

MAINE BUC

REEMPLOYME TRAINING MANUAL

EMPLOYER WORKSHARE GUIDE

TRAINING & SUPPORT UNIT (TSU)



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Section 1: How to Create an Employer Portal account if you don't already have one

After an employer has registered their organization/business with the Maine Department of Labor, Bureau of Unemployment Compensation, employers are encouraged to create a ReEmployME Portal Account.

This is a self-service account through the ReEmployME system for employers to make adjustments, submit Tax & Wage Report, make payments and basically manage their account. Employer and TPA users will:

- be able to use reset password functionality.
- have Inquiry functions to review Tax & Wage Reports, Tax Payments, ability to upload Wage Files, and View Account Information.
- be able to update the "My User Profile" option.
- be able to complete a variety of Account Maintenance functions.
- have the ability to Update the Registration - BIA Information.
- be able to File Appeals.
- be able to make Online Payments.
- be able to review account balances.
- If under Audit, has ability to complete Questionnaire and Post Audit Response.
- be able to Maintain Bank Accounts.

Pre-Condition:

The Employer must be registered and have an Employer Account Number (EAN).

Scenario 1: Create ReEmployME Employer Self-Service Portal Account

Step 1: Go to ReEmployME website page via hyperlink: www.maine.gov/reemployme → Select “Create ReEmployME Portal Account – Employer or PEO” hyperlink

The screenshot shows the ReEmployME website interface. At the top, there's a navigation bar with 'Maine.gov', 'Agencies | Online Services | Help | Search Maine.gov', and the 'REEMPLOYME' logo. Below the logo, the text 'Unemployment System Alliance Partner' is visible. The 'MAINE DEPARTMENT OF LABOR' logo is also present. The main content area is divided into 'Employer Services' and 'Claimant Services'. Under 'Employer Services', there's a list of links: 'Register a New Business', 'Create ReEmployME Portal Account – Employer or PEO' (highlighted with a yellow box and a blue arrow), 'Create a ReEmployME Portal Account – Third Party Agent or Payroll Provider', 'Update BIA Information', 'Add Federal Identification Number (FEIN)', 'E-Response - Enroll, activate or update PIN, or maintain contact detail', 'Upload Documents for Remote Audit', and 'Employer Login'. At the bottom of the 'Employer Services' section, there's a 'BUC Staff Login' link. The 'Claimant Services' section includes links for 'Create ReEmployME Account', 'File a Claim', 'File Weekly Claim', 'Identity Verification', 'LWA Quick Access', 'Work Search Online Interview', and 'Claimant Login'.

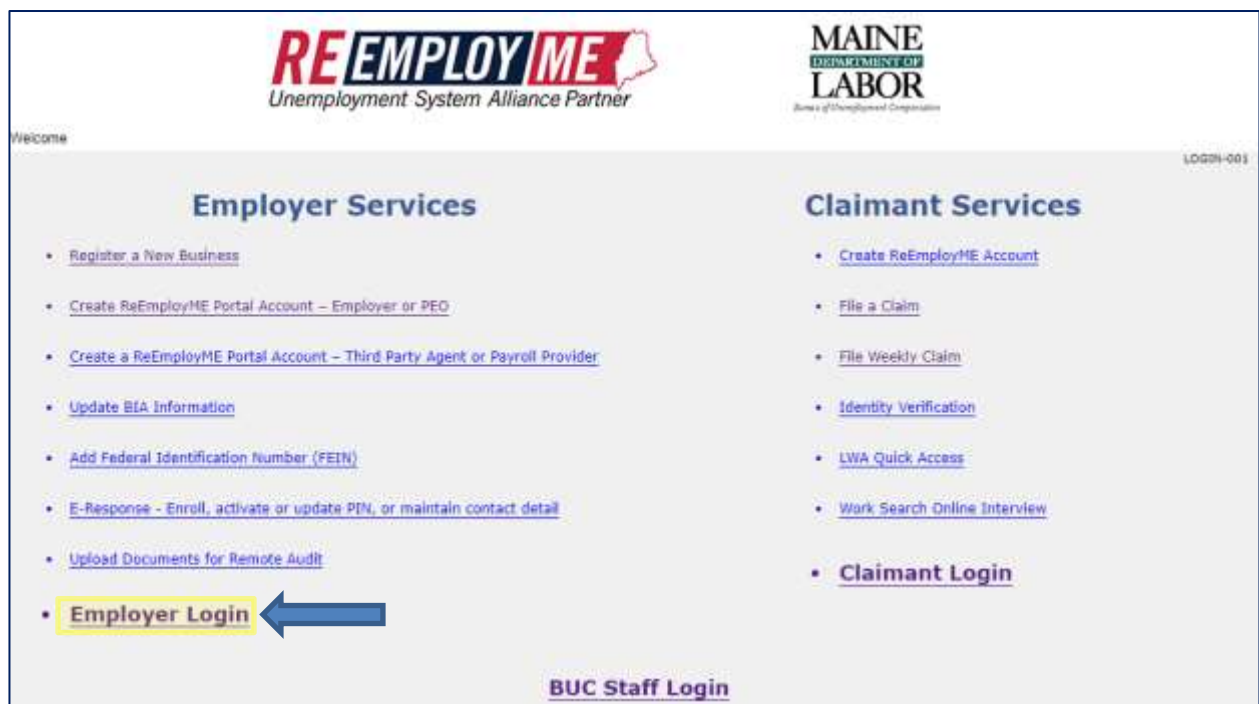
Step 2: The “Employer Signup” screen displays → employer Enters all Required information to create a User ID → Make note of User Id and Password → Select Submit

The screenshot shows the 'Employer Signup' screen on the ReEmployME website. The title 'Employer Signup' is centered, with 'Required Information' below it. On the left, there's a list of required fields: 1. Employer Account Number (EAN), 2. FEIN, 3. Create User ID, 4. Create Password, 5. Confirm Password, and 6. Information Submitted By (with sub-fields for First Name, Middle Initial, Last Name, Phone Number, Email Address, and Confirm Email Address). On the right, there are input fields for each of these items. A red arrow points to the 'Submit' button at the bottom right. A blue text box on the right side of the screen provides password requirements: 'Passwords must be 8 to 15 characters. The first character must be a letter. The password must contain at least one uppercase letter, one lowercase letter, one number and two special characters. The special characters must be one of the following: (i.e., !@#\$%&*_.)'. A blue arrow points from the 'Submit' button towards the bottom right corner of the screen.

Step 3: The “Employer Signup” Confirmation screen displays → the message will either be “Employer user signed up successfully.” <OR> The Employer Account Number (EAN) provided does not exist in the system



Step 4: To verify the Self-Service Portal Account is established → Go back to the ReEmployME website via hyperlink: www.maine.gov/reemployme → Select “Employer Login” hyperlink



Step 5: The “Email Notification – Correspondence Sign-up/Password Reset” screen displays → Enter Email Address → Confirm Email Address → Select Application → Check-off “I Agree” Terms and Conditions → Select “Next”

Welcome

REEMPLOY ME
Unemployment System Alliance Partner

MAINE
DEPARTMENT OF
LABOR
Bureau of Unemployment Compensation

Home | Log out

Inquiry | My User Profile | Account Maintenance | Employer Registration | Tax & Wage Report | File Appeal | Annual Tax Rate | Maintain Bank Accounts

Online Payment | 940 Certification Request | Email SignUp | Audit | Verify E-mail | Enter Abatement Request

EMAIL-003

Email Notification - Correspondence Sign-up/Password Reset
* Required Information

EAN
Employer Name

Employer Account

Employer Name

You have not signed-up for email communication, please provide an email ID and complete email sign-up now.

User ID	Email Address*	Confirm Email Address*	Application*
m.appraisal	Employer Email Address	Confirm Email Address	<input type="checkbox"/> Unemployment Claim Correspondence <input checked="" type="checkbox"/> Tax Correspondence <input type="checkbox"/> Password Reset

Email Acknowledgement

TERMS AND CONDITIONS:
By checking "I Agree", you agree and consent to receive notification of correspondence by email. You will receive an email notification at the email address you provided when correspondence is issued. It will be your responsibility to login to the ReEmployME unemployment system when

☒ I AGREE to the Terms and Conditions of MDOL regarding electronic notifications.

By Providing your email address you can receive important information faster and more efficiently.

Next>

Step 6: The “Email Notification – Verification” screen displays → Review → Select “Back” if adjustment needed <OR> Select “Submit”

Welcome

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DEPARTMENT OF
LABOR
Bureau of Unemployment Compensation

Home | Log out

Inquiry | My User Profile | Account Maintenance | Employer Registration | Tax & Wage Report | File Appeal | Annual Tax Rate | Maintain Bank Accounts

Online Payment | 940 Certification Request | Email SignUp | Audit | Verify E-mail | Enter Abatement Request

EMAIL-003

Email Notification - Verification
* Required Information

EAN
Employer Name

Employer Account

Employer Name

User ID	Email Address	Application	Verification Status
m.appraisal	Employer Email Address	Tax Correspondence Password Reset	Pending Verification

<Back | Submit

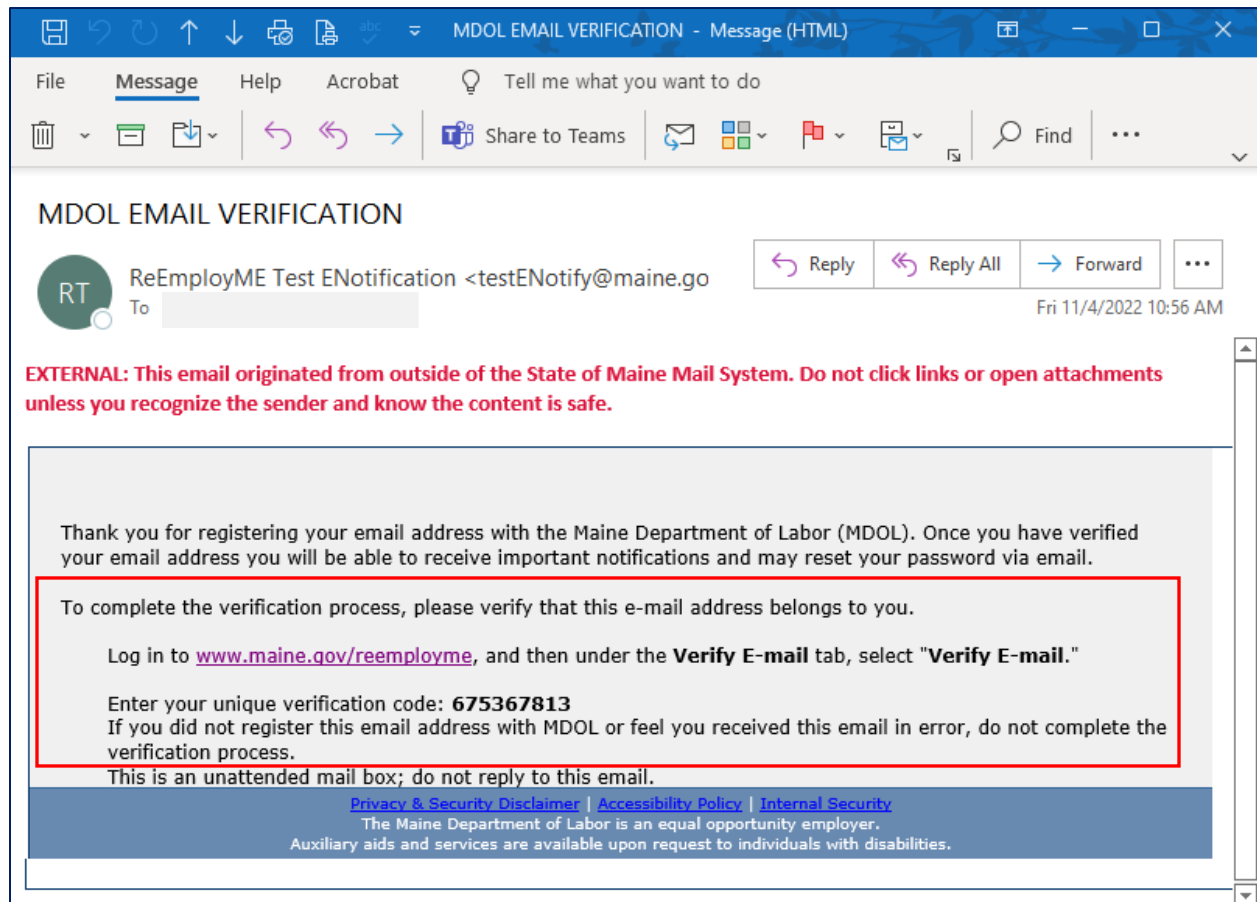
Step 7: The “Email Notification Confirmation” screen displays → Message Confirmation: “Email notification information saved”

The screenshot shows the 'REEMPLOY ME' logo at the top left, with the tagline 'Unemployment System Alliance Partner'. To the right is the 'MAINE DEPARTMENT OF LABOR' logo with the tagline 'Bureau of Unemployment Compensation'. Below the logos is a 'Welcome' message and a text input field for 'Employer Name'. A navigation bar contains buttons for 'Inquiry', 'My User Profile', 'Account Maintenance', 'Employer Registration', 'Tax & Wage Report', 'File Appeal', 'Annual Tax Rate', 'Maintain Bank Accounts', 'Online Payment', '940 Certification Request', 'Email SignUp', 'Audit', 'Verify E-mail', and 'Enter Abatement Request'. In the top right corner, there are 'Home' and 'Log out' links. The main content area displays 'Email Notification Confirmation' and a message: 'Email notification information saved.' A 'Home' button is located in the bottom right corner. The identifier 'SUC-002' is visible in the top right corner.

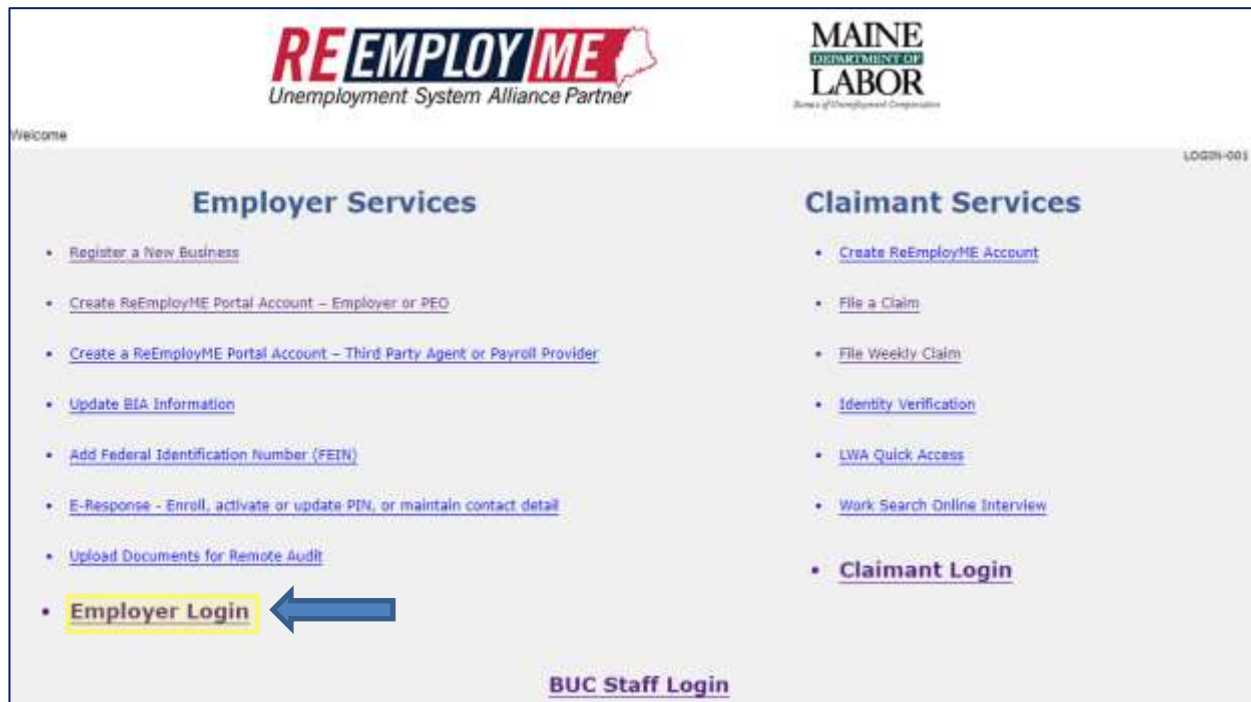
Step 8: The “Information Usage Disclosure” popup screen displays → Select “I accept”

The screenshot shows a dark background with a grid of icons and labels for various services: Inquiry, My User Profile, Account Maintenance, Employer Registration, Email SignUp, Audit, Verify E-mail, Enter Abatement Request, WorkShare, and Weekly Claim. Overlaid on this is a white 'Information Usage Disclosure' popup. The popup contains the text: 'Wage and other confidential unemployment compensation information may be requested and utilized for other governmental purposes, including, but not limited to, verification of an individual's eligibility for other government programs.' At the bottom of the popup are two buttons: 'I accept' and 'Cancel'.

Step 9: The employer will receive a system email notification “MDOL EMAIL VERIFICATION” → An example of this notification follows:



Step 10: Login to the ReEmployME website via hyperlink: www.maine.gov/reemployme → Select “Employer Login” hyperlink



Step 11: The employer ReEmployME Portal Account menu displays → To finish the MDOL Email Verification process → Employer Selects “Verify E-mail” hyperlink via Main Menu page <OR> Tab hyperlink



Step 12: The “Email Verification” screen displays → Enter the “Unique Verification Code” from the automatic email notification you received to your email address

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

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Welcome | Home | Log out

Inquiry | My User Profile | Account Maintenance | Employer Registration | Tax & Wage Report | File Appeal | Annual Tax Rate | Maintain Bank Accounts | Online Payment | 940 Certification Request | Email SignUp | Audit | Verify E-mail | Enter Abatement Request

EMAIL-001

Email Verification

Required Information

Please enter the verification code from the email.

Verification Code

Didn't get the Code?
Make sure that:
- Your Email address is correct.
- Check your Email account junk/spam folder for email from notification@maine.gov
- Add notification@maine.gov as a trusted contact in your email account's contact list

Cancel Next>

Step 13: The “Email Verification” screen redisplay with Confirmation message: *Your email address has been verified. You may sign up to receive correspondence via email if not already done. You may also reset your password should you forget it, or need to change it, via our automated system. Please make sure you check your email regularly.* → An example of this screen follows:

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

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Bureau of Unemployment Compensation

Welcome | Home | Log out

Inquiry | My User Profile | Account Maintenance | Employer Registration | Tax & Wage Report | File Appeal | Annual Tax Rate | Maintain Bank Accounts | Online Payment | 940 Certification Request | Email SignUp | Audit | Verify E-mail | Enter Abatement Request

SUC-002

Email Verification

Your email address has been verified. You may sign up to receive correspondence via email if not already done. You may also reset your password should you forget it, or need to change it, via our automated system. Please make sure you check your email regularly.

Home

Section 2: How to assign the WorkShare Role to your Employer Portal

In order to apply for WorkShare or do any modifications to the WorkShare plan an Employer must assign the role to their portal account.

Step 1: To add the WorkShare Role, the Employer will log in to ReME with their User ID and password
→ Select not a robot → *Submit*



The screenshot displays the 'REEMPLOY ME' login interface. At the top, there's a navigation bar with 'Maine.gov', 'Agencies', 'Online Services', 'Help', and a search bar. The main header features the 'REEMPLOY ME' logo and the 'MAINE DEPARTMENT OF LABOR' logo. The page is titled 'Unemployment Services Login' with a sub-header 'Required Information'. The login form includes a 'User ID' field with the value 'meuat' and a 'Password (Case sensitive)' field with masked characters. A blue arrow points to the 'Submit' button. Below the form, there are links for 'Forgot User ID' and 'Forgot Password'. At the bottom, there's a CAPTCHA section with a green checkmark and the text 'I'm not a robot'.

Step 2: Select / accept


Welcome STERNS LUMBER CO INC Home Log out

[Inquiry](#) [My User Profile](#) [Account Maintenance](#) [Employer Registration](#) [Tax & Wage Report](#) [File Appeal](#) [Annual Tax Rate](#) [Maintain Bank Accounts](#)


[Online Payment](#) [940 Certification Request](#) [Email SignUp](#) [Audit](#) [Verify E-mail](#) [Enter Abatement Request](#) [WorkShare](#)


Information Usage Disclosure

Wage and other confidential unemployment compensation information may be requested and utilized for other governmental purposes, including, but not limited to, verification of an individual's eligibility for other government programs.

 [I accept](#) [Cancel](#)


➤ Annual Tax Rate


 Online Payment


 Email SignUp

➤ Verify E-mail

➤ WorkShare

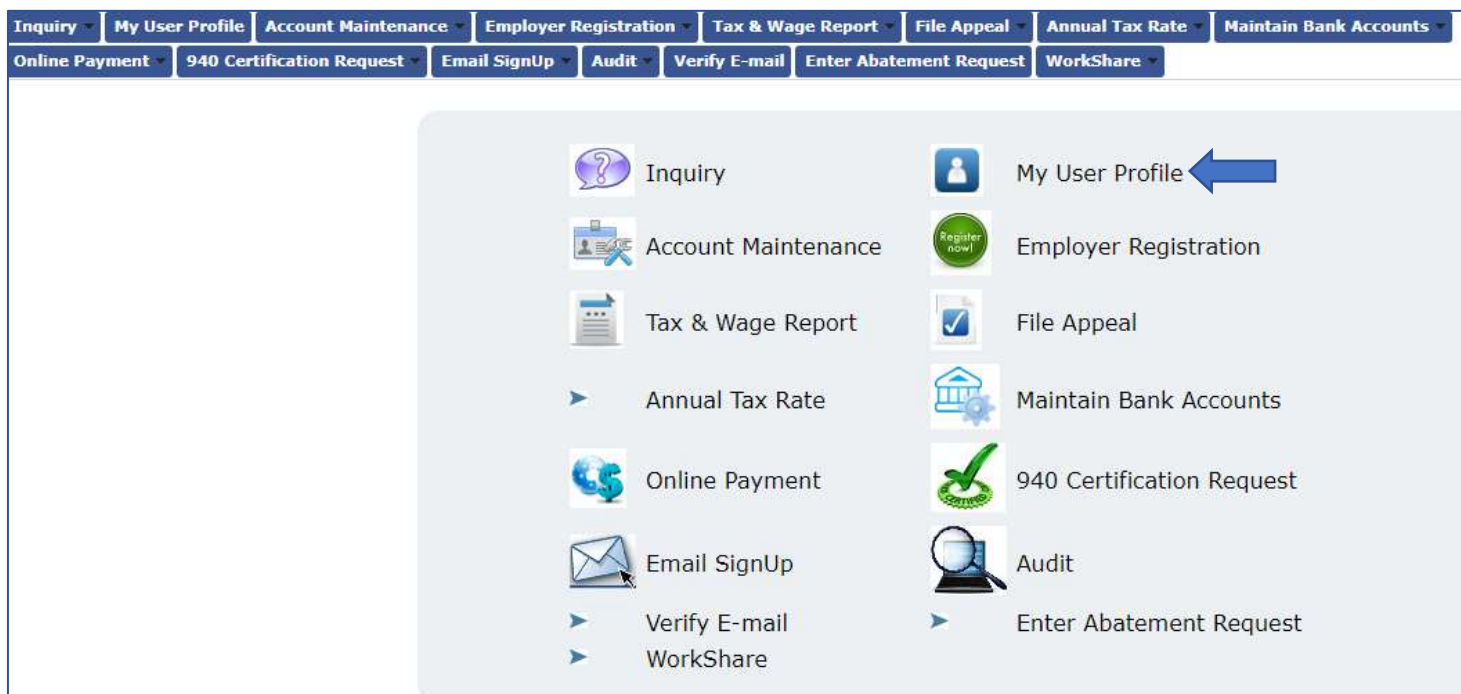
 Maintain Bank Accounts

 940 Certification Request

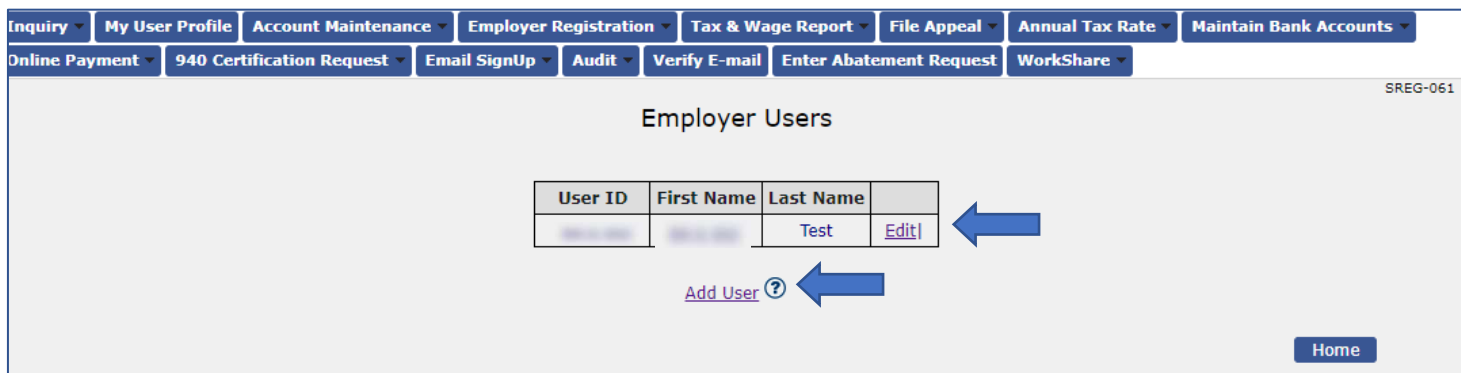
 Audit

➤ Enter Abatement Request

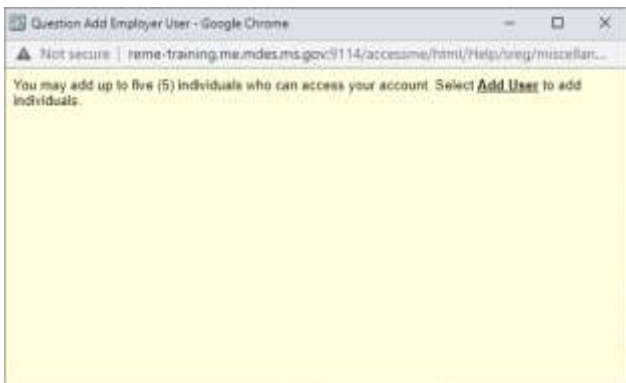
Step 3: Select *My User Profile*



Step 4: Select *Edit* to add the role to an existing User or *Add User* to add a new User



Helper text:



Step 5: Enter all required fields → Select *Workshare Application* → *Next*

Add Employer User
* Required Information

You can create up to five user IDs and passwords for the people working with you to use the ReEmploy ME online system.

- * First Name
- * Last Name
- * User ID
- * Password
- * Confirm Password
- * Select the functions you authorize this user to perform with the ReEmploy ME online system.
 - ☐ Account Maintenance
 - ☐ Tax Reporting
 - ☐ Unemployment Claims
 - ☒ WorkShare Application
- * Email Address
- * Confirm Email Address

STATEMENT OF ACKNOWLEDGEMENT
I, TEST TEST, do authorize this user to perform the specified services to my account using the Online Unemployment Service System.
☒ **Accept**

Cancel Add Another <Back Next>

Step 6: Verify the User has been added

Employer Users

User ID	First Name	Last Name	
newrole	Bill		Edit Delete

Add User ?

Home

Now that the Role has been added you can apply for the Workshare Program.

Section 3: How an Employer Files an Online Workshare Application

WorkShare is an Unemployment option that helps businesses retain their workforce during a temporary slowdown in work. The program allows employers to voluntarily reduce the hours of staff in a particular unit, shift, or company from 10% to 50%, in lieu of layoffs. The reduction must be temporary and not related to a seasonal, or intermittent down-turn. Employees of the business are allowed to collect a partial Unemployment benefit to help them offset the loss of income.

The WorkShare program helps businesses keep trained workers during a temporary downturn, and it helps workers stay connected to jobs and maintain their skills.

Step 1: To file for the WorkShare Application, the Employer will log in to ReME with their User ID and password → Select not a robot → *Submit*



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Welcome LOGIN-001

Unemployment Services Login
* Required Information

* User ID: me

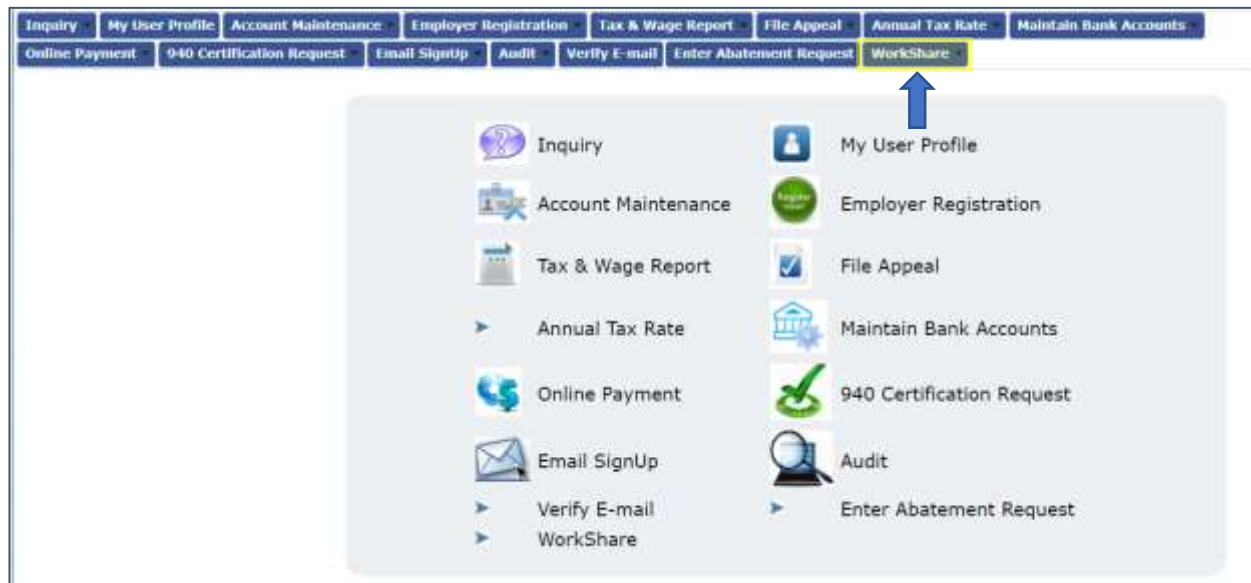
* Password (Case sensitive): *****

Submit

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

✓ I'm not a robot

Step 2: Select *Workshare*



Step 3: Select *Workshare application*



Step 4: The system will display the “WorkShare Employer Application Introduction” screen with links to view a PowerPoint and PDF Slideshow about how to retain the workforce during temporary economic slowdowns. On this screen, the Employer can also click the Calculation page hyperlink to determine if they are eligible for the WorkShare Program. After review of each section the Employer will select *Next*


WSH-002

WorkShare Employer Application - Introduction


WorkShare is an unemployment option that helps businesses retain their workforce during a temporary slowdown in work. The program allows employers to voluntarily reduce the hours of staff in lieu of layoffs. Employees of the business are allowed to collect a partial unemployment benefit to help them offset the loss of income.

The WorkShare program helps businesses keep trained workers during a temporary downturn, and it helps workers stay connected to jobs and maintain their skills.

WorkShare: Retaining Workforce during Temporary Slowdowns Slideshow
This is a PowerPoint presentation about how to retain your workforce during temporary economic slowdowns


[PowerPoint Slideshow](#) 
[Adobe PDF Document of Slideshow](#)

How WorkShare Works for Workers and Businesses
In lieu of a layoff, employers can temporarily reduce their work hours in a particular unit, shift or company from 10% to 50%. To help offset the loss of hours, the affected workers can receive a modified weekly unemployment benefit.

To be Eligible For This Option [\[click here for calculation page\]](#) 
The reduction must be temporary and not related to a seasonal, or intermittent down-turn.
The employee's hours must be reduced by at least 10% but not more than 50%.
Would have otherwise resulted in the layoff of at least 10% of the workers in the affected unit for 2-6 months.
Affect a unit of the business that normally works on a full-time basis.

For an Employee to be Eligible to Receive Unemployment Benefits
The employee has to be included in an affected unit of the business.
The employee would have had to have earned enough wages in the last 18 months to meet the regular qualifications for unemployment benefits.
The employee would have had to have been able and available to work their normally scheduled hours for their employer.
Benefits are paid on a percentage equal to the hours of reduction. Someone who has lost 25% of their hours would receive 25% of their normal weekly unemployment benefit.

Additional Information and FAQs
Applications for WorkShare must be filed by the employer. Employers should call (207) 623-6783 for more information.
[Maine WorkShare Law](#)



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

Step 5: The Employer will answer questions to see if they qualify for the WorkShare Program. These details will not be saved in the system and will not affect an Employers ability to file the WorkShare Application

WSH-004

WorkShare Employer Application: Self-Assessment

Interested in applying for WorkShare? Answer the following questions to see if you qualify.

1. Will you be using WorkShare to subsidize seasonal or intermittent employment? ☐ Yes ☐ No
2. Will the employees covered by WorkShare have their hours reduced less than 10% of their originally scheduled hours? [\[click here for calculation page\]](#) ☐ Yes ☐ No
3. Will the Employees covered by WorkShare have their hours reduced by more than 50% of their originally scheduled hours? [\[click here for calculation page\]](#) ☐ Yes ☐ No
4. Will the Employee's covered by WorkShare have their fringe benefits impacted? (e.g Reduction in 401K, removal of Health Insurance, or paid time off) ☐ Yes ☐ No
5. If the WorkShare program was not available, would layoffs still occur? ☐ Yes ☐ No
6. Will the hours be consistently reduced week to week within each unit? (A unit is defined as; a plant, department, shift or other definable unit consisting of 2 or more employees) ☐ Yes ☐ No

Step 6: Depending on the answers provided, the system will display the following message on screen:

If you answered 'Yes' to any question in 1-4 or 'No' to question 5 and/or 6, then WorkShare might not be a good fit for you. If you still have questions regarding your potential eligibility for WorkShare, please call 207-623-6783.

WSH-004

WorkShare Employer Application: Self-Assessment

Interested in applying for WorkShare? Answer the following questions to see if you qualify.

1. Will you be using WorkShare to subsidize seasonal or intermittent employment? ☒ Yes ☐ No
2. Will the employees covered by WorkShare have their hours reduced less than 10% of their originally scheduled hours? [\[click here for calculation page\]](#) ☒ Yes ☐ No
3. Will the Employees covered by WorkShare have their hours reduced by more than 50% of their originally scheduled hours? [\[click here for calculation page\]](#) ☒ Yes ☐ No
4. Will the Employee's covered by WorkShare have their fringe benefits impacted? (e.g Reduction in 401K, removal of Health Insurance, or paid time off) ☒ Yes ☐ No
5. If the WorkShare program was not available, would layoffs still occur? ☐ Yes ☒ No
6. Will the hours be consistently reduced week to week within each unit? (A unit is defined as; a plant, department, shift or other definable unit consisting of 2 or more employees) ☐ Yes ☒ No

If you answered 'Yes' to any question in 1-4 or 'No' to question 5 and/or 6, then WorkShare might not be a good fit for you. If you still have questions regarding your potential eligibility for WorkShare, please call 207-623-6783.

If you answered 'No' to questions 1-4, and 'Yes' to questions 5 & 6, you may qualify for WorkShare. Select *Next*


WSH-004

WorkShare Employer Application: Self-Assessment

Interested in applying for WorkShare? Answer the following questions to see if you qualify.

1. Will you be using WorkShare to subsidize seasonal or intermittent employment? ☐ Yes ☒ No
2. Will the employees covered by WorkShare have their hours reduced less than 10% of their originally scheduled hours? [\[click here for calculation page\]](#) ☐ Yes ☒ No
3. Will the Employees covered by WorkShare have their hours reduced by more than 50% of their originally scheduled hours? [\[click here for calculation page\]](#) ☐ Yes ☒ No
4. Will the Employee's covered by WorkShare have their fringe benefits impacted? (e.g Reduction in 401K, removal of Health Insurance, or paid time off) ☐ Yes ☒ No
5. If the WorkShare program was not available, would layoffs still occur? ☒ Yes ☐ No
6. Will the hours be consistently reduced week to week within each unit? (A unit is defined as: a plant, department, shift or other definable unit consisting of 2 or more employees) ☒ Yes ☐ No

If you answered 'No' to questions 1-4, and 'Yes' to questions 5 & 6, you may qualify for WorkShare.



Step 7: Review the details. Select *Back* to edit or *Next* to continue

WSH-005

WorkShare Employer Application: What you need for Application

- Name and contact information for:
 - WorkShare representative, and an alternate if applicable (Contact for, and coordination, of the WorkShare Plan Name, Email, Phone and Fax)
 - WorkShare certifying official (This individual will certify that the information on this application is complete and accurate and agrees to the terms of use.)
 - Agent for collective bargaining unit, if applicable (If employees are represented by a collective bargaining agreement, the Collective Bargaining Agent must certify that they have reviewed and agree to the application submitted by the employer.)
- WorkShare Address (Select an address that you want to use for the WorkShare program. This will not affect any other address currently with Maine Department of Labor.):
 - Physical
 - Mailing
- Signatures:
 - Certifying Official (This individual will certify that the information on this application is complete and accurate and agrees to the terms of use.)
 - Agent for collective bargaining unit, if applicable (If employees are represented by a collective bargaining agreement, the Collective Bargaining Agent must certify that they have reviewed and agree to the application submitted by the employer.)
- Participants/Units:
 - What is a Unit?
 - Names of employees
 - SSN
 - Hire dates
 - Usual weekly hours
 - Proposed hour reduction
 - Members of collective bargaining unit
- Plan for notification to employees



Step 8: The Employer will choose the Mailing Address from the drop down list or type in a new address. Then they will answer Q2 regarding Physical Address (if Physical Address is different from Mailing Address, choose Physical Address from the drop down list or provide a new address), then select *Next*

WSH-011

WorkShare Employer Application - Address Details

* Required Information

EAN: [REDACTED] FEIN: [REDACTED]
Employer Name: [REDACTED]

- Mailing Address**
(Choose mailing address from list or provide new address)
 - * Address Line 1: [REDACTED]
 - * Address Line 2: [REDACTED]
 - * City: AUBURN
 - * State: Maine
 - * ZIP Code: 04210
- Physical Address same as Mailing Address**
 Yes ☐ No ☒
- Physical Address**
(Choose physical address from list or provide new address)
 - * Address Line 1: [REDACTED]
 - * Address Line 2: [REDACTED]
 - * City: AUBURN
 - * State: Maine
 - * ZIP Code: 04210

Buttons: Cancel <Back Finish Later Next>

Step 9: The Employer will enter the Primary Representative and Official Responsible for WorkShare Certification (required) and Alternative Representative (optional), then select *Next*

WSH-012

WorkShare Employer Application - Representative Details

* Required Information

EAN: [REDACTED] FEIN: [REDACTED]
Employer Name: [REDACTED]

- Primary Representative**
(Primary contact for, and coordination, of the WorkShare Plan Name, Email, Phone and Fax.)
 - a. * Name: [REDACTED]
 - c. * Title: Owner
 - e. * Phone: 207 - 777 - 7777
 - g. * Fax: 207 - 777 - 7777
 - i. * Email: [REDACTED]
- Alternate Representative**
(Alternate contact for, and coordination, of the WorkShare Plan Name, Email, Phone and Fax.)
 - b. Name: [REDACTED]
 - d. Title: Owner
 - f. Phone: 207 - 777 - 7777
 - h. Fax: 207 - 777 - 7777
 - j. Email: [REDACTED]
- Official Responsible for WorkShare Certification**
(This individual will certify that the information on this application is complete and accurate and agrees to the terms of use.)
 - a. * Name: Melanie
 - b. * Email: melanie.

Buttons: Cancel <Back Finish Later Next>

Step 10: Answer the required WorkShare questions and upload the WorkShare Plan Employees Notification Template, then Select *Next*

WorkShare Employer Application - Hours & Layoff Details
* Required Information

EAN: [redacted] FEIN: [redacted]
Employer Name: [redacted]

1. * Plan Start Date: 05 / 01 / 2022

2. * Plan End Date: 05 / 28 / 2022

3. * Are fringe benefits impacted by the WorkShare Program?
(For the purposes of WorkShare, fringe Benefits is defined as Health Benefits and/or Retirement Benefits) ☐ Yes ☒ No


4. * If the WorkShare program was not available, would layoffs occur? ☐ Yes ☒ No

Employers are required to notify employees of the WorkShare plan, if approved

5. * Are you able to provide advanced notice to employees? ☒ Yes ☐ No

a. * How will employees be notified? Mail

6. * Upload WorkShare plan employees notification template

 WorkShare Plan employees notification template.docx

Buttons: Cancel, <Back, Finish Later, Next>

Step 11: Answer required fields → *Next*

WorkShare Employer Application - Bargaining Agent Details
* Required Information

EAN: [redacted] FEIN: [redacted]
Employer Name: [redacted]

1. * Are employees being represented by Collective Bargaining Agent?
(This section must be completed if employees are represented by a collective bargaining agreement. If more than one Agency, please provide details for all Agents. By signing below, the Collective Bargaining Agent agrees that they have reviewed and agree to the application submitted by the employer.) ☐ Yes ☒ No

Buttons: Cancel, <Back, Finish Later, Next>

Step 12: If Yes was selected to question 1 these additional questions will need to be answered. If no was selected it will advance you to step 14. Enter required fields → Select *Add Agent* to save the details of each agency

WorkShare Employer Application - Bargaining Agent Details
* Required Information

EAN: [Redacted] FEIN: [Redacted]
Employer Name: [Redacted]

1. * Are employees being represented by Collective Bargaining Agent? ☒ Yes ☐ No
(This section must be completed if employees are represented by a collective bargaining agreement. If more than one Agency, please provide details for all Agents. By signing below, the Collective Bargaining Agent agrees that they have reviewed and agree to the application submitted by the employer.)

Collective Bargaining Agent Information

2. * Agent's Name: John Smith
3. * Title: Agent
4. * Collective Bargaining Group: CBA Group
5. * Local: Local 123
6. * Upload Signed Document:
+ Browse
CBA Signed Document.docx

Add Agent

No.	Agent's Name	Title	Collective Bargaining Group	Local	Signed Document	Action
Collective Bargaining Agent Information not added						

Cancel <Back Finish Later Next>

Step 13: Select *Next*

Add Agent

No.	Agent's Name	Title	Collective Bargaining Group	Local	Signed Document	Action
1	John Smith	Agent	CBA Group	Local 123	CBA Signed Document.docx	Delete
2	Mary Jones	Agent	CBA Team	Local 456	CBA Signed Document.docx	Delete

Cancel <Back Finish Later **Next>**

Step 14: Enter required fields → *Next*

WSH-016

WorkShare Employer Application - Unit Details

* Required Information

EAN: [Redacted] FEIN: [Redacted]
Employer Name: [Redacted]

- * Unit Name
(A Unit means a specified plant, department, shift, or other definable unit consisting of two or more eligible employees to which a worksharing plan applies. [\[What is a Unit?\]](#))
Unit 1
- * Unit Start Date
(Unit Start date need to fall within the Plan Start and End Date. [\[What is a Unit?\]](#))
05 / 01 / 2022
- * Unit End Date
(Unit End date need to fall within the Plan Start and End Date. [\[What is a Unit?\]](#))
05 / 28 / 2022
- * Physical City
Auburn
- * Percentage (%) of reduction in hours of work weekly
15.00
- * Bargaining Agent
-Select-

Cancel <Back Finish Later Next>

Step 15: Enter Employee details → Add Employee → *Next*

There is a 2 Employee Minimum per Unit

WSH-017

WorkShare Employer Application - Unit Employee Details

* Required Information

EAN: [Redacted] FEIN: [Redacted]
Employer Name: [Redacted]

Unit Name: Unit 1 Reduction Percentage(%): 15.00
Unit Start Date: 05/01/2022 Unit End Date: 05/28/2022

- * SSN [Redacted]
- * First Name [Redacted]
- * Middle Name [Redacted]
- * Last Name [Redacted]
- * Normal working hours per week [Redacted]
- * Proposed weekly hours under WorkShare [Redacted]
- * Employee effective start date 05 / 01 / 2022
- * Employee effective end date 05 / 28 / 2022
- * Employee hire date MM / DD / YYYY
- * Is employee part of union? Yes No

Add Employee

No.	SSN	First Name	Middle Name	Last Name	Normal working hours per week	Proposed weekly hours under WorkShare	Employee effective start date	Employee effective end date	Employee hire date	Is employee part of union?
1	[Redacted]	[Redacted]	[Redacted]	[Redacted]	40.00	34.00	05/01/2022	05/28/2022	05/01/2021	No
2	[Redacted]	[Redacted]	[Redacted]	[Redacted]	36.00	30.00	05/01/2022	05/28/2022	05/01/2019	No

Cancel <Back Finish Later Next>

Step 16: Verify information → Back to edit or *Next*

WSH-015

WorkShare Employer Application - Unit List

* Required Information

EAN: [REDACTED] FEIN: [REDACTED]
Employer Name: [REDACTED]

No.	Unit Name	Unit Start Date	Unit End Date	Physical City	Unit Status	Percentage (%) of Reduction	Total Active Employees	Unit Details
1	Unit 1	05/01/2022	05/28/2022	Auburn	Pending	15.00	2	View Details

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

Step 17: Select Required fields → *Next*

WSH-016

WorkShare Employer Application - Agreement Details

* Required Information

EAN: [REDACTED] FEIN: [REDACTED]
Employer Name: [REDACTED]


- ☒ I understand that a Workshare plan takes effect on the date specified in the plan or on the first Sunday following the date on which the plan is approved by the Commissioner of Labor, whichever is later. It expires at the end of the 12th full calendar month after its effective date or on the date specified in the plan if that date is earlier, unless the plan is previously revoked by the Commissioner. If a plan is revoked by the Commissioner, it terminates on the date specified in the written order of revocation.
- ☒ I understand that Workshare benefits are charged to the account of the WorkShare employer.
- ☒ I understand that Direct reimbursement employers, those employers liable for payments in lieu of contributions, must reimburse the Unemployment Compensation Fund for the full amount of WorkShare benefits paid to their employees under an approved WorkShare plan.
- ☒ I agree to list all employees in the affected unit(s) on the WorkShare Plan Participant List.
- ☒ I agree to not use the Workshare Program to subsidize seasonal or intermittent employment.
- ☒ I agree to the reduction of hours for all affected employees to be not less than 10% and not more than 50%.
- ☒ I agree that the reduction in the usual weekly work hours is in lieu of a temporary layoff that would have affected at least 10% of all eligible employees in the affected unit.
- ☒ I agree to inform all impacted employees of the reduction and provide information on the plan (Start/End date of plan, employee responsibilities, etc.)
- ☒ I agree this plan has been approved in writing by each collective bargaining unit, if applicable. Section 6 of this application must be completed if employees are represented by a collective bargaining agent.
- ☒ I agree to provide any reports or information necessary for the proper administration, review, and evaluation of the plan to the Department of Labor upon request.
- ☒ I agree to adhere to all Maine WorkShare Laws as outlined in <http://www.mainelegislature.org/legis/statutes/26/Title26sec1198.html>
- ☒ The eligible employer allows eligible employees to participate, as appropriate, in training, including employer-sponsored training or worker training funded under the federal Workforce Innovation and Opportunity Act, Public Law 113-128, to enhance job skills if such training has been approved by the commissioner.

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

Step 18: Select Required fields → *Submit*

WorkShare Employer Application - Certify and Submit
* Required Information

EAN [REDACTED] FEIN [REDACTED]
Employer Name [REDACTED]

- ☒ * If approved for the WorkShare program or extension I agree to submit your "Employer Weekly Certification" on a weekly basis. It cannot be submitted prior to the week ending date of the week (after midnight on Saturday). I understand that failure to submit the certification on a timely basis may result in a delay or loss of benefits.
-  ☒ * If approved for the WorkShare program or extension I agree that any reason for increased/decreased hours follow the Workshare Plan requirements, meaning the reasons must impact the entire unit, with the exception of approved leave, which can result in other employees having increased hours to cover for the employee who is out.
- ☒ * If approved for the WorkShare program or extension I agree that in the event of any employee needing to be removed from the program that I shall submit a modified "Participant List" during the week the employee needs to be removed.

By clicking in the boxes above, I agree to the terms of this agreement once initialed and dated. Any failure to abide by the agreement as outline above will be reviewed and I will be contacted to determine causality and potential consequences up to termination of the Workshare Program.

4. Employer remarks:

5. * Name of certifying representative:

6. * Date: 05 / 10 / 2022

[Cancel](#) [<Back](#) [Submit](#)

Step 19: Confirmation screen appears

[Inquiry](#) [My User Profile](#) [Account Maintenance](#) [Employer Registration](#) [Tax & Wage Report](#) [File Appeal](#) [Annual Tax Rate](#) [Maintain Bank Accounts](#)
[Online Payment](#) [940 Certification Request](#) [Email SignUp](#) [Audit](#) [Verify E-mail](#) [Enter Abatement Request](#) [WorkShare](#)

SUC-002

WorkShare Employer Application

We have received your completed application. We will review it and you will receive a communication with approval or denial.

[WorkShare Dashboard](#)

Step 20: To verify this information was submitted, login to your account and select the Workshare dashboard

WSH-020

WorkShare Employer Application - Dashboard

EAN: [REDACTED]
Employer Name: [REDACTED]

Plan Start Date: 05/01/2022
Plan Status: Pending Verification
Name of certifying representative: Melanie

Mailing Address: 123 MA 04

Primary Representative
Name: [REDACTED]
Title: [REDACTED]
Phone: 207-777
Fax: 207-777
Email: [REDACTED]

Official Responsible for WorkShare Certification
Name: [REDACTED]
Email: melanie

FEIN: [REDACTED]

Plan End Date: 05/28/2022
Plan Submit Date: 05/11/2022

Physical Address: 123 MAIN 04210

Alternate Representative
Name: [REDACTED]
Title: [REDACTED]
Phone: 207-
Fax: 207-
Email: [REDACTED]

Collective Bargaining Agent Information

No.	Agent's Name	Title	Collective Bargaining Group	Local	Signed Document
Collective Bargaining Agent Information not added					

WorkShare Unit List

No.	Unit Name	Unit Start Date	Unit End Date	Physical City	Unit Status	Percentage (%) of Reduction	Total Active Employees	Unit Details
1	Unit A	05/01/2022	05/28/2022	Auburn	Pending	15.00	2	View Details

[Cancel](#)
[<Back](#)
[WorkShare Introduction](#)

Once a Representative has reviewed the application and approved it you will be sent correspondence with the details of the program.

If at any point in the Application process, you selected the *Finish Later* button the Application will be incomplete, and you will be able to return to it to complete it or a Representative can delete it.



If you selected finish later and then return to complete the Application, select the *Complete Application* to finish.



Section 4: Modify Employer Workshare Plan

Once the application has been approved the Employer can request modifications to the plan when needed. The Employer can log into their WorkShare dashboard to do these modifications.

Scenario 1: Log In to the WorkShare Dashboard

An Employer can make many changes such as add an employee or a unit and many other options to their WorkShare account online by logging in to their account and selecting the Workshare tab.

Step 1: Employer selects *Employer Login*

The screenshot displays the REEMPLOY ME portal interface. At the top, the REEMPLOY ME logo is on the left, and the MAINE DEPARTMENT OF LABOR logo is on the right. Below the logos, the text 'Welcome' is on the left and 'LOGIN-001' is on the right. The main content area is divided into two columns: 'Employer Services' on the left and 'Claimant Services' on the right. Under 'Employer Services', there is a list of links: 'Register a New Business', 'Create ReEmployME Portal Account – Employer or PEO', 'Create a ReEmployME Portal Account – Third Party Agent or Payroll Provider', 'Update BIA Information', 'Add Federal Identification Number (FEIN)', 'E-Response – Enroll, activate or update PIN, or maintain contact detail', 'Upload Documents for Remote Audit', and 'Employer Login'. The 'Employer Login' link is highlighted with a yellow background and a blue arrow pointing to it. Under 'Claimant Services', there is a list of links: 'Create ReEmployME Account', 'File a Claim', 'File Weekly Claim', 'Identity Verification', 'LWA Quick Access', 'Work Search Online Interview', and 'Claimant Login'. At the bottom center, there is a link for 'BUC Staff Login'.

REEMPLOY ME
Unemployment System Alliance Partner

MAINE
DEPARTMENT OF
LABOR
Bureau of Unemployment Compensation

Welcome LOGIN-001

Employer Services

- [Register a New Business](#)
- [Create ReEmployME Portal Account – Employer or PEO](#)
- [Create a ReEmployME Portal Account – Third Party Agent or Payroll Provider](#)
- [Update BIA Information](#)
- [Add Federal Identification Number \(FEIN\)](#)
- [E-Response – Enroll, activate or update PIN, or maintain contact detail](#)
- [Upload Documents for Remote Audit](#)
- **Employer Login**

Claimant Services

- [Create ReEmployME Account](#)
- [File a Claim](#)
- [File Weekly Claim](#)
- [Identity Verification](#)
- [LWA Quick Access](#)
- [Work Search Online Interview](#)
- [Claimant Login](#)

[BUC Staff Login](#)

Step 2: Enter User ID and password → *Submit*

LOGIN-001

Unemployment Services Login

* Required Information

* User ID:

* Password (Case sensitive):

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



Step 3: If the Employer has not signed up for email notifications this screen will pop up and require them to *enter email* → *Confirm email* → *Agree* → *Next*

Welcome [Home](#) [Log out](#)

[Inquiry](#) [My User Profile](#) [Account Maintenance](#) [Employer Registration](#) [Tax & Wage Report](#) [File Appeal](#) [Annual Tax Rate](#) [Maintain Bank Accounts](#)

[Online Payment](#) [940 Certification Request](#) [Email SignUp](#) [Audit](#) [Verify E-mail](#) [Enter Abatement Request](#) [WorkShare](#)

EMAIL-002

Email Notification - Correspondence Sign-up/Password Reset


* Required Information

EAN:

Employer Name:

You have not signed-up for email communication, please provide an email ID and complete email sign-up now.

User ID	Email Address*	Confirm Email Address*	Application*
<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="checkbox"/> Unemployment Claim Correspondence <input type="checkbox"/> Tax Correspondence <input checked="" type="checkbox"/> Password Reset






Email Acknowledgement

TERMS AND CONDITIONS:

By checking "I Agree", you agree and consent to receive notification of correspondence by email. You will receive an email notification at the email address you provided when correspondence is issued. It will be your responsibility to login to the ReEmployME unemployment system when notified of

☐ I AGREE to the Terms and Conditions of MDOL regarding electronic notifications.

 By Providing your email address you can receive important information faster and more efficiently.



Step 4: Select *Workshare* → *WorkShare Application*

The screenshot shows the Maine Department of Labor's WorkShare application interface. At the top, there is a navigation bar with various service links: Inquiry, Account Maintenance, Employer Registration, Third Party Agent, Tax & Wage Report, Cancel Payment, Tax/Wage Maintenance, Forms / Correspondence, System Administration, 940 Certification Request, Employee/Employer Relationship Investigation, Document Transfer To DMS, Tax Collection, TPS, Audit, Add/Update Process Cost, Enter Abatement Request, and WorkShare. The WorkShare dropdown menu is currently open, displaying three options: 'WorkShare Application/Dashboard' (highlighted with a yellow border and a blue arrow pointing to it), 'File Weekly Certification', and 'Force Workshare'. On the left side of the main content area, there is a 'News & Announcements' section with two red text alerts. The first alert asks users to confirm their mailing address for the 1099-G tax form by December 31. The second alert mentions higher call volumes on Mondays and Tuesdays and provides contact information. On the right side, there is a list of services with blue arrow icons next to them: Account Maintenance, Third Party Agent, Cancel Payment, Forms / Correspondence, 940 Certification Request, Document Transfer To DMS, TPS, Add/Update Process Cost, and WorkShare.

Step 5: The “WorkShare Employer Application Dashboard” is displayed. From here, Employers can update many details of the Workshare plan. The following scenarios describe how to make changes to the WorkShare Plan.

Welcome Home | Log out

[Inquiry](#) | [My User Profile](#) | [Account Maintenance](#) | [Employer Registration](#) | [Tax & Wage Report](#) | [File Appeal](#) | [Annual Tax Rate](#) | [Maintain Bank Accounts](#) |
[Online Payment](#) | [940 Certification Request](#) | [Email SignUp](#) | [Audit](#) | [Verify E-mail](#) | [Enter Abatement Request](#) | [WorkShare](#)

WorkShare Employer Application - Dashboard

EAN
Employer Name

Plan Start Date: 07/03/2022
Plan Status: Approved
Name of certifying representative: camben

Mailing Address: PO BOX 0310

Primary Representative
 Name: Camden
 Title: Mr
 Phone: 213-
 Fax: 342-
 Email: camc

Official Responsible for WorkShare Certification
 Name: camben
 Email: camden

FEIN

Plan End Date: 05/06/2023
Plan Submit Date: 07/27/2022

Physical Address: TEST TET AUGUSTA, ME 04330

Alternate Representative
 Name: N/A
 Title: N/A
 Phone: N/A
 Fax: N/A
 Email: N/A

Collective Bargaining Agent Information

No.	Agent's Name	Title	Collective Bargaining Group	Local	Signed Document
Collective Bargaining Agent Information not added					

WorkShare Unit List

No.	Unit Name	Unit Start Date	Unit End Date	Physical City	Unit Status	Percentage (%) of Reduction	Total Active Employees	Unit Details
1	Unit 45	07/03/2022	10/22/2022	Augusta	Approved	50.00	2	View Details

[Update Address](#) | [Update Representative](#) | [Update Bargaining Agent](#)
[Update Plan](#) | [Add Unit](#) | [Update Unit](#) | [Add Unit Employees](#) | [Update Unit Employees](#) | [Remove Unit Employees](#)
[Modification History](#) | [Previous Plan](#)

[Cancel](#) | [<Back](#) | [WorkShare Introduction](#)

Scenario 2: Update Employer Address

Follow **Steps 1 – 5** above to access the WorkShare Dashboard.

Step 6: Select *Update Address*.

Welcome Home | Log out

[Inquiry](#) | [My User Profile](#) | [Account Maintenance](#) | [Employer Registration](#) | [Tax & Wage Report](#) | [File Appeal](#) | [Annual Tax Rate](#) | [Maintain Bank Accounts](#) | [Online Payment](#) | [940 Certification Request](#) | [Email SignUp](#) | [Audit](#) | [Verify E-mail](#) | [Enter Abatement Request](#) | [WorkShare](#)

WSH-020

WorkShare Employer Application - Dashboard

EAN XXXXXXXXXX

FEIN XXXXXXXXXX

Employer Name XXXXXXXXXX

Plan Start Date 07/03/2022

Plan End Date 05/06/2023

Plan Status Approved

Plan Submit Date 07/27/2022

Name of certifying representative camben

Mailing Address PO BOX 0310

Physical Address TEST TET AUGUSTA, ME 04330

Primary Representative

Name Camden

Title Mr

Phone 213

Fax 342

Email cam

Alternate Representative

Name N/A

Title N/A

Phone N/A

Fax N/A

Email N/A

Official Responsible for WorkShare Certification

Name caml

Email cam

Collective Bargaining Agent Information

No.	Agent's Name	Title	Collective Bargaining Group	Local	Signed Document
Collective Bargaining Agent Information not added					

WorkShare Unit List

No.	Unit Name	Unit Start Date	Unit End Date	Physical City	Unit Status	Percentage (%) of Reduction	Total Active Employees	Unit Details
1	Unit 45	07/03/2022	10/22/2022	Augusta	Approved	50.00	2	View Details


[Update Address](#) | [Update Representative](#) | [Update Bargaining Agent](#)
[Update Plan](#) | [Add Unit](#) | [Update Unit](#) | [Add Unit Employees](#) | [Update Unit Employees](#) | [Remove Unit Employees](#)
[Modification History](#) | [Previous Plan](#)

Step 7: Update the required fields → *Submit*

WSH-011

WorkShare Employer Application - Address Details

* Required Information

EAN
Employer Name

FEIN |

1. Mailing Address
(Choose mailing address from list or provide new address)

* Address Line 1

Address Line 2

* City

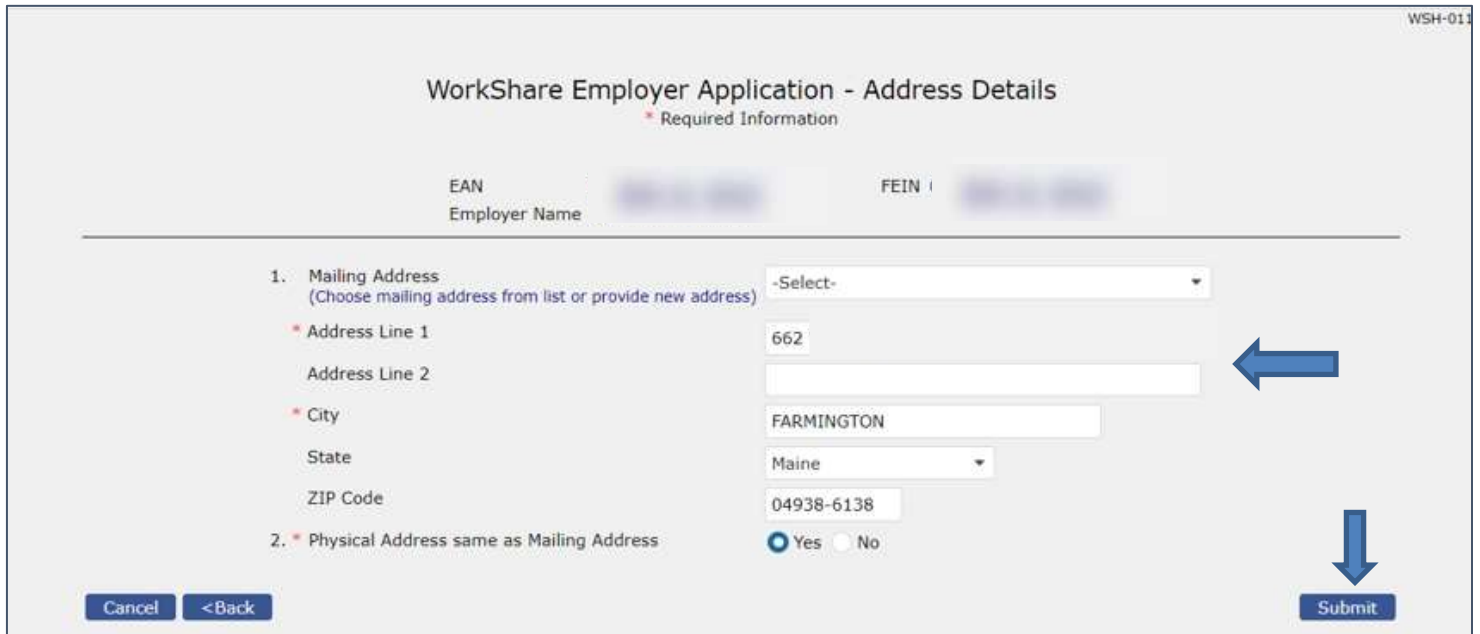
State

ZIP Code

2. * Physical Address same as Mailing Address

☒ Yes ☐ No

[Cancel](#) [<Back](#) [Submit](#)



Step 8: Confirmation screen appears

SUC-002

WorkShare Employer Application - Address Details

Address details updated successfully.

[WorkShare Dashboard](#)



Scenario 3: Update Representative

Follow **Steps 1 – 5** above to access the WorkShare Dashboard.

Step 6: Select *Update Representative*.

Welcome Home | Log out

[Inquiry](#) [My User Profile](#) [Account Maintenance](#) [Employer Registration](#) [Tax & Wage Report](#) [File Appeal](#) [Annual Tax Rate](#) [Maintain Bank Accounts](#)

[Online Payment](#) [940 Certification Request](#) [Email SignUp](#) [Audit](#) [Verify E-mail](#) [Enter Abatement Request](#) [WorkShare](#)

WSH-020

WorkShare Employer Application - Dashboard

EAN

Employer Name

FEIN

Plan Start Date 07/03/2022

Plan Status Approved

Name of certifying representative camben

Plan End Date 05/06/2023

Plan Submit Date 07/27/2022

Mailing Address PO BOX 0310

Physical Address TEST TET AUGUSTA, ME 04330

Primary Representative

Name Camden

Title Mr

Phone 213-

Fax 342-

Email camden@

Alternate Representative

Name N/A

Title N/A

Phone N/A

Fax N/A

Email N/A

Official Responsible for WorkShare Certification

Name camben

Email camden@

Collective Bargaining Agent Information

No.	Agent's Name	Title	Collective Bargaining Group	Local	Signed Document
Collective Bargaining Agent Information not added					

WorkShare Unit List

No.	Unit Name	Unit Start Date	Unit End Date	Physical City	Unit Status	Percentage (%) of Reduction	Total Active Employees	Unit Details
1	Unit 45	07/03/2022	10/22/2022	Augusta	Approved	50.00	2	View Details

[Update Address](#) | [Update Representative](#) | [Update Bargaining Agent](#)
[Update Plan](#) | [Add Unit](#) | [Update Unit](#) | [Add Unit Employees](#) | [Update Unit Employees](#) | [Remove Unit Employees](#)
[Modification History](#) | [Previous Plan](#)

[Cancel](#) | [Back](#) | [WorkShare Introduction](#)

Step 7: Enter the Representative's information → *Submit*

WSH-012

WorkShare Employer Application - Representative Details

Required Information

EAN FEIN

Employer Name

1. Primary Representative
(Primary contact for, and coordination, of the WorkShare Plan Name, Email, Phone and Fax.)

a. Name

c. Title

e. Phone

g. Fax

i. Email

2. Alternate Representative
(Alternate contact for, and coordination, of the WorkShare Plan Name, Email, Phone and Fax.)

b. Name

d. Title

f. Phone - -

h. Fax - -

j. Email

3. Official Responsible for WorkShare Certification
(This individual will certify that the information on this application is complete and accurate and agrees to the terms of use.)

a. Name

b. Email

Step 8: Confirmation screen appears

SUC-002

WorkShare Employer Application - Representative Details

Representative details updated successfully.

Scenario 4: Update Bargaining Agent

Follow **Steps 1 – 5** above to access the WorkShare Dashboard.

Step 6: Select *Bargaining Agent*.



Update Address | Update Representative | **Update Bargaining Agent**
 Update Plan | Add Unit | Update Unit | Add Unit Employees | Update Unit Employees | Remove Unit Employees
 Modification History | Previous Plan

Cancel <Back WorkShare Introduction

Step 7: Enter Agent information → Upload the signed Document → *Add Agent*

WSH-014

WorkShare Employer Application - Bargaining Agent Details

Required Information

EAN FEIN
 Employer Name

1. Are employees being represented by Collective Bargaining Agent? ☒ Yes ☐ No
 (This section must be completed if employees are represented by a collective bargaining agreement. If more than one Agency, please provide details for all Agents. By signing below, the Collective Bargaining Agent agrees that they have reviewed and agree to the application submitted by the employer.)

Collective Bargaining Agent Information

2. Agent's Name
 3. Title
 4. Collective Bargaining Group
 5. Local
 6. Upload Signed Document([Download Template](#))

Browse

Maine Unemployment_103559893_Disclosure_Client.V4 (1).pdf

Add Agent **Clear**

No.	Agent's Name	Title	Collective Bargaining Group	Local	Signed Document	Action
Collective Bargaining Agent Information not added						

Cancel <Back **Submit**

Step 8: The Agent and the uploaded document appear on the bottom of the screen. Select *Submit*

WSH-014

WorkShare Employer Application - Bargaining Agent Details

* Required Information

EAN FEIN
Employer Name

1. * Are employees being represented by Collective Bargaining Agent? ☒ Yes ☐ No
(This section must be completed if employees are represented by a collective bargaining agreement. If more than one Agency, please provide details for all Agents. By signing below, the Collective Bargaining Agent agrees that they have reviewed and agree to the application submitted by the employer.)

Collective Bargaining Agent Information

2. * Agent's Name

3. * Title

4. * Collective Bargaining Group

5. * Local

6. * Upload Signed Document([Download Template](#))

No.	Agent's Name	Title	Collective Bargaining Group	Local	Signed Document	Action
1	Shariq	Manager	1	Yes	Maine Unemployment_103559893_Disclosure_Client.V4 (1).pdf	Edit/Delete

Step 9: Confirmation screen appears

SUC-002

Inquiry
My User Profile
Account Maintenance
Employer Registration
Tax & Wage Report
File Appeal
Annual Tax Rate
Maintain Bank Accounts

Online Payment
940 Certification Request
Email SignUp
Audit
Verify E-mail
Enter Abatement Request
WorkShare

WorkShare Employer Application - Bargaining Agent Details

Bargaining agent details updated successfully.

[WorkShare Dashboard](#)

Scenario 5: Extend WorkShare Plan

Follow **Steps 1 – 5** above to access the WorkShare Dashboard.

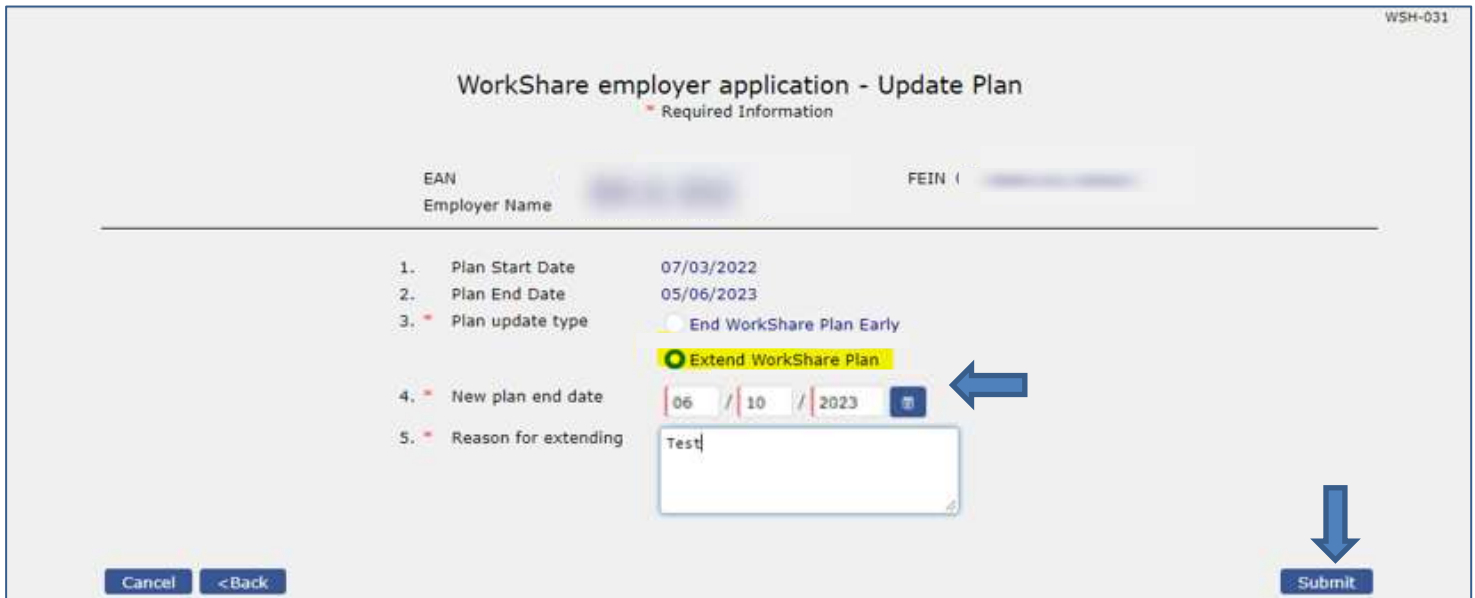
Step 6: Select *Update Plan*.



Update Address | Update Representative | Update Bargaining Agent
Update Plan | Add Unit | Update Unit | Add Unit Employees | Update Unit Employees | Remove Unit Employees
 Modification History | Previous Plan

Cancel <Back WorkShare Introduction

Step 7: Enter the Required fields and the new end date → *Submit*



WSH-031

WorkShare employer application - Update Plan
 Required Information

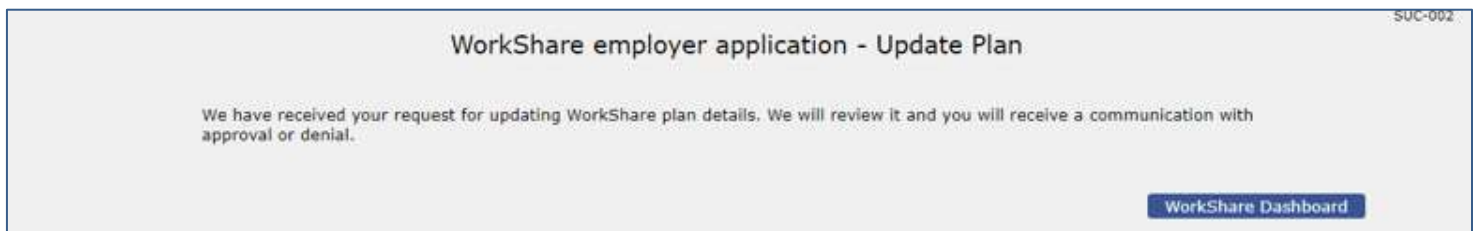
EAN
 Employer Name

FEIN (

1. Plan Start Date 07/03/2022
 2. Plan End Date 05/06/2023
 3. Plan update type
☐ End WorkShare Plan Early
☒ **Extend WorkShare Plan**
 4. New plan end date 06 / 10 / 2023
 5. Reason for extending Test

Cancel <Back Submit

Step 8: Confirmation screen appears



SUC-002

WorkShare employer application - Update Plan

We have received your request for updating WorkShare plan details. We will review it and you will receive a communication with approval or denial.

WorkShare Dashboard

Once you have completed the request to extend your plan, a Representative will need to approve or deny this request. You can check your Employer account to verify if this has been completed and approved. Select Modification History on your account → Select *Plan Update*

WSH-021

WorkShare Plan Modification History

EAN [REDACTED] FEIN [REDACTED]
Employer Name

Modification History

No.	Summary of Change	Request Date	Request Status	Request Status Date
1	Plan Update	08/17/2022 02:31	Approved	08/17/2022 03:50
2	Bargaining Agent Update	08/17/2022 12:35	Approved	08/17/2022 12:35
3	Representatives Update	08/17/2022 12:12	Approved	08/17/2022 12:12
4	Address Update	08/17/2022 12:03	Approved	08/17/2022 12:03
5	Plan Update	08/10/2022 07:32	Approved	08/10/2022 07:32
6	Address Update	07/27/2022 04:19	Approved	07/27/2022 04:19
7	New Plan Request	07/27/2022 04:16	Approved	07/27/2022 04:17

[Cancel](#) [<Back](#)

Step 9: Verify that the plan information was updated with the new information

WSH-006

WorkShare Plan Modification Request Details

EAN [REDACTED] FEIN 01-
Employer Name
Summary of Change Plan Update
Request Status Approved

Request Date 08/17/2022 02:31
Approval Date 08/17/2022 03:50

1. Plan update type Extend WorkShare Plan

2. New plan end date 06/10/2023

3. Reason for extending Test

[Cancel](#) [<Back](#)

Scenario 6: Add a Unit

Follow **Steps 1 – 5** above to access the WorkShare Dashboard.

Step 6: Select *Add Unit*



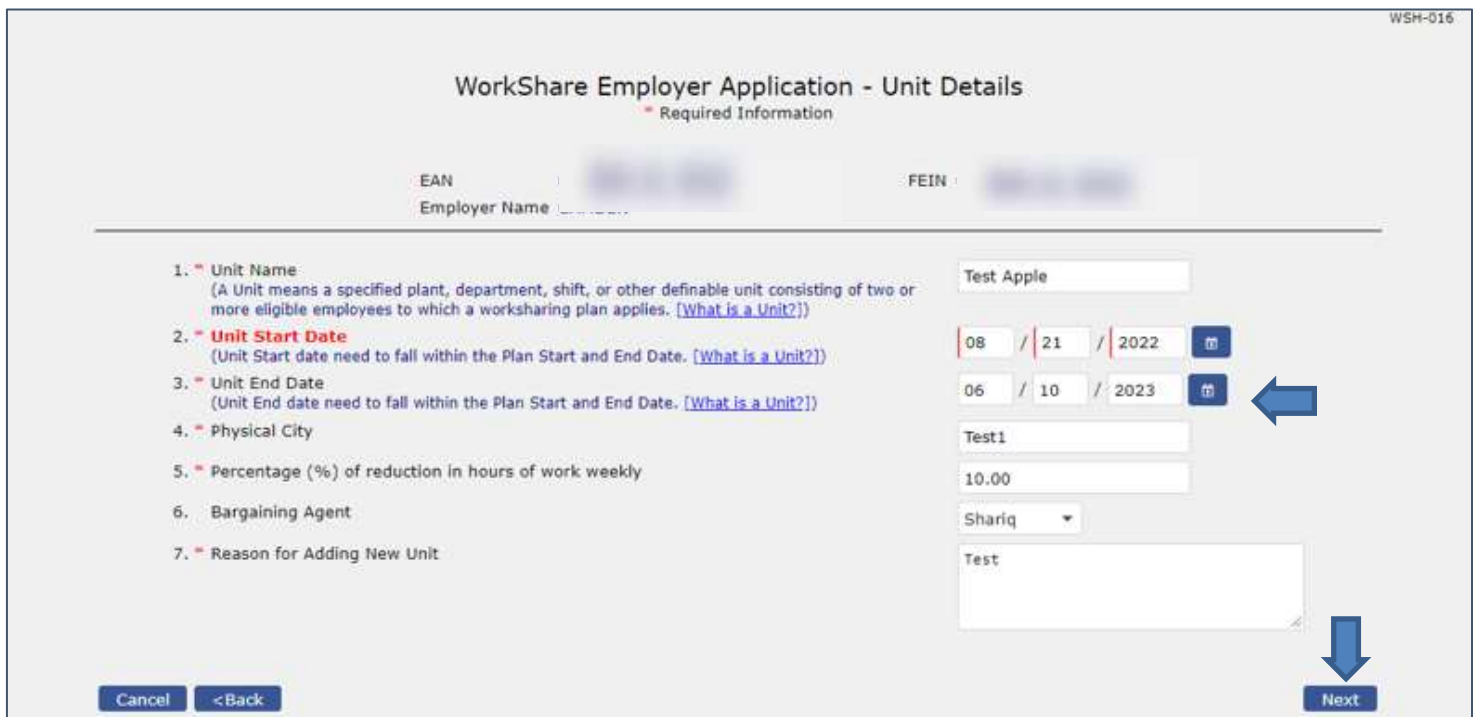
Update Address | Update Representative | Update Bargaining Agent
[Update Plan](#) | **Add Unit** | Update Unit | Add Unit Employees | Update Unit Employees | Remove Unit Employees
[Modification History](#) | [Previous Plan](#)

Cancel <Back WorkShare Introduction

Step 7: Enter all the required fields → Next

Note:

- The Unit start date needs to be a Sunday
- The percentage of reduction in work hours of the work week can't be less than 10 percent or more than 50 percent



WSH-016

WorkShare Employer Application - Unit Details

Required Information

EAN: [Redacted] FEIN: [Redacted]
 Employer Name: [Redacted]

- Unit Name
 (A Unit means a specified plant, department, shift, or other definable unit consisting of two or more eligible employees to which a worksharing plan applies. [\[What is a Unit?\]](#))
 Test Apple
- Unit Start Date
 (Unit Start date need to fall within the Plan Start and End Date. [\[What is a Unit?\]](#))
 08 / 21 / 2022
- Unit End Date
 (Unit End date need to fall within the Plan Start and End Date. [\[What is a Unit?\]](#))
 06 / 10 / 2023
- Physical City
 Test1
- Percentage (%) of reduction in hours of work weekly
 10.00
- Bargaining Agent
 Shariq
- Reason for Adding New Unit
 Test

Cancel <Back **Next**

Step 8: Enter the required fields → then Select *Add Employee*

WSH-017

WorkShare Employer Application - Unit Employee Details

* Required Information

EAN
Employer Name

Unit Name: Test

Unit Start Date: 08/21/2022

FEIN

Reduction Percentage(%): 30.00

Unit End Date: 06/10/2023

1. * SSN

3. Middle Name

5. * Normal working hours per week: 40.00

7. * Employee effective start date: 08 / 21 / 2022

9. * Employee hire date: 08 / 15 / 2022

2. * First Name: Iron

4. * Last Name: Man

6. * Proposed weekly hours under WorkShare: 28.00

8. * Employee effective end date: 06 / 10 / 2023

10. * Is employee part of union? ☐ Yes ☒ No

Add Employee

No.	SSN	First Name	Middle Name	Last Name	Normal working hours per week	Proposed weekly hours under WorkShare	Employee effective start date	Employee effective end date	Employee hire date	Is employee part of union?
Employee details not added										

Cancel
<Back
Submit

Step 9: After at least 2 Employees have been added Select *Submit*

Note: All Units should have at least 2 Employees

WSH-017

WorkShare Employer Application - Unit Employee Details

* Required Information

EAN
Employer Name

FEIN
Employer Name

Unit Name: Test Apple

Unit Start Date: 08/21/2022

Reduction Percentage(%): 30.00

Unit End Date: 06/10/2023

1. * SSN:

3. Middle Name:

5. * Normal working hours per week:

7. * Employee effective start date: 08 / 21 / 2022

9. * Employee hire date: MM / DD / YYYY

2. * First Name:

4. * Last Name:

6. * Proposed weekly hours under WorkShare:

8. * Employee effective end date: 06 / 10 / 2023

10. * Is employee part of union? ☐ Yes ☐ No

No.	SSN	First Name	Middle Name	Last Name	Normal working hours per week	Proposed weekly hours under WorkShare	Employee effective start date	Employee effective end date	Employee hire date	Is employee part of union?
1	146	Iron		Man	40.00	28.00	08/21/2022	06/10/2023	08/15/2022	No
1	146	Iron		Man	40.00	28.00	08/21/2022	06/10/2023	08/15/2022	No

Step 10: Confirmation screen appears

SUC-002

WorkShare Employer Application - Unit Details

We have received your request for adding new Unit in WorkShare plan. We will review it and you will receive a communication with approval or denial.

When a Unit is added this needs to be reviewed and approved by staff.
Keep checking under modifications in your account to verify this has been approved.

WSH-021

WorkShare Plan Modification History

EAN
Employer Name

FEIN
Employer Name

No.	Summary of Change	Request Date	Request Status	Request Status Date
1	Add Unit	06/17/2023 04:23	Pending Verification	06/17/2023 04:23
2	Unit Update	06/17/2023 02:36	Approved	06/17/2023 03:58

Scenario 7: Update a Unit

Follow **Steps 1 – 5** above to access the WorkShare Dashboard.

Step 6: Select *Update Unit*

Step 7: Select the Unit you are updating → Select the update request field → *Submit*

Select	Unit Name	Unit Start Date	Unit End Date	Physical City	Unit Status	Percentage (%) of Reduction	Total Active Employees
<input type="radio"/>	Test Apple	08/28/2022	06/10/2023	Test1	Approved	30.00	6
<input checked="" type="radio"/>	Unit 45	07/03/2022	10/15/2022	Augusta	Approved	50.00	4

- Unit Name
- Unit Start Date
- Unit End Date
- Percentage (%) of Reduction
- Update Request Type
- New Percentage (%) of Reduction
- Reason for Updating Unit Details

Unit 45
07/03/2022
10/15/2022
50.00

Unit - Adjust percentage of reduction

-Select-
Unit - Adjust Start Date
Unit - Adjust End Date
Unit - Adjust percentage of reduction

Submit

Step 8: Confirmation screen appears

Staff will need to approve the update request.
Keep checking modifications in your account for approval.

Scenario 8: Add Unit Employees

Follow **Steps 1 – 5** above to access the WorkShare Dashboard.

Step 6: Select *Add Unit Employees*



Update Address | Update Representative | Update Bargaining Agent
 Update Plan | Add Unit | Update Unit | **Add Unit Employees** | Update Unit Employees | Remove Unit Employees
 Modification History | Previous Plan

Cancel <Back WorkShare Introduction

Step 7: Select the Unit you are adding Employees to → *Next*

WSH-037

WorkShare employer application - Unit list
 Required Information

EAN
 Employer Name

FEIN

Select	Unit Name	Unit Start Date	Unit End Date	Physical City	Unit Status	Percentage (%) of Reduction	Total Active Employees
<input checked="" type="radio"/>	Test Apple	08/28/2022	06/10/2023	Test1	Approved	30.00	2
<input type="radio"/>	Unit 45	07/03/2022	10/22/2022	Augusta	Approved	50.00	1

Cancel <Back **Next>**

Step 8: Enter the Employee information → Select the reason for adding → *Add Employee*

WSH-033

WorkShare employer application - Add Unit Employee

Required Information

EAN
Employer Name

Unit Name: Test Apple

Unit Start Date: 08/28/2022

FEIN

Reduction Percentage(%): 30.00

Unit End Date: 06/10/2023

1. SSN: 123

3. Middle Name:

5. Normal working hours per week: 40.00

7. Employee effective start date: 08 / 28 / 2022

9. Employee hire date: 08 / 24 / 2022

2. First Name: The

4. Last Name: Robert

6. Proposed weekly hours under WorkShare: 28.00

8. Employee effective end date: 06 / 10 / 2023

10. Is employee part of union? ☒ Yes ☐ No

Add Employee

No.	SSN	First Name	Middle Name	Last Name	Normal working hours per week	Proposed weekly hours under WorkShare	Employee effective start date	Employee effective end date	Employee hire date	Is employee part of union?
Employee details not added										

1. Why are you adding?

☒ Forgot someone
 ☐ New hire
 ☐ Change to Social Security Number

Cancel <Back
Submit

Step 9: Verify that the Employee was added → Submit

WSH-033

WorkShare employer application - Add Unit Employee

Required Information

EAN: [REDACTED] FEIN: [REDACTED]

Employer Name: [REDACTED]

Unit Name: Test Apple Reduction Percentage(%): 30.00

Unit Start Date: 08/28/2022 Unit End Date: 06/10/2023

1. SSN: [REDACTED] 2. First Name: [REDACTED]

3. Middle Name: [REDACTED] 4. Last Name: [REDACTED]

5. Normal working hours per week: [REDACTED] 6. Proposed weekly hours under WorkShare: [REDACTED]

7. Employee effective start date: 08 / 28 / 2022 8. Employee effective end date: 06 / 10 / 2023

9. Employee hire date: MM / DD / YYYY 10. Is employee part of union? ☐ Yes ☐ No

Add Employee

No.	SSN	First Name	Middle Name	Last Name	Normal working hours per week	Proposed weekly hours under WorkShare	Employee effective start date	Employee effective end date	Employee hire date	Is employee part of union?
1	12	The		Robert	40.00	28.00	08/28/2022	06/10/2023	08/24/2022	Yes

11. Why are you adding? ☒ Forgot someone ☐ New hire ☐ Change to Social Security Number

Cancel **<Back** **Submit**

Step 10: Confirmation screen appears

SUC-002

WorkShare employer application - Add Unit Employee

We have received your request for adding Employees in WorkShare plan. We will review it and you will receive a communication with approval or denial.

WorkShare Dashboard

When adding a new Employee staff will need to review and approve the request. Keep checking modifications in your account for approval.

WSH-021

WorkShare Plan Modification History

EAN: [REDACTED] FEIN: [REDACTED]

Employer Name: [REDACTED]

No.	Summary of Change	Request Date	Request Status	Request Status Date
1	add employee to an existing WorkShare unit	08/24/2022 05:23	Approved	08/24/2022 05:23

Section 5: Workshare Weekly Certification

Once the plan has been approved the Employer can now enter or check the status of Weekly Certifications.

Scenario 1: Employer enters Weekly Certification

Step 1: Employer logs in by selecting *Employer Login*

The screenshot shows the ReEmployME portal homepage. At the top, there are logos for 'REEMPLOY ME Unemployment System Alliance Partner' and 'MAINE DEPARTMENT OF LABOR Bureau of Unemployment Compensation'. Below the logos, the page is divided into two main sections: 'Employer Services' and 'Claimant Services'. Under 'Employer Services', there is a list of links: 'Register a New Business', 'Create ReEmployME Portal Account – Employer or PEO', 'Create a ReEmployME Portal Account – Third Party Agent or Payroll Provider', 'Update BIA Information', 'Add Federal Identification Number (FEIN)', 'E-Response - Enroll, activate or update PIN, or maintain contact detail', 'Upload Documents for Remote Audit', and 'Employer Login'. The 'Employer Login' link is highlighted with a yellow box and a blue arrow pointing to it. Under 'Claimant Services', there is a list of links: 'Create ReEmployME Account', 'File a Claim', 'File Weekly Claim', 'Identity Verification', 'LWA Quick Access', 'Work Search Online Interview', and 'Claimant Login'. At the bottom center, there is a link for 'BUC Staff Login'. The page also includes a 'Welcome' message on the left and 'LOGIN-001' on the right.

Step 2: Enter User ID → Password → *Submit*

The screenshot shows the 'Unemployment Services Login' page. At the top, there is a title 'Unemployment Services Login' and a note '* Required Information'. Below this, there are two input fields: 'User ID' and 'Password (Case sensitive)'. The 'User ID' field contains the text 'black'. The 'Password' field contains a series of dots. To the right of the password field is a blue 'Submit' button. Below the input fields, there are two links: 'Forgot User ID' and 'Forgot Password'. A blue arrow points to the 'User ID' field, and another blue arrow points to the 'Submit' button. The page also includes 'LOGIN-001' in the top right corner.

Step 3: Select / accept

The screenshot shows the REEMPLOY ME website interface. At the top, there is a navigation bar with various menu items: Inquiry, My User Profile, Account Maintenance, Employer Registration, Tax & Wage Report, File Appeal, Annual Tax Rate, Maintain Bank Accounts, Online Payment, 940 Certification Request, Email SignUp, Audit, Verify E-mail, Enter Abatement Request, and WorkShare. A central dialog box titled "Information Usage Disclosure" is displayed, containing the text: "Wage and other confidential unemployment compensation information may be requested and utilized for other governmental purposes, including, but not limited to, verification of an individual's eligibility for other government programs." Below the text are two buttons: "I accept" (highlighted with a yellow box and a blue arrow) and "Cancel".

Step 4: Select Workshare → File Weekly Certification

The screenshot shows the REEMPLOY ME website interface with the "WorkShare" dropdown menu open. The dropdown menu contains two options: "WorkShare Application" and "File Weekly Certification" (highlighted with a yellow box and a blue arrow). The main navigation bar at the top is visible, showing the same menu items as in the previous screenshot. A blue arrow points to the "WorkShare" menu item in the top bar, and another blue arrow points to the "File Weekly Certification" option in the dropdown menu.

Step 5: Enter EAN or Employer Name → Search

WC-111

WorkShare Employer Weekly Certification

* Required Information

1. * EAN - - 

-OR-

2. * Employer Name



Step6: Select the Unit → Next

WC-112

Inquiry My User Profile Account Maintenance Employer Registration Tax & Wage Report File Appeal Annual Tax Rate Maintain Bank Accounts

Online Payment 940 Certification Request Email SignUp Audit Verify E-mail Enter Abatement Request WorkShare

Workshare Employer Weekly Certification - List of Units

* Required Information

Employer EAN Employer Name

Employer Address

Workshare Unit List

Select *	Unit Name	Unit Start Date	Unit End Date	Plan Status
 <input checked="" type="radio"/>	New Workshare Plan	08/28/2022	08/05/2023	Approved
<input type="radio"/>	Unit 1	07/31/2022	08/20/2023	Approved



Step 7: Select the week to be certified → Next

Workshare Employer Weekly Certification - List of CWE
* Required Information

Employer EAN: [Redacted]
Employer Name: [Redacted]
Employer Address: [Redacted] 05

Unit Name: New Workshare Plan
Unit Number: 2719

Week(s) to be Certified

Select*	Week End Date
<input checked="" type="radio"/>	09/03/2022
<input type="radio"/>	09/10/2022
<input type="radio"/>	09/17/2022
<input type="radio"/>	09/24/2022
<input type="radio"/>	10/22/2022
<input type="radio"/>	10/29/2022
<input type="radio"/>	11/05/2022

<Back Next>

Step 8: Enter fields → Next

Workshare Employer Weekly Certification - File Certification
* Required Information

Employer EAN: [Redacted]
Employer Name: [Redacted]
Employer Address: [Redacted]

Unit Name: New Workshare Plan
Unit Number: 2719
Percentage Reduction: 20.00

Answer the following questions for the week of:
Sunday, September 04, 2022 - Saturday, September 10, 2022.
Providing false information is punishable by law.

The reason for increase/decrease drop downs will only show if hours worked do not match the normal workshare hours

No.	SSN	Claimant Name	Normal Work Hours	Normal Workshare Hours	Hours Worked	Approved Time Off (Hours)	Total Hours	Reason for Increase Hours ?	Reason for Decrease Hours ?	Did the employee refuse any work offered?	Gross earnings for the week (\$)	Comment
1.	[Redacted]	[Redacted]	40.00	32.00	0.00	0.00	0.00	N/A	-Select-	<input type="radio"/> Yes <input type="radio"/> No		
2.	[Redacted]	[Redacted]	40.00	32.00	0.00	0.00	0.00	N/A	-Select-	<input type="radio"/> Yes <input type="radio"/> No		
3.	[Redacted]	[Redacted]	40.00	32.00	0.00	0.00	0.00	N/A	-Select-	<input type="radio"/> Yes <input type="radio"/> No		

<Back Next>

Step 9: Verify the information you entered. Select back to edit or *Submit* if finished

Inquiry ▾ My User Profile Account Maintenance ▾ Employer Registration ▾ Tax & Wage Report ▾ File Appeal ▾ Annual Tax Rate ▾ Maintain Bank Accounts ▾
Online Payment ▾ 940 Certification Request ▾ Email SignUp ▾ Audit ▾ Verify E-mail Enter Abatement Request WorkShare ▾

WC-115

Workshare Employer Weekly Certification - Verification Certification

* Required Information

Employer EAN		Unit Name	New Workshare Plan
Employer Name		Unit Number	2719
Employer Address		Percentage Reduction	20.00

Answer the following questions for the week of:
Sunday, August 28, 2022 - Saturday, September 03, 2022.

Providing false information is punishable by law.

No.	SSN	Claimant Name	Normal Work Hours	Normal Workshare Hours	Hours Worked	Approved Time Off (Hours)	Total Hours	Reason for Increase Hours	Reason for Decrease Hours	Did the employee refuse any work offered?	Gross earnings for the week (\$)	Comment
1.			40.00	32.00	20.00	1.00	21.00	N/A	Sick	No	0.00	test

<Back Submit

Step 10: Confirmation screen appears

Inquiry ▾ My User Profile Account Maintenance ▾ Employer Registration ▾ Tax & Wage Report ▾ File Appeal ▾ Annual Tax Rate ▾ Maintain Bank Accounts ▾
Online Payment ▾ 940 Certification Request ▾ Email SignUp ▾ Audit ▾ Verify E-mail Enter Abatement Request WorkShare ▾

SUC-002

Workshare Employer Weekly Certification - Confirmation

Workshare employer weekly certification has been submitted successfully.

Home