



Instructions

Please complete application for Unemployment Assistance Benefit (UAB-1) by PRINTING all answers in ink if completing by hand. Thoroughly review your responses in each section before applying your signature to and submitting this document. Note: If you are currently receiving a Social Security Benefit, you will not qualify for COVID-19 Unemployment / Underemployment Benefit.

Section 1 Applicant Identification

1.1 Surname, 1.2 First Name, 1.3 Middle Initial, 1.4 Social Security Number, 1.5 Telephone Number, 1.6 Date of Birth, 1.7 Sex, 1.8 Status, 1.9 Email Address, 1.10 Address, 1.11 Mailing Address, 1.12 Bank, 1.13 Account Number

Section 2 Work Status

2.1 Work Suspension, Layoff, Termination, Mandatory Medical Isolation/Quarantine

Section 3 Eligibility

3.1 Name of last Employer, 3.2 Address of Employer, 3.3 Telephone Number, 3.4 Email Address, 3.5 Were you employed with this employer prior to 30th March 2020?, 3.6 Have you been unemployed or underemployed as a result of the impact of COVID-19 on your place of work/ business?, 3.7 Are you currently employed?, 3.8 Please state: Salary before 30th March 2020, Present salary, 3.9 Are you currently seeking employment?

Section 4 Declaration

I, _____ declare that the information given above is true to the best of my knowledge and I assume full responsibility as to its correctness. I also undertake to notify the Director of Social Security at the Social Security office as soon as I return to gainful employment if that occurs before 30th June 2020. I understand that if I deliberately provide any incorrect information and receive any unemployment assistance benefit to which I am not entitled, I will have to repay the money to the Board and may be subject to legal action.

Applicant's signature, Date

