

CURRENT UI-1 (INTERNET)

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United States of America - Railroad Retirement Board  
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## Unemployment Application

### Introduction Page

Welcome to the Railroad Retirement Board's Online Unemployment Benefit Application.

If you filed an application for unemployment benefits since July 1, you do not need to file another application to obtain a claim. Just telephone your RRB district office to request a claim form. To obtain the telephone number of the district office serving your area, [click here](#).

If you want your first unemployment claim to begin more than two weeks in the future, you must file a paper Form UI-1 Application for Unemployment Benefits.

Only residents of the United States can use this on-line application. If you live outside the United States, print and complete an application, and mail it to your nearest RRB district office.

Please read the Booklet UB-10, Unemployment Benefits for Railroad Employees or Booklet UB-10s, Beneficios de Desempleo para Empleados Ferroviarios, before starting your application.

You will need the following information in order to complete your application. We suggest you gather it before you start. If for any reason you do not complete the unemployment application, your partially completed application will be saved for 30 days.

#### **Information that identifies you:**

- Address.
- Home and Work telephone numbers.

#### **Your Employment History:**

- Date(s) you last worked for your last employer and non-railroad employer, if any.
- Title of your last railroad job and non-railroad job, if any.

**Direct Deposit Information:**

- Your Financial Institution's Routing Transit Number.
- Name of your Financial Institution.
- Your checking or savings account number.

**Click here to read these important notices:**

- [Privacy Act Notice](#)
- [Computer Matching and Privacy Protection Act Notice](#)
- [Paperwork Reduction Act Notice](#)
- [Nondiscrimination on the Basis of Disability](#)
- [Fraud and Abuse Hot Line](#)

To return to Main Line Services Home Page, [click here](#).

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Questions **1-3** **4-6b**

1. Name (First Init, Mid Init, Last)

2. Social Security Number

xxx-xx-xxxx

3a. Mailing Address

3b. Address Continued

3c. City

3d. State

State

3e. ZIP Code

3f. County

If your first initial is not pre-filled, enter it in the space provided.

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Questions 1-3	4-6b
---------------	------

4. Date of Birth

5. Sex

6a. Home/Cell/Message Telephone Number (Include Area Code)

  - 

6b. Work Telephone Number (Include Area Code)

  - 

Select from the list to show the date you were born.

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7a. Last Railroad Employer Name

7b. Last Railroad Job Title (i.e., Clerk, Trainman, etc.)

7c. Location of Last Railroad Job - City & State

7d. Why are you not now working for your last railroad employer?  
Select one:

Select the name of the railroad company for which you worked most recently, for example, "Norfolk Southern." If it is not listed, or if you worked for a rail labor organization, select 'Other Employer' to enter the name.

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**7e. Have you quit or resigned any work (railroad or other) during the last 3 years?**

7e(1). Date resigned or quit

7e(1). Employer's Name

7e(2). Date resigned or quit

7e(2). Employer's Name

Select

Month Day Year

Month Day Year

If you have quit or resigned any railroad or nonrailroad job within the past 3 years, select "Yes." You must enter the date you resigned or quit, and the name of your former employer in Item (1). If you quit or resigned from more than one employer, list the most recent employer first and the earlier employer second.

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**7f. Are you discharged or suspended?**

7f(1). Date of discharge or suspension period

7f(2). Are you seeking reinstatement to your job?

7f(3). Will you claim pay for time lost?

Choose "Yes" or "No" to show whether you are claiming unemployment benefits because you were discharged or suspended from your last railroad job. If "Yes" be sure to complete all parts of the question. If you are suspended, enter both the beginning and ending dates of the suspension period in Item 7f.

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7f(4). Name of Union Official

7f(4). Address

7f(4). City, State, ZIP Code

7f(4). Telephone Number (Include Area Code)

	State	
	-	

Provide the name of your Union official

7g. If you are unemployed due to a strike or work stoppage please enter the name of your labor union.

Name

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8a. Date you want your first claim to begin

Month [ ] Day [ ] Year [ ]

8b. Date you last worked for a railroad before date in Item 8a.

Month [ ] Day [ ] Year [ ]

9. Are you covered by a job protection plan guaranteeing you a certain amount of work or pay?

Select [ ]

9a. Employer Name

\_\_\_\_\_

Enter the date that you want your first unemployment claim to begin. The date you enter should be the first day after you last worked for either a railroad or nonrailroad employer and for which you were available for work and did not receive any pay. For example, if you last worked May 2, and you received vacation pay for May

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An application for unemployment benefits must be filed within 30 days of the first day for which you wish to claim unemployment benefits.

If you tried to file your application earlier but were prevented from doing so by circumstances beyond your control, your application may be considered as filed on time.

An employee's lack of knowledge about the filing requirements is not considered to be a circumstance beyond his or her control.

Please provide the following information in the space below to explain why you are filing late:

What actions did you take to obtain and complete your application for unemployment benefits? Provide the dates you took these actions.  
Provide the names and titles of any persons who helped you complete and file the application.

Characters Remaining:

750

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Question 8a indicated your claim should begin more than 30 days ago. Please explain why the application is being filed late.

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<b>Incomplete Sections</b>	
An audit of your application indicates the following page(s) require your attention:	
	<a href="#">Questions 10-11</a>
	<a href="#">Questions 12-12a3</a>
	<a href="#">Questions 12a4-13</a>
	<a href="#">Questions 14a-14b</a>
	<a href="#">Questions 15-15c</a>
<a href="#">Late Filing Explanation</a>	<a href="#">Questions 16-16e</a>
Please complete the above pages by clicking on one of the links. All the pages on this list must be reviewed before you can submit your application.	
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10. Have you been paid severance pay or a separation allowance?

Select

10a. Date of separation

Month Day Year

10b. Name of employer that paid

11. Have you been self-employed in the past 2 years?

Select

11a. Type of self-employment

11b. Date you were last self-employed

Month Day Year

Choose "Yes" if you have been paid a severance, termination, separation allowance or buy-out.

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**12a. Have you been employed by a nonrailroad employer in the past 2 years?**

Select

12a(1). Employer Name

12a(2). Employer Address

12a(2). Employer City, State, ZIP Code

State

12a(3). Date Last Worked

Month  Day  Year

If you answer "Yes," enter the name, address, date last worked, and your job title for the last nonrailroad employer for whom you worked during the past 2 years in Items(1)-(4). In Item (5), explain why you are not now working for that employer, for example, "Quit," "laid-off," etc.

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12a(4). Occupation

12a(5). Reason not working

12b. Did you have any other nonrailroad employment in the past 2 years?

13. Are you an active member of the National Guard or a military reserve unit?

Select

Select

Enter your job title for the last nonrailroad employer for whom you worked during the past 2 years.

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#### School Information

14a. Are you now attending school?

14b. Do you plan to attend school in the next 6 months?

14b(1). If "Yes", enter the month and year you will begin school.

Select "Yes" if you attend daytime, evening, or weekend classes at a school, college, university or training program.

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#### Other Benefits

15. Are you receiving social security benefits, military retirement or retainer pay, or any other retirement or survivor benefits provided by law?

15a. Type of benefit(s)

15b. Effective date

15c. Monthly amount before deductions

Unemployment benefits are not payable, or are payable at a reduced amount, if you are also receiving social security benefits, military retirement pay or retainer pay, or any other retirement or survivor benefits provided by law. If you are receiving any other benefits under any law, you must answer this item "Yes" and specify the type of benefit

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#### Direct Deposit Information

16a. Enter the 9-digit Routing Transit Number for your financial institution. Then click 'Validate Bank' to see its' name. If the number is not valid or the wrong name displays, check the number you entered and try again, or call your financial institution to verify the number. If you do not have a bank account or receiving your payments by Direct Deposit would cause you a hardship, read the section Waive Direct Deposit in the Help Text and skip to item 16d.

Enter Your Routing Transit Number Here ==>

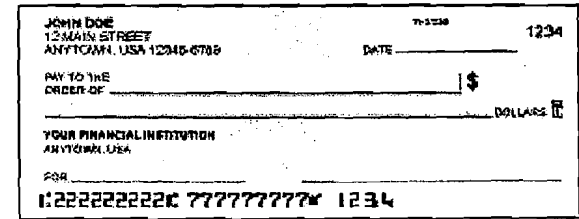
Validate Bank

16b. Enter Account Number

16c. Select Account Type

Select

16d. Check this box if you do not have a checking or savings account, or if Direct Deposit would cause you a hardship.



Routing Transit Number      Checking Account Number

Benefits are normally paid by Direct Deposit to your bank, savings and loan, credit union or other financial institution. To provide the information we need to correctly deposit your payments, locate your bank or financial institution's Routing Transit Number (RTN) on your personal checks. At the bottom of your check are three sets of numbers. The RTN consists of the first nine numbers in the

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#### Application Review

Please review your answers below. To make corrections, click on the tabs above to return to the section of the application you want to correct. After making any corrections, click on the "Review" tab at the top of the page to return to this page. Then complete the certification at the bottom in Section F.

1. Name (First Init, Mid Init, Last)	R	Duda
2. Social Security Number	XXX-XX-XXXX	
3a. Mailing Address	18335 Riegel	
3c. City	Homewood	
3d. State	IL	
3e. ZIP Code	60430	
3f. County	Cook	
4. Date of Birth	07/19/1945	
5. Sex	Male	
6a. Home/Cell/Message Telephone Number (Include Area Code)		
6b. Work Telephone Number (Include Area Code)		
7a. Last Railroad Employer Name	ILLINOIS CENTRAL RAILROAD COMPANY	
7b. Last Railroad Job Title (i.e., Clerk,	Web Developer	

Trainman, etc.)

web Developer

7c. Location of Last Railroad Job - City & State

Chicago

IL

7d. Why are you not now working for your last railroad employer? Select one:

Laid Off/Furloughed/Job abolished/Bumped

7e. Have you quit or resigned any work (railroad or other) during the last 3 years?

No

7e(1). Date resigned or quit

7e(1). Employer's Name

7e(2). Date resigned or quit

7e(2). Employer's Name

7f. Are you discharged or suspended?

No

7f(1). Date of discharge or suspension period

7f(2). Are you seeking reinstatement to your job?

No

7f(3). Will you claim pay for time lost?

No

7f(4). Name of Union Official

7f(4). Address

7f(4). City, State, ZIP Code

7f(4). Telephone Number (Include Area Code)

7g. If you are unemployed due to a strike or work stoppage please enter the name of your labor union

8a. Date you want your first claim to begin 02/22/2004

Late filing explanation

This is a test

8b. Date you last worked for a railroad before date in Item 8a. 02/21/2004

9. Are you covered by a job protection plan guaranteeing you a certain amount of work or pay? No

9a. Employer Name

10. Have you been paid severance pay or a separation allowance? No

10a. Date of separation

10b. Name of employer that paid

11. Have you been self-employed in the past 2 years? No

11a. Type of self-employment

11b. Date you were last self-employed

12a. Have you been employed by a nonrailroad employer in the past 2 years? Yes

12a(1). Employer Name AK Steel

12a(2). Employer Address 7200 West Route 421

12a(2). Employer City, State, ZIP Code Rockport IN 48625

12a(3). Date Last Worked 07/10/2002

12a(4). Occupation Comp Proc Contr Eng

12a(5). Reason not working Changed Jobs

12b. Did you have any other nonrailroad employment in the past 2 years? No

employment in the past 2 years?

13. Are you an active member of the National Guard or a military reserve unit? No

14a. Are you now attending school? Yes

14b. Do you plan to attend school in the next 6 months?

14b(1). If "Yes", enter the month and year you will begin school.

15. Are you receiving social security benefits, military retirement or retainer pay, or any other retirement or survivor benefits provided by law? No

15a. Type of benefit(s)

15b. Effective date

15c. Monthly amount before deductions

16a. Enter the 9-digit Routing Transit Number for your financial institution. Then click 'Validate Bank' to see its' name. If the number is not valid or the wrong name displays, check the number you entered and try again, or call your financial institution to verify the number. If you do not have a bank account or receiving your payments by Direct Deposit would cause you a hardship, read the section Waive Direct Deposit in the Help Text and skip to item 16d.

Name of Financial Institution

16b. Enter Account Number

16c. Select Account Type

16d. Check this box if you do not have a checking or savings account, or if Direct Deposit would cause you a hardship.  Checked

Section F - Certification

I certify that the information I have provided on this form is true, correct and complete. I know that I must immediately report to the Railroad Retirement Board any changes which might affect my entitlement to benefits. I understand that disqualifications and civil and criminal penalties may be imposed on me for false or fraudulent statements or claims or for withholding information to get benefits. I understand and agree to the requirements set forth in Booklet UB-10.

I Agree and Submit the Application

Delete Application

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