

Instructions for Filing Unemployment Insurance Online

State of Hawaii
Department of Labor and Industrial Relations
Unemployment Insurance Division



- Create an Online Account
- File an Initial Claim for Unemployment Benefits
- File a Claim Certification

Part 1:

Create an
Online Account

To Create an Online Account go to:

<http://uiclaims.hawaii.gov>

Select: Claimant Services

Mobile View

State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

- Claimant Services
- Employer Services
- Contact

For Claimants

- Create Account/Login
- Apply for Benefits
- Reactivate an Existing Claim
- File a Claim Certification
- Check Claim or Payment Status
- File or View Appeals
- Update Personal Information
- Direct Deposit
- Get started**

For Employers

- Create Account/Login
- File Low Earning Report
- File or View Appeals
- Register for SIDES E-Response
- Get started**



For Claimants

- Create Account/Login
- Apply for Benefits
- Reactivate an Existing Claim
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Get started

For Employers

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Get started

Claimant Services

Employer Services

Contact

Announcements

We have recently updated our Initial Claim process. Should you experience problems while entering your Initial Claim, please contact the nearest **claims office** for assistance.

EMPLOYERS: SIDES E-Response Is Now Available

The State Information Data Exchange System (SIDES) is an electronic tool to help employers respond to state unemployment insurance (UI) requests, quickly, easily and accurately.

- Receive email notifications the day after an employee files for unemployment
- Respond to requests for information online.
- Increase timeliness and accuracy of information received by UI
- Reduce UI overpayments, UI tax rate, follow-up calls to the agency, number of appeals filed and paper handling and postage.

To register for SIDES E-Response, select "Employer Services" or [click here](#).

FOR EMPLOYERS: SUBMIT LOW EARNINGS REPORTS ONLINE

The Electronic Low Earnings Reporting and Monitoring System (ELERM) is now available. Please create an account and log in to access the ELERM system. For more information [click here](#).

When to file

File online during these times only:

Monday through Friday
6:30 a.m. to 11:00 p.m. HST

Weekends and Holidays
9:00 a.m. to 11:00 p.m. HST

Reactivate or Update Employment:

Monday through Friday
6:30 a.m. to 5:30 p.m. HST

Weekends and Holidays
Unavailable

Appeals:

Monday through Friday
6:30 a.m. to 5:30 p.m. HST

Weekends and Holidays
9:00 a.m. to 5:30 p.m. HST

Select: Create Account

Mobile View

State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

CLAIMANT LOGIN - USERNAME

Username

[Forgot Username?](#)

CLAIMANT REGISTRATION

Create your personal account. Before filing online for unemployment benefits or payment history, you must have an account. To create an account click below.



CLAIMANT LOGIN - USERNAME

Username

[Forgot Username?](#)

CLAIMANT REGISTRATION

Create your personal account. Before filing online for unemployment benefits or payment history, you must have an account. To create an account click below.

Announcements

STATE ADDITIONAL BENEFITS (SAB)

Governor Ige has approved legislation which provides for a new temporary program limited to the County of Maui to pay 13 weeks of State Additional Benefits (SAB) to workers who exhaust regular benefits during the period beginning September 4, 2016 through O... [see more >>](#)

TAX INFORMATION

Form 1099g will be mailed on or about January 25, 2017 to all who received unemployment insurance (UI) benefits in calendar year 2016. The form includes the amount of benefits paid and other information to meet Federal, State, and personal income tax needs for the tax year... [see more >>](#)

WHEN TO FILE

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Monday through Friday
6:30 a.m. to 11:00 p.m. HST

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Reactivate or Update Employment:

Monday through Friday
6:30 a.m. to 5:30 p.m. HST

Weekends and Holidays
Unavailable

Creating an Online Account

Enter Recaptcha

State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

Claimant Registration - Recaptcha



* Enter the words or numbers pictured above

 Select a new image.

Continue

 Cancel

Enter your Basic Information

State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

Claimant Registration - Basic

* Social Security Number

* Birthdate

Month Day Year

* Last Name

* First Name

Middle Initial

Continue

 Cancel

Create a Username

State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

Claimant Registration - Profile

* Confirm Social Security Number

* Username

* Confirm Username

* E-mail Address

* Confirm E-mail Address

Continue

 Cancel

Creating an Online Account

Select a Security Image & Create a Security Phrase

Retrieve your Temporary Password

Enter Security Questions

State of Hawaii, Department of Labor and Industrial Relations

Unemployment Insurance

Claimant Registration - Security Questions

* Security Question #1

Select...

* Answer #1

* Security Question #2

Select...

* Answer #2

* Security Question #3

Select...

* Answer #3

Continue

Cancel

State of Hawaii, Department of Labor and Industrial Relations

Unemployment Insurance

Claimant Registration - Security Questions

Choose a Security Image and Phrase that you will recognize the next time you log in. The security image and phrase is used to build your personal profile and will make your account more secure.

* Select Security Image



* Security Phrase (max 150 chars)

Register Account

State of Hawaii, Department of Labor and Industrial Relations

Unemployment Insurance

Claimant Registration - Complete

Thank you for creating an account. A confirmation and temporary password has been sent to the e-mail address you provided, @hawaii.gov.

If you do not receive the e-mail in your Inbox, please check your Spam, Junk or Bulk folder.

Please return to the home page and log in.

Return Home



Tue 4/11/2017 2:50 PM

do_not_reply@ui.hawaii.gov

Hawaii UI New Account Created

To

New User:

Thank you for creating an account.

Your temporary password is

6vp9wyxx

and will expire on **Wed Apr 12 2017 14:43:39 GMT-1000 (HST)**. Passwords are **case-sensitive**. If you experience problems, check your

Logging In The First Time

Enter your Username

State of Hawaii, Department of Labor and Industrial Relations

Unemployment Insurance

CLAIMANT LOGIN - USERNAME

Username

Sign in

Forgot Username?

Cancel

CLAIMANT REGISTRATION

Create your personal account. Before filing online for unemployment benefits or payment history, you must have an account. To create an account click below.

Create Account

Enter your Temporary Password



State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

CLAIMANT LOGIN - PASSWORD

If you do not recognize your security image and phrase, click on 'Cancel' below.

Temporary Password (received in e-mail)

Security Phrase:

Mah222113333

Login

Security Image:



Forgot Password?

Cancel

Announcements

STATE ADDITIONAL BENEFITS (SAB)

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TAX INFORMATION

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State of Hawaii, Department of Labor and Industrial Relations

Unemployment Insurance

CLAIMANT LOGIN - CREATE NEW PASSWORD

You are using a **temporary password**. Please create a new password.

Please note the password must contain the following:

- 8-32 characters that you can remember
- at least 1 non-alpha character
- a combination of upper and lowercase letters
- no leading or ending spaces

* New Password

* Confirm New Password

Continue

Cancel

Create a New Permanent Password

Part 2:

File an Initial Claim for Unemployment Benefits

Before filing your claim, be prepared to provide:

- All employment over the past 18 months
 - Employers Name and Address
 - Dates of Employment
 - Reason for Separation
- Direct Deposit Information
 - Checking or Savings Account Number
 - Routing Number

Select: File an Initial Claim

State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

New User UI Claims ▾ My Account ▾ Logout

[Home](#) / [Dashboard](#)

Welcome, New User!

Your claim is good for a one year period called the benefit year. However, you can be paid only for 26 weeks of total unemployment during the one-year period that your claim is effective.

To apply for Unemployment Benefits, select "File an Initial Claim" from the task list. Your claim begins the week that you submit your initial claim.

Information You Need to Apply

- Employment information within the past 18 months including employer name, address, dates of employment and reason for separation
- Direct Deposit Information - bank routing number and account number.
- [Ex-Military members ▲](#)
- [Federal employees ▲](#)
- [Non-US Citizen ▲](#)

[Estimate Your Weekly Benefit Amount](#)

For Unemployment Benefit Forms
[Click here](#)

For Additional Filing Information
[Click here](#)

View FAQs on the Unemployment Insurance Homepage
[Click here](#)

Task List

[Click Here](#)

[File an Initial Claim](#)
[Click Here](#)

My Account

- [Claim Inquiry](#)
- [Edit Profile](#)
- [Change Address \(legacy\)](#)
- [Direct Deposit](#)
- [Tax Withholding](#)

When to file

File online during these times only:

Monday through Friday
6:30 a.m. to 11:00 p.m. HST

Weekends and Holidays
9:00 a.m. to 11:00 p.m. HST

Reactivate or Update Employment:

Monday through Friday
6:30 a.m. to 5:30 p.m. HST

Weekends and Holidays
Unavailable

Basic & Profile Section

On the Basic Page you will answer Pre-qualifying Questions

Enter your Profile Information

State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

New User UI Claims - My Account - Logout

Home / Initial Claim

BASIC

? Mother's Maiden Name *

? In the past 18 months, were you only self-employed? *

In the past 18 months, were you employed in another state other than Hawaii? *

In the past year, did you claim, receive or apply for unemployment benefits in another state other than Hawaii? *

In the past 18 months, have you been employed by the **United States Federal government** as a civilian employee? *

? In the past 18 months, were you in active duty status for 90 continuous days or more in any branch of the **United States Military**? *

Are you **filing from Canada**? *

* indicates required fields.

State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

New User UI Claims - My Account - Logout

Home / Initial Claim

PROFILE

? Gender *

? Phone Number *

Current mailing address in the state you are residing

Deliver to

? Care of - if needed (add c/o before person's name)

? Mailing Address *

Zipcode *

? City *

? State *

Marital Status *

Years of Education *

? Number of Dependents *

? Handicap *

? Origin *

? Ethnicity *

? I certify under penalty of perjury that I am a citizen or national of the U.S. *

Direct Deposit Section

If benefits are payable, payments are made by direct deposit.

The screenshot shows the State of Hawaii, Department of Labor and Industrial Relations Unemployment Insurance website. The navigation bar includes 'New User', 'UI Claims -', 'My Account -', and 'Logout'. The main content area has a breadcrumb trail 'Home / Initial Claim' and a list of menu items: 'BASIC', 'PROFILE', 'DIRECT DEPOSIT', and 'VERIFY DIRECT DEPOSIT'. The 'VERIFY DIRECT DEPOSIT' section contains two required input fields: 'Re-enter 9 Digit Routing Number *' and 'Re-enter Complete Account Number *', both with masked text. A 'Continue' button is located at the bottom of this section.

Enter your Routing Number and Account Number.

The screenshot shows the 'DIRECT DEPOSIT' form. At the top, it says 'Please enter the account information where your benefit payments can be deposited. If you wish to have benefits deposited to a Savings Account, contact your financial institution to obtain the correct routing and account information.' Below this is a sample check image with three callouts: a blue box around the routing number '123456789', a red box around the account number '12345678', and a green box around the check number '1000'. Below the callouts are labels: 'ROUTING NUMBER' (blue), 'ACCOUNT NUMBER' (red), and 'CHECK NUMBER' (green). At the bottom, there are instructions: 'ROUTING NUMBER - Always 9 digits between the special character !; ACCOUNT NUMBER - Always before the special character !! May include a separator !!! CHECK NUMBER - Do NOT include the CHECK NUMBER as part of the ACCOUNT NUMBER'. The form includes a 'Select Account Type *' dropdown menu set to 'Checking', a 'Financial Institution Name' field with 'HAWAII STATE FEDERAL CREDIT UNION', and two input fields for 'Enter 9 Digit Routing Number *' and 'Enter Complete Account Number *'. A 'Continue' button is at the bottom.

Employment Section

You will be presented all employers in your base period.

EMPLOYMENT

Please enter all employment within the past 18 months.

EMPLOYER - AOAD OF KONANE KAI INC ✕ remove

Did you work for AOAD OF KONANE KAI INC ? *

Yes No

Employer's Phone Number: 8081234567

Type of Work Performed *: Maintenance

Place of Work/Job Site: Honolulu

Start Date *: June 1, 2016

Last Day Worked *: April 6, 2017

Type of Separation *: Laid off lack of work

Please Explain (max 160 characters) *: No more work

Hired As *: Full-time

Complete the employer detail section for all employment in the past 18 months.

State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

New User UI Claims - My Account - Logout

Home / Initial Claim

BASIC

PROFILE

DIRECT DEPOSIT

VERIFY DIRECT DEPOSIT

EMPLOYMENT

Please enter all employment within the past 18 months:

EMPLOYER - AOAD OF KONANE KAI INC ✕ remove

Did you work for AOAD OF KONANE KAI INC ? *

Yes No

If you are presented an employer you did not work for, select "No" and remove the employer.

Employment Section

If your employer is not presented you must select "Add Employer".

The screenshot shows the user interface for the State of Hawaii Unemployment Insurance portal. At the top, it says "State of Hawaii, Department of Labor and Industrial Relations Unemployment Insurance". Below this is a navigation bar with "New User", "UI Claims", "My Account", and "Logout". The main content area is titled "EMPLOYMENT" and contains a list of employers: "EMPLOYER - AOA OF KONANE KAI INC" and "EMPLOYER - ALOHA GAS STATION". Below the list are instructions and an "Add Employer" button. At the bottom, there is a "Continue" button.

Once you've entered all employment, select "Continue".

You can search for your employer if you were employed in Hawaii.

The screenshot shows the "EMPLOYMENT" section of the portal. It features a search box with the text "Aloha" and a "Search" button. Below the search box is a list of search results: "ALOHA 7 (KAWAZOE ENTERPRISES)", "ALOHA AGRICULTURAL", "ALOHA AIR CONDITIONING (MICHAEL D HAZEN)", "ALOHA AIR CONITIONING INC", and "ALOHA AIRGROUP INC". A blue arrow points to the "View more search results" link. Below the search results is a link that says "If you are unable to find your employer, click here to add a new employer called: Aloha".

If you cannot find your employer you must add the employer information by clicking the link, as seen above. You will need to enter the company name, address and phone number.

ELIGIBILITY REVIEW

1 Is there any reason why you cannot accept full time work? *

Yes

No

2 Will you be referred to your next job by a labor union? *

Yes

No

3 Were you offered work since you became unemployed? *

Yes

No

4 Are you self-employed or in business of any kind? *

Yes

No

5 Do you attend or plan to attend school? *

Yes

No

6 Do you care for any minor children, elderly or sick individuals? *

Yes

No

7 What type of work did you perform on your last job? *

Maintenance

8 Are you willing to seek and accept this type of work? *

Yes

No

9 What days did you work? *

Sunday

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

10 What hours did you work?

Time Begin *

7

00

A.M.

Time End *

5

00

P.M.

11 What was your rate of pay? *

12/hr

Are you willing to accept the same pay rate as your last job? *

Yes

No

12 What other types of work did you do? *

Cashier

13 How long did you work in this capacity? *

2 years

14 What days of the week are you willing to work? *

Sunday

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Eligibility Review Section

15 What hours are you able to work?

Time Begin *

7

00

A.M.

Time End *

5

00

P.M.

16 What geographical area are you willing to work? *

Honolulu

17 What means of Transportation do you have to get to work? *

Personal Vehicle

Public Transportation

Other Means

None

What do you feel has been your major problem in finding a job? *

No Reason

18 Have you applied for or received the following benefits within the last 18 months:

Social Security *

Yes

No

Pension *

Yes

No

Worker's Compensation *

Yes

No

Disability Benefits *

Yes

No

TDI (Temporary Disability Insurance) *

Yes

No

Are you required to make or do you owe child support payments? *

Yes

No

Were you a director, officer, owner or shareholder of a business or corporation within the past 15 months? *

Yes

No

19 Have you worked for an educational institution employer within the past 18 months? *

Yes

No

20 Are you a professional athlete currently between two successive sport seasons? *

Yes

No

Continue

Review and Submit your Initial Claim

State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

New User UI Claims - My Account - Logout

Home / Initial Claim

- BASIC
- PROFILE
- DIRECT DEPOSIT
- VERIFY DIRECT DEPOSIT
- EMPLOYMENT
- ELIGIBILITY REVIEW**

You are required to review your answers. [Click here to review.](#)

State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

New User UI Claims - My Account - Logout

Home / Initial Claim

PLEASE REVIEW YOUR ANSWERS BEFORE SUBMITTING YOUR CLAIM

BASIC

Mother's Maiden Name *

In the past 18 months, were you only self-employed? *
No

In the past 18 months, were you employed in another state other than Hawaii? *
No

In the past year, did you claim, receive or apply for unemployment benefits in another state other than Hawaii? *
No

In the past 18 months, have you been employed by the United States Federal government as a civilian employee? *
No

In the past 18 months, were you in active duty status for 90 continuous days or more in any branch of the United States Military? *
No

Are you filing from Canada? *
No

[Edit BASIC section](#)

PROFILE

Gender *
Female

Phone Number *
8081234567

Current mailing address in the state you are residing

Deliver to
New User micham

Care of - if needed (add c/o before person's name)

Mailing Address *
123 Aloha Dr

“Click here” to review your answers.

In compliance with P.L. 93-579, I authorize my former employer(s) to release all information requested in connection with my claim for unemployment insurance benefits.

I certify that the information I have provided above is true to the best of my knowledge. I understand that the law provides penalties for false statements or for withholding information in connection with this claim.

Make sure you thoroughly review your application before you certify and submit your claim.

Review your Confirmation Page & Email



Wed 4/12/2017 9:06 AM

do_not_reply@ui.hawaii.gov

Hawaii UI Initial Claim Confirmation

To



State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

New User

UI Claims - My Account - Logout

Home / Confirmation

New User micham xxx-xx-3331

Your application for benefits has been submitted on 04/12/2017 08:59 AM (HST).

Your confirmation number is 29198-9-102.

Please print this page and save it for your records. If you do not have a printer, please copy this number as proof of submission.

Please read and follow these instructions to file for your benefit payment.

1. Download and read the [Handbook on Unemployment Benefits \(pdf\)](#)
2. Unemployment Insurance benefits are taxable income. To have Federal and/or State taxes withheld, download and submit the [Claimant's Election to Withhold Federal/State Income Tax \(pdf\)](#). If you do not have a printer, please contact your local office to have the form mailed to you. Or, pick up the form at your local claims office.
3. You are required to post an on-line resume with the Workforce Development Division within 7 calendar days from today at: www.hirenethawaii.com
 - o You must actively seek work by making a minimum of 3 verifiable employer contacts each week and keep a record of these contacts and provide them upon request by the office. Download the record of contact sheets at: <http://labor.hawaii.gov/ui/ui-forms/form-uc-253>
 - o You must notify the unemployment office of any changes in your ability or availability for work.
4. File weekly/bi-weekly claim certification at: <https://hucclaims.hawaii.gov>
5. Download and follow your weekly/bi-weekly filing schedule at: https://dlirtest01.datahouse.com/UI_ClaimWEB/pages/initialClaim/filingSchedule.jsf?file=20170412. (Note: Schedule applies to the first four weeks only.)
6. Your claim certifications are due within 7 calendar days after the week ending date or within 7 calendar days of the second week ending date in the case of biweekly filing. Failure to continuously file your claims will result in a break in filing and require you to reactivate your claim before you can resume submitting your certifications.

Direct Deposit has been requested. Please check your email for verification on the next business day.

E-mail confirmation: A confirmation will be sent to the e-mail address you provided. If you do not see the confirmation in your e-mail **Inbox**, please check your **Spam**, **Junk** or **Bulk** folder.

E-mail Address: michelle.a.hamilton@hawaii.gov

BASIC INFO

Mother's Maiden Name *

In the past 18 months, were you only self-employed? *

No

In the past 18 months, were you employed in another state other than Hawaii? *

No

In the past year, did you claim, receive or apply for unemployment benefits in another state other than Hawaii? *

No

In the past 18 months, have you been employed by the United States Federal government as a civilian employee? *

No

In the past 18 months, were you in active duty status for 90 continuous days or more in any branch of the United States Military? *

No

Are you filing from Canada? *

No

Your application has been submitted on 04/12/2017 08:59 AM HST.

Confirmation number: 29198-9-102

Please read and follow these instructions to file for your benefit payment.

File weekly/bi-weekly claims certifications at:

<http://uiclaims.hawaii.gov>

Download and follow your weekly/bi-weekly filing schedule at:

https://dlirtest01.datahouse.com/UI_ClaimWEB/pages/initialClaim/filingSchedule.jsf?file=20170412

(NOTE: Schedule applies to the first four weeks only.)

You are required to post an on-line resume with the Workforce Development Division within 7 calendar days at:

<http://www.hirenethawaii.com>

a. If you previously registered and posted an on-line resume at:

<http://www.hirenethawaii.com> you must update your registration and resume within 7 calendar days from today.

b. You are required to make an active search for work by making a minimum of 3 verifiable employer contacts each week. You must keep a record of these contacts and provide them upon request by the office.

Download the record of contact sheets at:

<http://labor.hawaii.gov/ui/ui-forms/form-uc-253>

c. You must report any changes to your ability and availability for work to the unemployment office.

Download and read the Handbook on Unemployment Benefits (pdf) at:

<http://labor.hawaii.gov/ui/ui-forms/unemployment-insurance-handbook-printable-pdf>

Unemployment Insurance benefits are taxable income. To have Federal and/or State taxes withheld, download and submit the Claimant's Election to Withhold Federal/State Income Tax (pdf) at:

Once your initial claim is filed, you will receive a confirmation page and a confirmation email with instructions on your next steps.



Welcome, New User!

Direct Deposit Information has been updated on 04/06/2017. X

Your claim is good for a one year period called the benefit year. However, you can be paid only for 26 weeks of total unemployment during the one-year period that your claim is effective.

The dashboard presents the most current information on your claim. This information changes as your claim changes.

Payment Summary

WED*	Amount	Status
------	--------	--------

*Week Ending Date

[More Info](#)

Claim Information

Remaining Balance:
Claim Expires: 02/04/2018

[More Info](#)

For Unemployment Benefit Forms

[Click here](#)

For Additional Filing Information

[Click here](#)

View FAQs on the Unemployment Insurance Homepage

[Click here](#)

Task List

Register for Work

[Click Here](#)

Reactivate/Update Employment

[Click Here](#)

File a Claim Certification

[Click Here](#)

File an Appeal

[Click Here](#)

My Account

[Claim Inquiry](#)

[Edit Profile](#)

[Change Address](#)

[Direct Deposit](#)

[Tax Withholding](#)

Part 3:

File a Claim Certification

Select the Week Ending Date



The screenshot shows the State of Hawaii, Department of Labor and Industrial Relations Unemployment Insurance website. The page title is "mod test 2004". The navigation menu includes "UI Claims", "My Account", and "Logout". The breadcrumb trail is "Home / Claim Certification". The main heading is "WEEK-ENDING DATE". The form contains a required field with the instruction "Please enter the week-ending date being claimed." and three dropdown menus for "Month", "Day", and "Year". A note at the bottom states "* indicates required fields."

STATE OF HAWAII
1959
State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

mod test 2004 UI Claims My Account Logout

Home / Claim Certification

WEEK-ENDING DATE

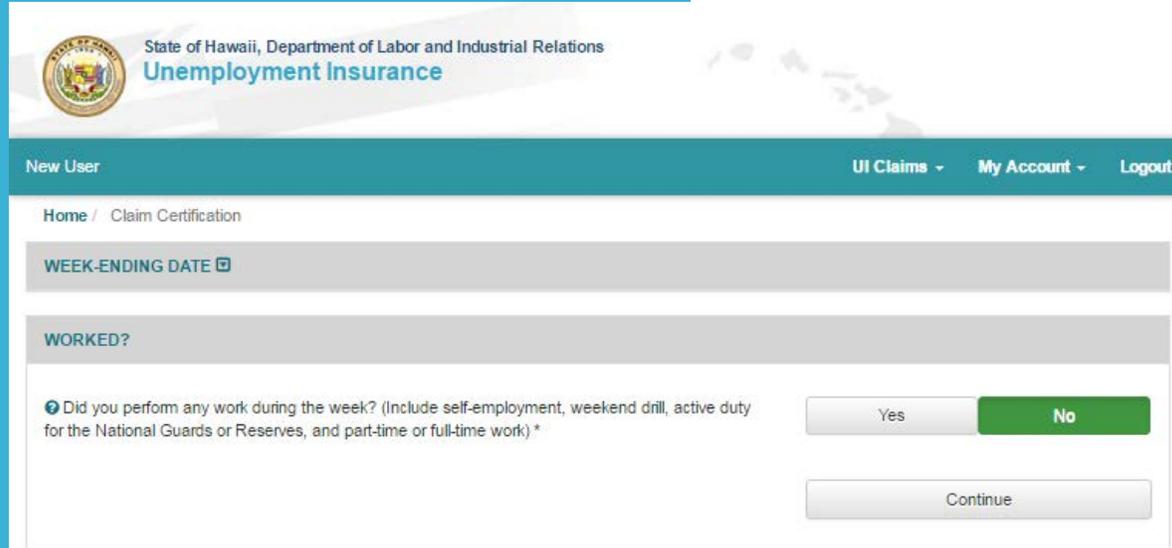
Please enter the **week-ending date** being claimed. *

Month Day Year

* indicates required fields.

Enter the month, day and year of the week ending date that you want to file for.

Filing a Claim Certification



State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

New User UI Claims My Account Logout

Home / Claim Certification

WEEK-ENDING DATE

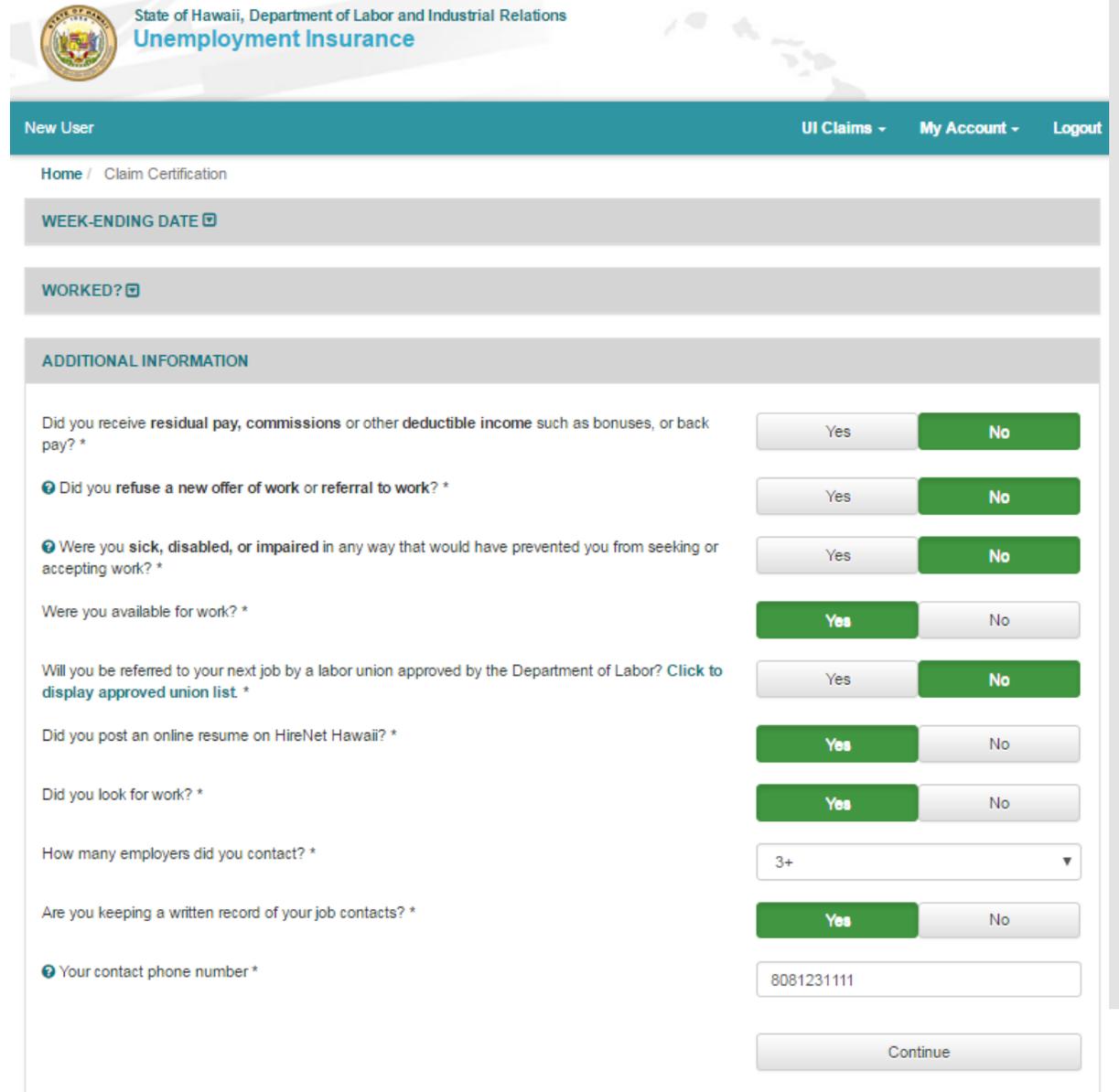
WORKED?

Did you perform any work during the week? (Include self-employment, weekend drill, active duty for the National Guards or Reserves, and part-time or full-time work) *

Yes No

Continue

If you did not work during the week, you will continue on to the "Additional Information" Section to report information about your availability for work and work search information.



State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

New User UI Claims My Account Logout

Home / Claim Certification

WEEK-ENDING DATE

WORKED?

ADDITIONAL INFORMATION

Did you receive **residual pay, commissions** or other **deductible income** such as bonuses, or back pay? *

Yes No

Did you **refuse a new offer of work** or **referral to work**? *

Yes No

Were you **sick, disabled, or impaired** in any way that would have prevented you from seeking or accepting work? *

Yes No

Were you available for work? *

Yes No

Will you be referred to your next job by a labor union approved by the Department of Labor? **Click to display approved union list** *

Yes No

Did you post an online resume on HireNet Hawaii? *

Yes No

Did you look for work? *

Yes No

How many employers did you contact? *

3+

Are you keeping a written record of your job contacts? *

Yes No

Your contact phone number *

8081231111

Continue

Filing a Partial Claim Certification

STATE OF HAWAII
State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

New User UI Claims - My Account - Log

Home / Claim Certification

WEEK-ENDING DATE

WORKED?

PARTIAL-PARTTIME EMPLOYMENT

EMPLOYED - JOSE'S INC

Did you work for JOSE'S INC during the week? * Yes No

Enter the gross dollar amount earned: *

Did you refuse any work from JOSE'S INC? * Yes No

Were you still employed by JOSE'S INC as of 04/08/2017? *

Should you become unemployed after 04/08/2017 and wish to continue your benefits, you must file an additional claim. Failure to do so may affect your eligibility for benefits.

If you are filing a Partial Claim, you must file your claim certification within 28 days of the week ending date.

EMPLOYED - JOSE'S INC

Did you work for JOSE'S INC during the week? * Yes No

Enter the gross dollar amount earned: *

Did you refuse any work from JOSE'S INC? * Yes No

Were you still employed by JOSE'S INC as of 04/08/2017? *

Last Day Worked *

Reason for separation *

Please Explain (max 160 characters) *

Reporting New Employment on a Claim Certification



New User UI Claims My Account Logout

Home / Claim Certification

WEEK-ENDING DATE

WORKED?

Did you perform any work during the week? (Include self-employment, weekend drill, active duty for the National Guards or Reserves, and part-time or full-time work) *

Yes No

Enter total hours worked for all employers. *

18

Did you perform weekend drill or active duty for the Reserves or National Guard? *

Yes No

Were you self-employed during the week? *

Yes No

Continue

* Indicates required fields.

New User UI Claims My Account Logout

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WEEK-ENDING DATE

WORKED?

NEW EMPLOYMENT

Did you start working for any new employers during the week? *

Yes No

Gross amount earned (Include vacation and holiday pay) *

300

Continue

If you started working for a new employer during the week, you will need to have the employers name, address and phone number available. You will also need the number of hours worked and total gross earnings for the week.

NEW EMPLOYER - ALOHA CONSTRUCTION remove

Company/Business Name * Aloha Construction

Phone Number * 8082223333

Enter start date * April 3 2017

As of 04/08/2017 my employment status is * Still Employed

Hired As * Part-time

Company/Business Address 123 Ocean Ln

Zip Code 96815

City Honolulu

State Hawaii

Continue

Review and Submit your Claim Certification

State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

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WEEK-ENDING DATE

WORKED?

ADDITIONAL INFORMATION

You are required to review your answers. [Click here to review.](#)

“Click here” to review your answers.

Make sure you thoroughly review your claim certification before you certify and submit.

In compliance with P.L. 93-579, I authorize my former employer(s) to release all information requested in connection with my claim for unemployment insurance benefits.

I certify that the information I have provided above is true to the best of my knowledge. I understand that the law provides penalties for false statements or for withholding information in connection with this claim.

I agree I don't agree - Return Home

Submit

State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance

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PLEASE REVIEW YOUR ANSWERS BEFORE SUBMITTING YOUR CLAIM

WEEK-ENDING DATE

Are you filing for the week ending 04/08/2017? *
Yes No

Edit WEEK-ENDING DATE section

WORKED?

Did you perform any work during the week? (Include self-employment, weekend drill, active duty for the National Guards or Reserves, and part-time or full-time work) *
No Yes

Edit WORKED? section

ADDITIONAL INFORMATION

Did you receive residual pay, commissions or other deductible income such as bonuses, or back pay? *
No Yes

Did you refuse a new offer of work or referral to work? *
No Yes

Were you sick, disabled, or impaired in any way that would have prevented you from seeking or accepting work? *
No Yes

Were you available for work? *
Yes No

Edit ADDITIONAL INFORMATION section

Review your Confirmation Page & Email



State of Hawaii, Department of Labor and Industrial Relations
Unemployment Insurance



New User

UI Claims ▾ My Account ▾ Logout

[Home](#) / Confirmation

New User micham xxx-xx-1976

Your certification for 04/08/2017 has been filed on 04/12/2017 10:53 AM (HST).

Your confirmation number is CC29203-0-102.

Please print this page and save it for your records. If you do not have a printer, please copy this number as proof of submission.

Read the options below and select the appropriate action:

File for a Different Week

OPTIONAL: You have the option to claim benefits for a week other than the one you just filed.

E-mail confirmation: A confirmation will be sent to the e-mail address you provided. If you do not see the confirmation in your e-mail Inbox, please check your Spam, Junk or Bulk folder.

Record of Contacts: If you need a Record of Contacts Made For Work form, please [download and print the form](#). (If you do not have a printer, please contact your local office to have the form mailed to you. Or, you may report in person to your local office to pick up the form.)

E-mail Address: michelle.a.hamilton@hawaii.gov

WEEK-ENDING DATE

Are you filing for the week ending 04/08/2017? *

Yes

WORKED?

Did you perform any work during the week? (Include self-employment, weekend drill, active duty for the National Guards or Reserves, and part-time or full-time work) *

No

ADDITIONAL INFORMATION

Did you receive residual pay, commissions or other deductible income such as bonuses, or back pay? *

No

Did you refuse a new offer of work or referral to work? *

No

Were you sick, disabled, or impaired in any way that would have prevented you from seeking or accepting work? *

No



Wed 4/12/2017 10:54 AM

do_not_reply@ui.hawaii.gov

Hawaii UI CC Confirmation for 04/08/2017

To: Hamilton, Michelle A

New User micham

Your claim for 04/08/2017 has been filed on Wed Apr 12 2017 10:53:42 GMT-1000 (HST) HST.

Confirmation Number: CC29203-0-102

Since you have Direct Deposit, you will not receive reminder notices for your next filing period. Please logon to your schedule.

Please read the following:

Before you can be properly paid, you must have your unemployment records updated with the following information.

Your current filing location.

Please contact your local office within seven days from today's date at <https://labor.hawaii.gov/ui/unemployment-office-locations> or verify your location on-line. You will be given this option automatically at time of filing and you will receive a separate email notifying of your successful identification.

If you need a Record of Contacts Made For Work form, download and print the form (pdf) at <https://labor.hawaii.gov/ui/ui-forms/form-uc-253>

If you do not have a printer, please contact your local office to have the form mailed to you. Or you may report in person to your local office to pick up the form.

Thank you for your attention!

If you have additional questions about the claims filing process, please contact your local office.

Local Claims Office Contact Information:

Oahu Claims Office

Phone: (808) 586-8970

Email: dlir.ui.oahu@Hawaii.gov

Maui Claims Office

Phone: (808) 984-8400

Email: dlir.ui.maui@Hawaii.gov

Kauai Claims Office

Phone: (808) 274-3043

Email: dlir.ui.kauai@Hawaii.gov

Hilo Claims Office

Phone: (808) 974-4086

Email: dlir.ui.hilo@Hawaii.gov

Kona Claims Office

Phone: (808) 322-4822

Email: dlir.ui.kona@Hawaii.gov