

Name: _____

SSN: xxx-xx- _____

What week are you claiming? Beginning Sunday, _____ through Saturday, _____ <small style="display: block; text-align: center;">mm/dd/yyyy mm/dd/yyyy</small>			
Answer the following certification questions for your second week beginning Sunday through Saturday. Check box Y for yes and box N for no.			
1. Did you return to full-time work or resume full self-employment?	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 50%; text-align: center;">Y</td> <td style="width: 50%; text-align: center;">N</td> </tr> </table>	Y	N
Y	N		
2. Did you perform any work for another or engage in self-employment?	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 50%; text-align: center;">Y</td> <td style="width: 50%; text-align: center;">N</td> </tr> </table>	Y	N
Y	N		
a. If Yes, enter the number of hours worked during each week. _____ hrs. b. If employed, enter gross earnings earned during each week. \$ _____ c. If self-employed, enter gross amount received during each week. \$ _____			
3. Have you applied for:	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 50%; text-align: center;">Y</td> <td style="width: 50%; text-align: center;">N</td> </tr> </table>	Y	N
Y	N		
A. Unemployment compensation under any state or federal law? B. Any amount of lost wages due to illness or disability? If Yes, see D. C. Any type of private income protections insurance? If Yes, see D. D. If you answered Yes to B or C: What amount was received or will be received? (If unknown, insert question mark?) \$ _____ What period does (or will) these benefits cover? _____			
4. Were you able to work full-time for each week claimed, Sunday through Saturday?	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 50%; text-align: center;">Y</td> <td style="width: 50%; text-align: center;">N</td> </tr> </table>	Y	N
Y	N		
If No, explain.			
5. Were you available for work?	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 50%; text-align: center;">Y</td> <td style="width: 50%; text-align: center;">N</td> </tr> </table>	Y	N
Y	N		
If No, explain.			
6. Did you seek work?	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 50%; text-align: center;">Y</td> <td style="width: 50%; text-align: center;">N</td> </tr> </table>	Y	N
Y	N		
7. Did you refuse any offer of work?	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 50%; text-align: center;">Y</td> <td style="width: 50%; text-align: center;">N</td> </tr> </table>	Y	N
Y	N		
If Yes, explain.			
<p>Certification: I certify that the information I have provided on this form is correct. I have supplied this information voluntarily, in order to obtain Disaster Unemployment Assistance. I realize that these benefits are federally funded and that penalties are prescribed by law for the willful misrepresentation or concealment of material facts in order to obtain benefits which I am not entitled to receive under the Robert T. Stafford Disaster Relief and Emergency Assistance Act.</p>			
Signature _____ <small>DO NOT SIGN, DATE OR MAIL BEFORE THE WEEKEND DATE</small>	Date _____		
<p>Weekly Eligibility Requirements</p> <p>To be eligible for payment each week, you must be able and available for work, other than due to the disaster, and you must look for suitable work and report your work search unless the requirement is waived.</p> <p>If your address changes it is important to update it with the UIA.</p> <p>If you have questions on your claim, visit www.michigan.gov/uia for tools and resources. You can also chat with an agent during regular business hours through your MiWAM account. Visit our website for hours of operation. TTY service is available at 866-366-0004.</p>			