Review the Benefits Right Information fully. Enter the last four digits of the Social Security Number. Click the **Next>** button to move to the next screen

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CIN-038

Benefit Rights Information

Required Information

You must read the Unemployment Insurance Benefit Rights Information(BRI) before your claim can be processed. To save/print this information, select [BENEFIT RIGHTS INFORMATION](#).

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YOUR BENEFIT RIGHTS AND RESPONSIBILITIES

1-800-593-7660
www.maine.gov/reemploye

To receive weekly benefits, you must meet the eligibility requirements. You are responsible for knowing what is required of you while you are claiming benefits. If you have any questions or doubts, it is important that you call 1-800-593-7660 and speak with an Unemployment Program Representative. Failure to satisfy your responsibilities in this program can jeopardize your ability to collect benefits. Therefore, it is important to rely only on someone who is thoroughly familiar with the current laws that govern the unemployment program.

TO BE ELIGIBLE FOR UNEMPLOYMENT BENEFITS YOU MUST:

- * Be unemployed, either totally or partially, through no fault of your own.
- * Be able and available for work and actively seeking work unless you have an agency approved waiver.
- * Serve a one week waiting period; benefits are not payable for this waiting period.
- * Be registered with the Maine CareerCenter unless you have an agency approved waiver.

ACTIVELY SEEKING WORK. You must make an active and sustained effort to seek work each week and keep verifiable documentation of work search efforts. Failure to provide requested work search information can result in the delay or loss of

Note that your employer(s) will be notified that a claim has been filed and will be given the opportunity to provide employment and separation information.

* Enter the last four digits of your Social Security Number as your electronic signature to acknowledge that you have read the BRI information.

Cancel Finish Later

<Back Submit

Figure 53: Benefits Rights Information screen

Step 18: Review the Important Weekly Certification Filing Instructions. Click the **Next>** button to move to the next screen

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CIN-039

Important Weekly Certification Filing Instructions

File Weekly Certifications

Please read the following information to certify that you understand this unemployment insurance claim process and what is expected of the claimant. If you accept it, then press the "Next" button to receive your confirmation number; otherwise, please close your internet browser. I understand that to be eligible for unemployment benefits:

1. I must file a weekly claim as instructed.
2. I must be able and available for work and actively seeking work.
3. I must report all periods of employment of any type and report any wages earned including tips or cash value provided for such employment.
4. I must report any offer of work that I refuse or any referrals made to work by the Maine CareerCenter or Maine JobLink that I refuse.
5. I must report any dismissal wages, wages in lieu of notice, termination pay, vacation pay, holiday pay, retroactive payments, bonuses, sickness and disability benefits, worker's compensation, retirement or pension payments excluding Social Security which are paid or payable to me for this period.
6. I certify that I am not seeking unemployment benefits under any other State or Federal unemployment insurance system for any part of this period.
7. I certify that my answers to the questions on this Internet application are true knowing that it is a criminal offense to make false statements to obtain benefits. Unemployment fraud is a Class D crime. If you are prosecuted in court and convicted, you are subject to a fine of not more than \$2000 and/or a jail term of not more than 364 days for each false statement or representation, or failure to disclose a material fact when filing your initial and weekly claims.

I have read and understand the above statements and wish to continue with the Internet unemployment claim filing process.

Next>

Figure 54: Important Weekly Certification Filing Instructions screen

Step 19: Review the Estimated Monetary Determination. Click the **Next>** button to move to the next screen

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CIN-015

Estimated Monetary Determination

Claimant SSN _____ Claimant Name _____

Weekly Benefit Amount	
Maximum Benefit Amount	
Claim Effective Date	11/12/2017
Benefit Year End Date	11/11/2018

For information on the above table, select ?

*This is an estimate only and not a guarantee of Unemployment Insurance benefits. You will be mailed a Notice of Monetary Determination as your official notification of monetary eligibility within 5 business days.

Next>

Figure 55: Estimated Monetary Determination screen

Step 20: Claim Confirmation. Click the [Print](#) hyperlink to print a copy. Click the [Home](#) button to return to the home screen



Figure 56: Claim Confirmation screen

Any adverse answers on the claim may require that the claimant completes additional questionnaires providing additional information on the issue detected

Scenario 3b: Instructions to file a Weekly Certification

Step 1: Go to www.maine.gov/reemployme

Login with username and password, and click Submit.

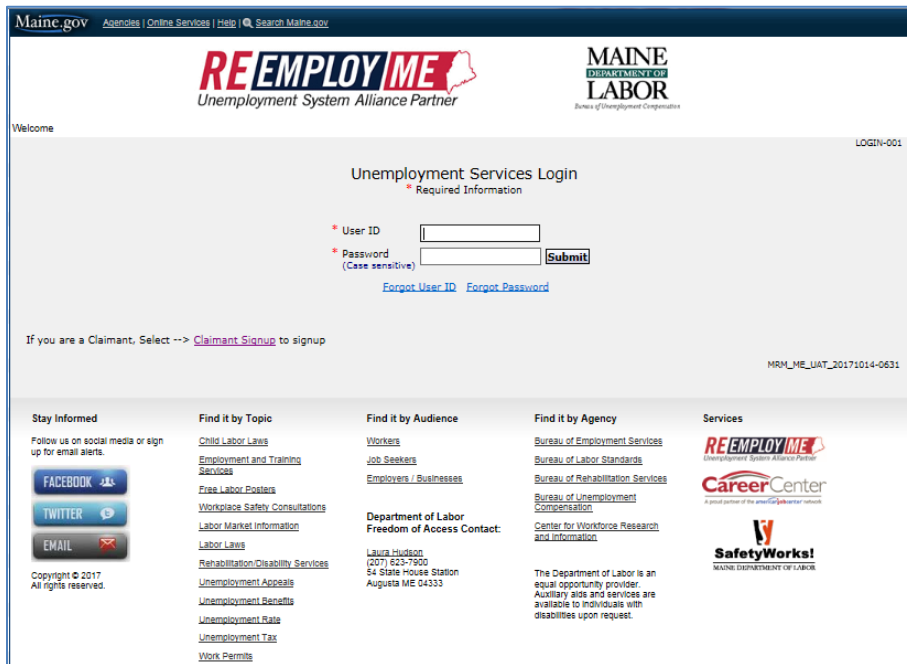


Figure 57: ReEmployME Login screen

Step 2: Select File Weekly Certification from the tabs at the top of the screen,, or from the Quick Links on the right side of the screen.

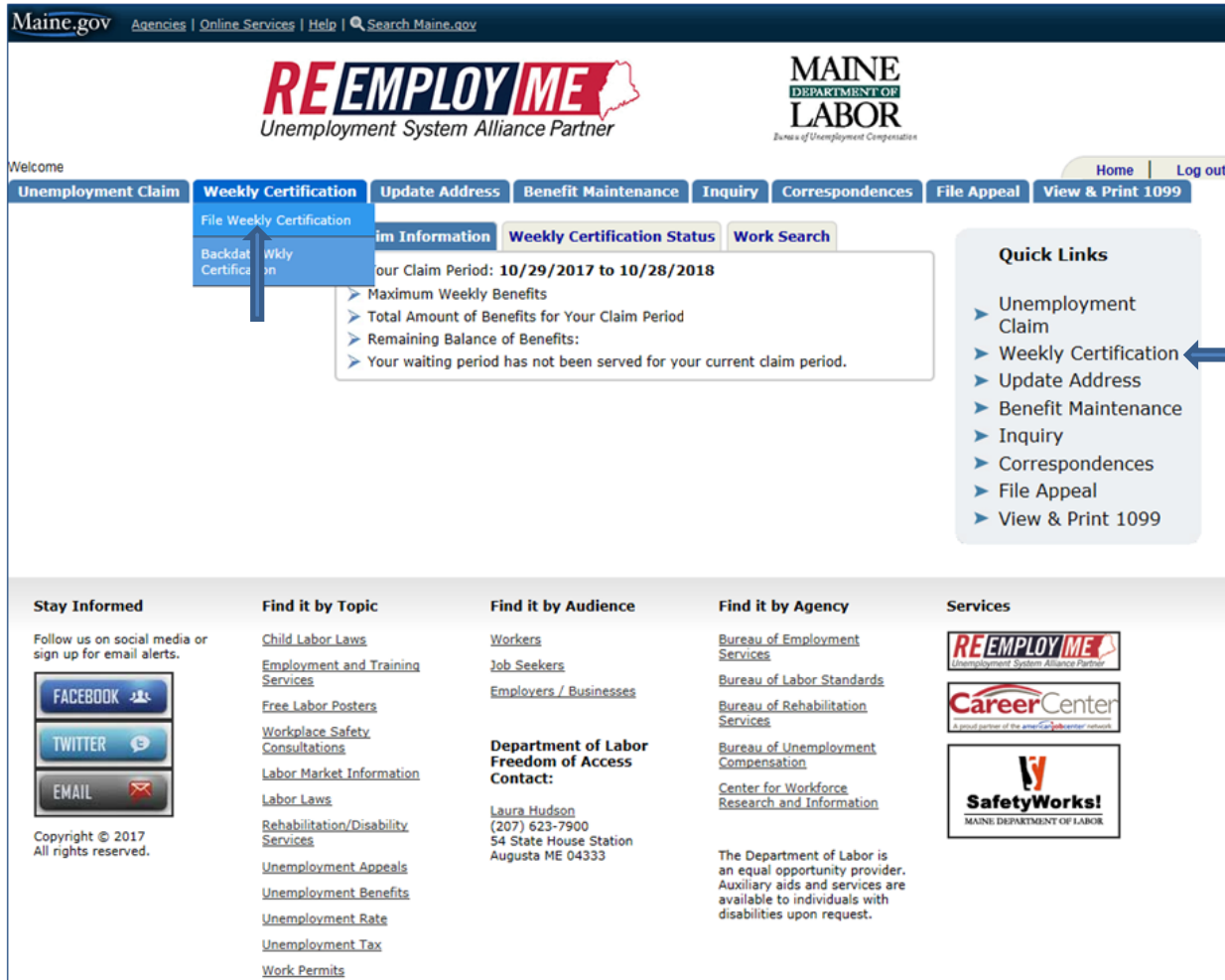


Figure 58: File Weekly Certification path

Step 3: Complete the Work Search Questionnaire screen by answering all required questions, which are marked with a red asterisk (*). Click on the “I am not a robot” question until it shows a green checkmark ✓. Click the **Next>** button to move to the next screen

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WC-800

Work Search Questionnaire

* Required Information

Claimant SSN Claimant Name


Address

Answer the following questions for the week of:
Sunday, October 29, 2017 - Saturday, November 04, 2017.

Providing false information is punishable by law.

1. * Did you look for work during the week claimed? Yes No
2. * Did you participate in any scheduled CareerCenter reemployment services or related workshops during the week claimed or attend a Job Fair hosted by the Maine Department of Labor, or a Job Fair at which the Maine Department of Labor participated? Yes No
a. If yes, please select from the following:
3. If you answered No to both Question 1 and Question 2, explain why you did not look for work. (Must not exceed 1000 characters)

Failure to actively look for work as directed by MDOL may result in the denial of benefits for the week claimed.

I'm not a robot 
reCAPTCHA
Privacy - Terms

Next>

Figure 59: Work Search Questionnaire screen

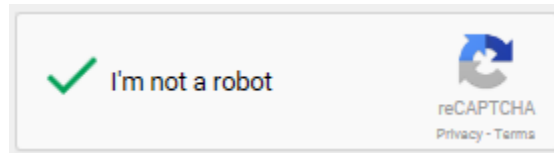


Figure 60: I'm not a robot confirmation

Step 4: Complete the Work Search Record Details screen by answering all required questions, which are marked with a red asterisk (*). Click the **Next>** button to move to the next screen

The **Search** function may be used to locate a specific employer in the Bureau's database, but it is not required to use this function

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Work Search Record Details

* Required Information

Claimant SSN Claimant Name

Input your work search details for the week of:
Sunday, October 29, 2017 - Saturday, November 04, 2017.

The date(s) of your work search contacts must fall within the week shown.
Providing false information is punishable by law.

- * Date of Work Search / /
- * Employer Name
- * Employer Address
 - Address Line 1
 - Address Line 2
 - City
 - State
 - ZIP Code
- Telephone Number --
- * Type of Work
- * Method Of Contact
 - If In Person, please enter Contact Name
 - If In Person, please enter Contact Title
 - If Telephone, please enter Telephone Number --
 - If E-Mail, please enter E-mail Address
 - If Online, please enter Website Address
 - If Fax, please enter Fax Number --
- * Result

Figure 61: Work Search Record Details screen

Step 5: Review the Work Search Summary Screen. Click to add additional work search efforts during the week claimed. Click the button to move to the next screen

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WC-806

Work Search Summary

* Required Information

Claimant SSN Claimant Name

Work search details for the week of:
Sunday, October 29, 2017 - Saturday, November 04, 2017.

Date of Contact	Employer Information	Employer Address	Type of Work	Method of Contact	Result of Contact	Action
11/01/2017	Wal Mart	1 MAIN ST SKOWHEGAN ME 04976 (111)111-1111		Website walmart.com	Application Submitted	Edit

You are expected to make a reasonable effort to obtain a job each week. Choose from one of the following options to proceed.

←

Note: Failure to meet MDOL work search requirements will result in the denial of benefits.

Figure 62: Work Search Summary screen

Step 6: Acknowledge the Work Search Record entered by entering the last four digits of the Social Security Number in the box on the screen. Click the **Next>** button to move to the next screen

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WC-804

Work Search Record Acknowledgement

* Required Information

Claimant SSN Claimant Name

MDOL audits the information you provided to verify its accuracy. Failure to comply with MDOL work search requirements may result in an overpayment, garnishment of future wages, and/or prosecution in Federal and/or State courts.

Acknowledgement

I certify the work search for the week beginning **Sunday, October 29, 2017** and ending **Saturday, November 04, 2017** is true and correct. This certification is made with my full knowledge that the law provides penalties for making false statements or concealing material facts to obtain or increase benefits.

* Enter the last four (4) digits of your SSN as your electronic signature verifying that you have read and understood the Acknowledgement statement above. ←

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Figure 63: Work Search Record Acknowledgement screen

Step 7: Click the **File Weekly Certification** button to move continue filing the Weekly Certification



Figure 64: File Weekly Certification screen

Step 8: Complete the Weekly Certification Details screen by answering all required questions, which are marked with a red asterisk (*). Click the **Next>** button to move to the next screen

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WC-004

Weekly Certification Details

* Required Information

Claimant SSN: _____ Claimant Name: _____
 Address: _____

Answer the following questions for the week of:
Sunday, October 29, 2017 - Saturday, November 04, 2017.
 Providing false information is punishable by law.

1. * If work had been available to you, would you have been physically able to work each day during the week? Yes No
2. * If work had been offered to you, would you have been available to work each day during the week? Yes No
3. * Did you refuse any work during the week? Yes No
4. * Did you refuse any job referral from the Job bank during the week? Yes No
5. * Did you work or perform any services during the week? Yes No
6. * Did you have any earnings through an odd job for the week? Yes No
 - a. If Yes, Enter the amount earned from the odd job. \$
7. * Do you have a definite date to return to full time employment? Yes No
 - a. If Yes, please enter the date you will return to full time employment. MM / DD / YYYY
 - b. If Yes, please select the Employer type. -Select-
8. * Did you attend jury selection or serve as a member of a jury during the week? Yes No
 - a. If Yes, Enter the amount of the stipend excluding mileage reimbursement. \$?
9. * Did you receive holiday pay, vacation pay, bonus pay, dismissal wages, wages in lieu of notice, or severance pay from any employer for the week? Yes No
 - a. If Yes, select atleast one type and enter the amount.

Select	Type	Amount(\$)
<input type="checkbox"/>	Holiday pay	\$ <input type="text"/>
<input type="checkbox"/>	Bonus pay	\$ <input type="text"/>
<input type="checkbox"/>	Vacation pay	\$ <input type="text"/>
<input type="checkbox"/>	Wages in lieu of notice	\$ <input type="text"/>
<input type="checkbox"/>	Dismissal Wages or Severance or Terminal Pay	\$ <input type="text"/>
10. * Did you begin receiving a pension other than social security or did a previously reported pension change? Yes No
11. * Do you wish to change the number of dependents from the prior claim week? Yes No
 - a. If yes, do you have the details of the dependent? Yes No

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Figure 65: Weekly Certification Details screen

Step 9: Verify the Weekly Certification Responses. Click the **Next>** button to move to the next screen

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WC-006

Verify Weekly Certification Responses

Claimant SSN _____ Claimant Name _____

Verify your responses for the week of:
Sunday, October 29, 2017 - Saturday, November 04, 2017.

- If work had been available to you, would you have been physically able to work each day during the week? Yes
- If work had been offered to you, would you have been available to work each day during the week? Yes
- Did you refuse any work during the week? No
- Did you refuse any job referral from the Job bank during the week? No
- Did you work or perform any services during the week? No
- Did you have any earnings through an odd job for the week? No
 a. If Yes, Enter the amount earned from the odd job. \$0.00
- Do you have a definite date to return to full time employment? No
- Did you attend jury selection or serve as a member of a jury during the week? No
 a. If Yes, Enter the amount of the stipend excluding mileage reimbursement. \$0.00
- Did you receive holiday pay, vacation pay, bonus pay, dismissal wages, wages in lieu of notice, or severance pay from any employer for the week? No
 a. If Yes, select at least one type and enter the amount.

Type	Amount(\$)
Holiday pay	\$0.00
Bonus pay	\$0.00
Vacation pay	\$0.00
Wages in lieu of notice	\$0.00
Dismissal Wages or Severance or Terminal Pay	\$0.00
- Did you begin receiving a pension other than social security or did a previously reported pension change? No
- Do you wish to change the number of dependents from the prior claim week? No

If you worked during the week claimed, Sunday through Saturday, you must report any earnings even if you do not get paid until later. Failure to report work and earnings may result in a fraud disqualification that will stop your benefits and result in an overpayment to the state of Maine. To change or enter any additional employment details select **Back**.
 To receive Unemployment Insurance benefits, Maine law requires that you be able and available for work. To change any of your answers for Questions 1-11, select **Back**.

[<Back](#) [Next>](#)

Figure 66: Verify Weekly Certification Responses screen

Step 10: Acknowledge the Weekly Certification entered by entering the last four digits of the Social Security Number in the box on the screen. Click the **Submit** button to move to the next screen

The screenshot shows the 'Weekly Certification Acknowledgement' screen. At the top, there is a navigation bar with 'Maine.gov' and links for 'Agencies', 'Online Services', 'Help', and 'Search Maine.gov'. Below this is a banner with the 'REEMPLOY ME' logo and the 'MAINE DEPARTMENT OF LABOR' logo. A secondary navigation bar contains links for 'Unemployment Claim', 'Weekly Certification', 'Update Address', 'Benefit Maintenance', 'Inquiry', 'Correspondences', 'File Appeal', and 'View & Print 1099'. The main content area is titled 'Weekly Certification Acknowledgement' and includes a section for '* Required Information' with fields for 'Claimant SSN' and 'Claimant Name'. A disclaimer states: 'MDOL audits the information you provided to verify its accuracy. Failure to properly report any earnings may result in an overpayment, garnishment of future wages, and/or prosecution in Federal and/or State courts.' Below this is an 'Acknowledgement' section with a paragraph of text: 'The information that I have provided is true to the best of my knowledge. I have neither applied for, nor received Unemployment Insurance benefits for the week beginning Sunday, October 29, 2017 and ending Saturday, November 04, 2017 from any other State, the United States, or Canada, except as claimed. This claim is made with my full knowledge that the law provides penalties for making false statements or concealing material facts to obtain or increase benefits.' A note below reads: '* Enter the last four (4) digits of your SSN as your electronic signature verifying that you have read and understood the Acknowledgement statement above.' To the right of this note is an empty text input box. At the bottom right, there are '<Back' and 'Submit' buttons. The page number 'WC-010' is visible in the top right corner.

Figure 67: Weekly Certification Acknowledgement screen

Step 11: Weekly Certification Confirmation screen. Click the **Home** button to return to the home screen



Figure 68: Weekly Certification Confirmation screen

Any adverse answers on the claim may require that the claimant completes additional questionnaires providing additional information on the issue detected

Scenario 3c: Instructions to File Work Search Efforts on Weekly Certification Filed on the Automated Phone Filing System

Step 1: Go to www.maine.gov/reemployme

Login with username and password, and click Submit.

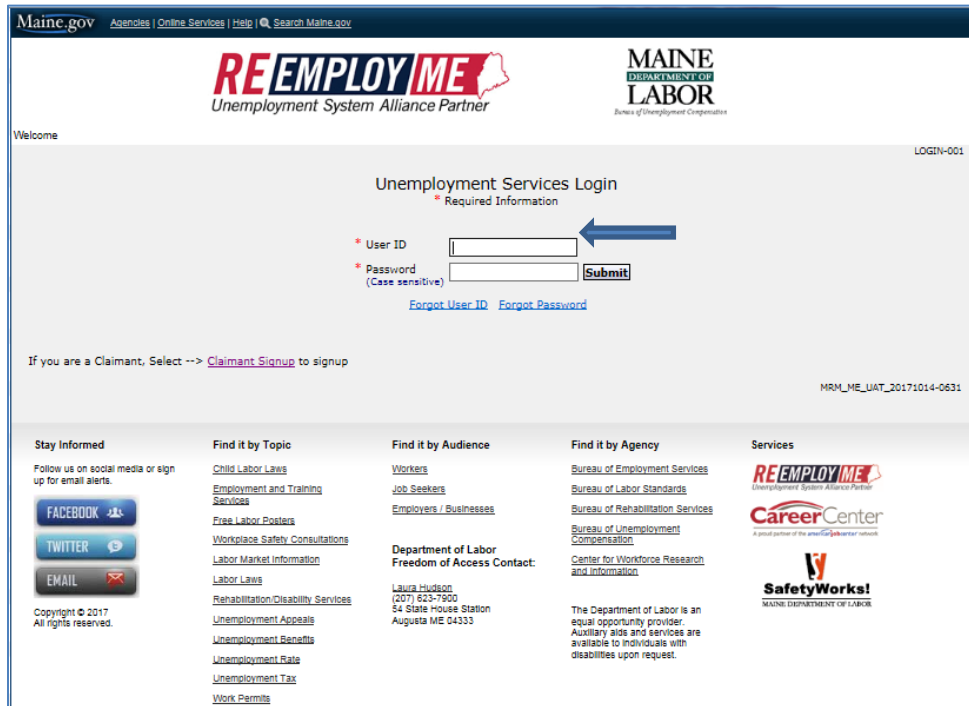


Figure 69: ReEmployME Login screen

Step 1: Select Weekly Certification

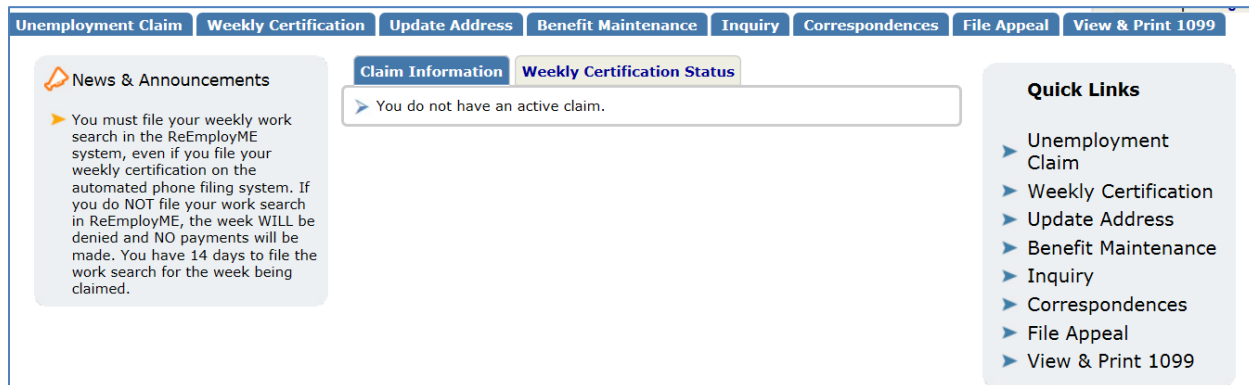


Figure 70-Weekly Certification

Step 2: Select IVR Work Search Filing

Unemployment Claim Weekly Certification Update Address Benefit Maintenance Inquiry Correspondences File Appeal View & Print 1099

News & Announcements

You must file your weekly work search in the ReEmployME system, even if you file your weekly certification on the automated phone filing system. If you do NOT file your work search in ReEmployME, the week WILL be denied and NO payments will be made. You have 14 days to file the work search for the week being claimed.

Claim Information Weekly Certification Status

You do not have an active claim.

- File Weekly Certification
- Backdate Wkly Certification
- IVR Work Search Filing

<Back Home

Figure 71-IVR Work Search Filing

Step 3: Enter the claim week ending date and select next

Unemployment Claim Weekly Certification Update Address Benefit Maintenance Inquiry Correspondences File Appeal View & Print 1099

WC-801

Enter Work Search Record

* Required Information

1. * Claim Week Ending Date MM / DD / YYYY

<Back Next>

Figure 72-Enter Work Search Record

Step 4: Answer questions accurately, Select I'm not a robot, and select Next

WC-800

Work Search Questionnaire

* Required Information

Claimant SSN Claimant Name

Address


Answer the following questions for the week of:
Sunday, February 25, 2018 - Saturday, March 03, 2018.

Providing false information is punishable by law.

1. * Did you look for work during the week claimed? Yes No
2. * Did you participate in any scheduled CareerCenter reemployment services or related workshops during the week claimed or attend a Job Fair hosted by the Maine Department of Labor, or a Job Fair at which the Maine Department of Labor participated? Yes No
 - a. If yes, please select from the following:
3. If you answered No to both Question 1 and Question 2, explain why you did not look for work. (Must not exceed 1000 characters)

Failure to actively look for work as directed by MDOL may result in the denial of benefits for the week claimed.

Please enter the letters and numbers as they appear in the picture.

I'm not a robot  reCAPTCHA
Privacy - Terms

Next >

Figure 73- Work Search Questionnaire

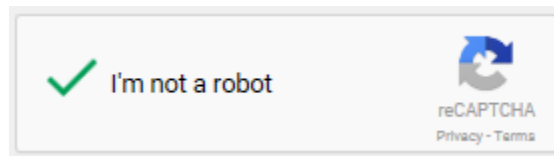


Figure 74: I'm not a robot confirmation

Step 4: Complete the Work Search Record Details screen by answering all required questions, which are marked with a red asterisk (*). Click the Next **Next>** button to move to the next screen. The Search **Search** function may be used to locate a specific employer in the Bureau's database, but it is not required to use this function.

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Welcome Home Log out

Unemployment Claim Weekly Certification Update Address Benefit Maintenance Inquiry Correspondences File Appeal View & Print 1099 WC-802

Work Search Record Details

* Required Information

Claimant SSN Claimant Name

Input your work search details for the week of:
Sunday, October 29, 2017 - Saturday, November 04, 2017.

The date(s) of your work search contacts must fall within the week shown.
Providing false information is punishable by law.

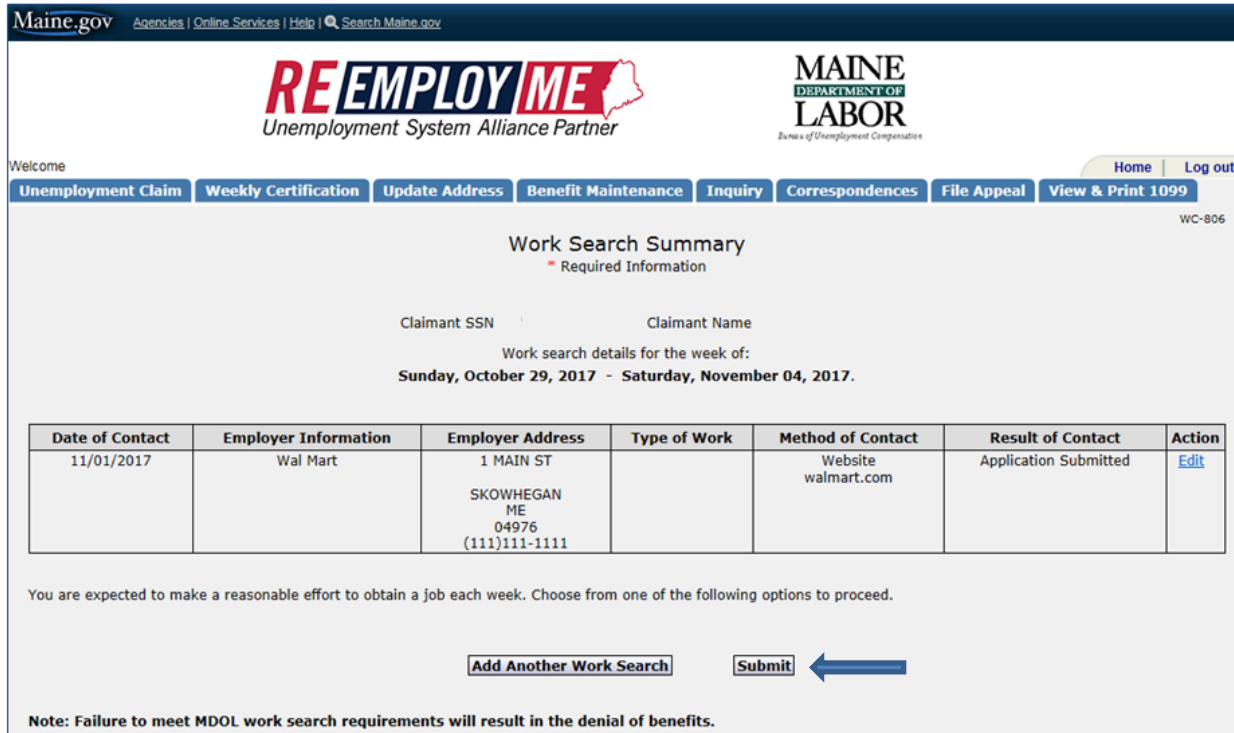
- * Date of Work Search / /
- * Employer Name **Search**
- * Employer Address
 - Address Line 1
 - Address Line 2
 - City
 - State
 - ZIP Code
- Telephone Number - -
- * Type of Work
- * Method Of Contact
 - If In Person, please enter Contact Name
 - If In Person, please enter Contact Title
 - If Telephone, please enter Telephone Number - -
 - If E-Mail, please enter E-mail Address
 - If Online, please enter Website Address
 - If Fax, please enter Fax Number - -
- * Result

<Back Next>

Figure 75: Work Search Record Details screen

Step 5: Review the Work Search Summary Screen. Click Add Another Work Search

Add Another Work Search to enter additional work search efforts during the week claimed. Click the Submit **Submit** button to move to the next screen.



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Welcome Home | Log out

Unemployment Claim Weekly Certification Update Address Benefit Maintenance Inquiry Correspondences File Appeal View & Print 1099 WC-806

Work Search Summary

Required Information

Claimant SSN Claimant Name

Work search details for the week of:
Sunday, October 29, 2017 - Saturday, November 04, 2017.

Date of Contact	Employer Information	Employer Address	Type of Work	Method of Contact	Result of Contact	Action
11/01/2017	Wal Mart	1 MAIN ST SKOWHEGAN ME 04976 (111)111-1111		Website walmart.com	Application Submitted	Edit

You are expected to make a reasonable effort to obtain a job each week. Choose from one of the following options to proceed.

Add Another Work Search **Submit** ←

Note: Failure to meet MDOL work search requirements will result in the denial of benefits.

Figure 76: Work Search Summary screen

Step 6: Acknowledge the Work Search Record entered by entering the last four digits of the Social Security Number in the box on the screen. Click the Next **Next>** button to move to the next screen.

The screenshot shows the 'Work Search Record Acknowledgement' screen on the Maine.gov website. The page header includes 'Maine.gov' and navigation links for 'Agencies', 'Online Services', 'Help', and 'Search Maine.gov'. The main content area features the 'REEMPLOY ME' logo and the 'MAINE DEPARTMENT OF LABOR' logo. A navigation bar contains links for 'Unemployment Claim', 'Weekly Certification', 'Update Address', 'Benefit Maintenance', 'Inquiry', 'Correspondences', 'File Appeal', and 'View & Print 1099'. The page title is 'Work Search Record Acknowledgement' with a sub-header '* Required Information'. Below this, there are fields for 'Claimant SSN' and 'Claimant Name'. A paragraph of text states: 'MDOL audits the information you provided to verify its accuracy. Failure to comply with MDOL work search requirements may result in an overpayment, garnishment of future wages, and/or prosecution in Federal and/or State courts.' This is followed by an 'Acknowledgement' section with a certification statement: 'I certify the work search for the week beginning **Sunday, October 29, 2017** and ending **Saturday, November 04, 2017** is true and correct. This certification is made with my full knowledge that the law provides penalties for making false statements or concealing material facts to obtain or increase benefits.' A note below reads: '* Enter the last four (4) digits of your SSN as your electronic signature verifying that you have read and understood the Acknowledgement statement above.' To the right of this note is an empty text input box with a blue arrow pointing to it from the right. At the bottom right, there are '<Back' and 'Next>' buttons. The page number 'WC-804' is visible in the top right corner.

Figure 77: Work Search Acknowledgement screen

Step 7: Confirmation screen will appear, Select Home.

