

OREGON



Helping employers strategize, not downsize

How to Restart Your Claim (Additional Claim)

Additional Claims

- Frances is intended to look and feel the same as much as possible regardless of the program (Regular UI claim, Work Share, SEA, etc.), therefore some items will seem new and odd to claimants
- Additional Claims are a requirement when there is a break in claiming (weeks have not been claimed)
- “Additional Claims” are not something familiar to Work Share employees, but will be a part of the new claiming process



Additional Claims?

- When a claimant establishes their claim, they must meet these two criteria:
 - Have sufficient work history over the previous 5 completed quarters to support a claim
 - Unemployment situation created through no fault of their own (i.e. did not voluntarily quit, not fired due to violation of policy, etc.)
- If those criteria are met, the unemployment insurance claim that is established will be assessed against the employer who is responsible for the unemployment condition



Why are there Additional Claims?

- If a claimant stops claiming, the assumption is that is due to the claimant returning to work or being hired by a new employer
- If the claimant then resumes claiming, then an assessment is needed to determine:
 - if the claimant is again out of work through no fault of their own
 - And who the employer is that is responsible for the unemployment
- The Additional Claim collects the information to determine if the claimant is still permitted to claim weekly benefits and who is the employer to be assessed for those benefits



When the claimant has logged in and views the “Current Unemployment Benefits”, if the tile does not reflect an opportunity to file a weekly claim, an Additional Claim is required to allow the claimant to resume submitting weekly claims again.

To file the Additional Claim, click “Reopen or File an Additional Claim”

[Home](#) [Action Center ²](#) [Settings](#) [I Want To...](#)

COLIN HUGHES
***-**-3908
21217 NW SAUVIE ISLAND RD
PORTLAND OR 97231-1319

Claimant Services

> [File a Paid Leave Oregon Claim](#)

Current Unemployment Insurance Benefits
Benefit Begin: 30-Mar-2025
Eligibility Through: 28-Mar-2026
[Action Center Items ²](#)

Benefit Details

> [View Week History](#)
> [View or Change Benefit Details](#)
> [Update Benefit Payment Method](#)

Restart My Claim

> [Reopen or File an Additional Claim](#)



Claimant will need to verify their identity by entering their SSN.

A disclaimer is included detailing the need for truthful and accurate information. Upon agreeing to these statements, click on the check box under “Disclaimer”.

Click “Next” to continue.

< PAM BEESLEY

File a Benefit Claim

PAM BEESLEY
***-**-4825

Identity

You must enter your Social Security Number to verify your identity. Protecting your personal information is important to us.

***-**-4825

You must tell the truth on this application

It is very important that you provide true and accurate information on your application. There may be additional penalties if you intentionally make a false statement or purposefully do not report true and accurate information so you can receive benefits.

What could happen if I do not provide accurate information?

- Our work on your claim may be delayed, which could delay your benefits.
- Your claim can be denied, and you will not receive benefits.
- Your claim can be overpaid, and you will have to repay benefits.
- If you knowingly give us false information, you may have to complete a number of penalty weeks on your claim. This means you can claim these weeks and be eligible for benefits, but you will not be paid for these weeks.
- You can be prosecuted for a crime and be forced to pay penalties and serve time in jail.

Disclaimer

☒ By checking this box, I certify that all statements provided are true and accurate. I understand that these statements are made under the penalty of perjury and that any intentional misrepresentation is considered fraud. If I am found to have committed fraud, I understand that I may be subject to prosecution.

Cancel

< Previous

Next >



The Additional Claim is seeking information about any employment during the period that was not claimed.

Work Share claimants should answer “Yes” to working for an employer during the period that was not claimed.

Work Share claimants should answer “No” to working as an independent contractor or self-employment during the period that was not claimed as that would not be relevant to their Work Share claim.

Click “Next” to continue.



< ISAAC MCADOO

File a Benefit Claim

ISAAC MCADOO

***-**-8510

Provide the following information to help decide how to proceed.

Have you worked for an employer since June 22, 2025?

Yes

No

Have you worked as an independent contractor or been self-employed since June 22, 2025?

Yes

No

Cancel

< Previous

Next >

The Additional Claim is seeking information about any employment during the period that was not claimed.

Work Share claimants should answer the questions as applicable to their situation.

Click “Next” to continue.

<

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File a Benefit Claim

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***-**-8510

Earnings Last Week

During the week of June 29, 2025 through July 5, 2025, did you have gross earnings of \$812 or more? *

Yes

No

During the week of June 29, 2025 through July 5, 2025, did you work 40 hours or more? *

Yes

No

Cancel

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This screen details the information needed to complete the Additional Claim including:

- Employer names
- Employer addresses
- Employer phone numbers
- Start and end dates of your employment for each employer
- Any self-employment
- If electing for direct deposit, bank account and routing numbers are needed

When ready to continue, click “Next”



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Additional Unemployment Insurance Claim

ISAAC MCADOO

***_**-8510

Gather Materials

Unemployment Insurance Oregon Application for Benefits

Please gather and be prepared to provide the following information:

- Your work history for the last 18 months, including
 - Dates of employment
 - Your employers' business names, addresses, and phone numbers. If you worked for a Federal employer that was not the military, you may find this information on an SF-8 or SF-50.
 - Your salary from each employer.

Before restarting your claim, **please review some of the eligibility requirements.**

- You must be able to work, be available for work, and be actively seeking work each week you claim. It is your responsibility to keep track of your work search efforts.
- You must look for work in your labor market and normal occupation. You must stay in the area of your permanent residence for the major portion of the week unless you are seeking work elsewhere.
- You must be willing to work all days and shifts normal for your occupation.
- You must be available for full-time, part-time, and temporary work. If you are limited to part time work because of a permanent or long-term disability, you may still be eligible for benefits.

Cancel

Save Draft

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Next >

All employment history during the period that was not claimed must be accounted for.

Enter employment history by clicking “+ Add Employer” to identify an employer.

This process is to be repeated until all employers during the applicable time period are identified.

This process will be very similar to the process used for filing an Initial Claim.

Additional Unemployment Insurance Claim

ISAAC MCADOO
***-**-8510

✓

✓

➤

Gather MaterialsSubsequent EmploymentWork History

Employment History Since Your Previous Claim

We have retrieved your known employment since your last active claim.

To complete your employment history:

1. Select each employer's name below to answer questions about your employment.

2. If you do not see an employer that you have worked for since June 22, 2025, add that employer with the Add Employer link.

3. After you have added all employers and answered questions about all the jobs you have had since June 22, 2025, use the Next button to continue.

Employers

Name	Address	Employer Type	
There are no employer records.			

➤ + Add Employer

CancelSave Draft

< PreviousNext >



If available, a list of previous and/or current employers will appear. Select the employer by clicking on the employer's name.

If the employer is listed, skip the next three pages or [click here](#) to continue the tutorial.

If an employer is not listed, follow the next three pages to add the employer manually.

2. If you do not see an employer that you have worked for since January 7, 2024, add that employer with the Add Employer link.

Claim Filing

Previous Employers

Show Older Employers

Name	Address	Type
DUNDER MIFFLIN PAPER CO	3385 CENTER ST NE SALEM OR 97301-4609	In-State Employer

Cancel

Add a New Employer



Manually Add Employer

If no previous employers were available, the screen will prompt the claimant to add an employer.

Click “+ Add Employer” to add the employer to the claim.

< PAM BEESLEY

File a Benefit Claim

PAM BEESLEY
***-**-4825

Provide the following information to help decide how to proceed.

Use the Add Employer link to add an employer you worked for since **January 1, 2022**. *

You only need to add one employer at this time. You will be asked to provide the details of your recent employment history on a different screen.

[+ Add Employer](#)

Cancel

< Previous **Next** >



Select the Employer Type as
“In-State Employer”.

< PAM BEESLEY

Regular Unemployment Insurance Claim

PAM BEESLEY
***_**-4825

✓ Contact ✓ Physical Address ✓ Mailing Address ✓ Mail Delivery ✓ Wage Type > Work History

Employment History

We have retrieved your known employment since January 6, 2024.

To complete your employment history:

1. Select each employer's
2. If you do not see an em
3. After you have added a

Employers

Name
There are no employer records.

+ Add Employer

Claim Filing

Select Employer Type

- In-State Employer
- Self-Employed Individual

Cancel Save Draft < Previous Next >



Identifying the employer can be done by either providing an Employer’s FEIN or BIN or by searching for the Employer by name. The most accurate method is by providing the BIN or FEIN.

The employer’s FEIN or BIN can be found on a paystub or W-2. To choose this option, click on “ID”, enter the number in the text box and click “Search”

If using the Employer name, be aware there may be several employers with similar names. Please ensure the correct Employer name is selected. To choose this option, click on “Name”, enter the name in the text box and click “Search”.

Click the “X” in the upper right corner when complete.

A screenshot of a web form titled "File a Benefit Claim" for PAM BEESLEY. The form has a header with a back arrow and the name "PAM BEESLEY". Below the title, it says "PAM BEESLEY" and "***-**-4825". A large box contains instructions: "Provide the following information to help decide how to proceed." and "Use the Add Employer link to add an employer you worked for since January 1, 2022." with a red asterisk. Below this, it says "You only need to add one employer at this time. You will be asked to provide the details of your recent employment history on a different screen." and a "+ Add Employer" link. A modal window titled "Select a Claim" is open. It has a close button (X) in the top right corner, which is circled in red. The modal has two sections: "Search for Employer" and "Results". The "Search for Employer" section has a "Search By" dropdown with "Name" and "ID" options. Below it is a "Name" text box and a "Search" button. The "Results" section is empty.

Provide employment history details concerning the Employer.

Provide the first day worked for the employer.

For the Work Share Employer, ensure that the claimant has indicated they are still working for the employer.

For the Work Share Employer, enter the current date for “What was the last day of work for this employer”. For non-Work Share Employers, indicate the actual last day worked.

Select “Search for Occupation” to provide information concerning the occupation held with the employer.



All Questions ? ×

DUNDER MIFFLIN PAPER CO
3385 CENTER ST NE SALEM OR 97301-4609

What was your first day of work for this employer? *

Required Required

Are you still working for this employer? *

Yes No

What was your last day of work for this employer? *

Required

Your Occupation

You must provide your occupation. Click the button Search for Occupation to find your occupation.

Search for Occupation

⚠ You have not yet searched for your occupation *

What was your **frequency** of pay with this employer? *

Required

What was your **amount** of pay with this employer? *

Required

What was your job title? *

Required

What were your job duties?

Was the work you did for this employer seasonal? *

Yes No

Cancel Remove OK

Using a keyword search, type in the job title or industry standard equivalent of the position held with the Employer.

Click “Search” to bring up a list of possible matches

The screenshot displays a web application interface for 'Work Share'. In the foreground, an 'Activity Code Search' modal is open. It features a 'Search' section with a 'Keyword' input field and a 'Search' button. The 'Search' button is highlighted with a red circle. The 'Results' section is currently empty. The background shows a form for 'DUNDER MIFFLIN PAPER CO' with fields for 'What was your first day of work for this employer?' (07-May-2018) and 'When did you last work for this employer?' (03-Jul-2025). The form also includes a 'Yes/No' selection for 'Are you still working for this employer?' and a 'Work History' section.



Select the best match from the list by clicking on the “Code” next the most appropriate title

Regular Unemployment

DUNDER MIFFLIN PAPER CO

PAM BEESLEY

3385 CENTER ST NE SALEM OR 97301-4609

***-**-4825

What was your first day of work for this employer?

Activity Code Search

Search

Keyword

office manager

Search

Results

< Page 1 of 2 >


Filter

Code	Title
11-3012	Administrative Services Managers
11-3031	Financial Managers
11-3061	Purchasing Managers
11-9151	Social and Community Service Managers
11-3021	Computer and Information Systems Managers
11-3071	Transportation, Storage, and Distribution Managers
11-9111	Medical and Health Services Managers
13-1075	Labor Relations Specialists
15-1299	Computer Occupations, All Other
55-1011	Air Crew Officers

Cancel



This screen will pop up to give some details about the code selected. If the code selected is not a good match, click “No” to try again. If the code is correct, click “Yes” to continue.

 Are you sure you want to select this code?

11-3012 - Administrative Services Managers

Plan, direct, or coordinate one or more administrative services of an organization, such as records and information management, mail distribution, and other office support services. Medical records administrators are included in “Medical and Health Services Managers” (11-9111). Excludes “Facilities Managers” (11-3013) and “Purchasing Managers” (11-3061).

Business Office Manager; Business Unit Manager; Records and Information Manager; Records Management Director; University Registrar



Continuing providing information about this employer, frequency and amount of pay is needed.

Provide the Job Title held with the employer and provide a description of the duties of this position.

Identify if the work performed was on a seasonal basis.

The following question asks for the situation of employment. For the Work Share Employer, claimants should indicate “**Still Working – Reduction in hours**” as their situation.

All Questions

DUNDER MIFFLIN PAPER CO
3385 CENTER ST NE SALEM OR 97301-4609
What was your first day of work for this employer? *
Required
Are you still working for this employer?
Yes No
What was your last day of work for this employer? *
Required

Your Occupation
You must provide your occupation. Click the button Search for Occupation to find your occupation.
Search for Occupation
⚠ You have not yet searched for your occupation *

What was your frequency of pay with this employer? *
Required
What was your amount of pay with this employer? *
Required
What was your job title? *
Required
What were your job duties?
Was the work you did for this employer seasonal? *
Yes No

Cancel Remove OK

Was the work you did for this employer seasonal? *

Yes No

Which of these describes your situation? *

Required

Leave of Absence
Still Working - No reduction in hours
Still Working - Reduction in hours
Strike or Lockout
Suspended

or



After providing the description of “Still Working – Reduction in hours”, new questions will appear.

“When did your reduction of hours begin?”

This question is relevant to the condition that drove the creation of this unemployment claim. Work Share claims are established due to a possible reduction in hours so that condition is current. The current date should be entered.

“When do you expect to return to work full-time?” This question is relevant to the period the condition may apply to. For the Work Share claim, the claim will be valid for 52 weeks so the best date to enter is 52 weeks or one year from the current date.

Click “OK” to continue



Was the work you did for this employer seasonal?

Which of these describes your situation?

Still Working - Reduction in hour ▼

You are performing services for this employer, with a reduction in hours.

When did your reduction of hours begin?

11-Mar-2024

When do you expect to return to work full-time?

07-Mar-2025

After being added, the employer appears under the heading “Employers”.

If a triangle is next to the employer’s, it indicates that information is still needed about that employer. To correct this error, click on the employer’s name to return to the questions and complete the form.

If no error is present, a “pencil” icon will be present next to the employer name.

If additional employers are to be provided, repeat the previous add employer steps. You can [click here](#) to go back to that process to add additional employers.

If all employers have been provided, select “Next” to continue.



Regular Unemployment Insurance Claim

PAM BEESLEY
***-**-4825



Employment History

We have retrieved your known employment since January 7, 2024.


To complete your employment history:

1. Select each employer's name below to answer questions about your employment.
2. If you do not see an employer that you have worked for since January 7, 2024, add that employer with the Add Employer link.
3. After you have added all employers and answered questions about all the jobs you have had since January 7, 2024, use the Next button to continue.

Some employers have multiple names and addresses. For the most accurate results, search for your employer using their identification number (ID). Enter your employer's Business Identification Number (BIN) or Federal Employer Identification Number (FEIN). To find this number, check your Form W-2 (Box b) or paystub. If you can't find this number, and you are still employed, ask your employer.

Choosing the wrong employer will cause delays in your claim.

Employers

Name	Address	Employer Type	
 DUNDER MIFFLIN PAPER CO	3385 CENTER ST NE SALEM OR 97301-4609	In-State Employer	Remove

+ Add Employer


Cancel

Save Draft

< Previous

Next >

Employers

Name	Address	Employer Type	
 DUNDER MIFFLIN PAPER CO	3385 CENTER ST NE SALEM OR 97301-4609	In-State Employer	Remove

+ Add Employer

Cancel

Save Draft

< Previous

Next >

The claimant must read and agree to the Certification statements by entering their name in the box provided.

Additionally, they must read and agree to the Work Share requirements by clicking the checkbox provided.

Once selected, click on “Next” to continue



< ISAAC MCADOO

Additional Unemployment Insurance Claim

ISAAC MCADOO
***-**-8510

Gather Materials

Subsequent Employment

Work History

Certification

Certification

I understand the questions I have been asked. My answers are true to the best of my knowledge.

I understand the law provides penalties for making false statements in order to obtain benefits from the Unemployment Insurance Program.

I certify that I understand that it is my responsibility to know the information in both the [Unemployment Insurance Claimant Handbook](#) and [Work Share Claimant Handbook](#). More information is on the [Work Share website](#).

By entering your name in the box below, you are certifying the above information.

Required

Eligibility Notice: Your Work Share Requirements

Your weekly hours must be reduced between 10% and 50%.

You must be available for all work offered through your Work Share employer.

You must remain in contact with your Work Share employer.

You must not be a seasonal worker.

For each week you claim benefits, you must be:

- Able to work;
- Available for full-time, part-time, and temporary work during all of the days and hours typical for your type of work.

The following situations are not common:

You may be considered temporarily unemployed if your hours are reduced more than 50% for four weeks in a row. You must resume work-seeking activities after five consecutive weeks of being considered temporarily unemployed.

☐ I agree to the above statements. *

Cancel

Save Draft

< Previous

Next >

A Summary is provided for review of Additional Claim information provided.

When ready to submit the Additional Claim, click “Submit”

< ISAAC MCADOO

Additional Unemployment Insurance Claim

ISAAC MCADOO
***-**-8510

✓

Gather Materials

✓

Subsequent Employment

✓

Work History

✓

Certification

>

Summary

Summary

You are not yet done. Review the information below, then click Submit when ready.

Additional Unemployment Insurance Claim

Social Security Number : ***-**-8510

Employment

Name	Separation Reason	Employer Type	First Day Worked	Last Day Worked	Separation Date
AFC RICHMOND		In-State Employer	05-Feb-2020	04-Jul-2025	

Wage Type

Worked in Another State : No
Worked for Federal Government : No
Worked for Military : No

Attachments

Name	Type	Employer	Size (k)
There are no attachments.			

Cancel

Save Draft

< Previous

Submit





After completing the Additional Claim process, the weekly claim will reflect “Ready to File”.

“File Now” can be selected to submit a weekly claim.

A screenshot of the Oregon Employment Department's 'Action Center' for a user named Colin Hughes. The interface shows a navigation bar with 'Home', 'Action Center' (with a red notification badge), 'Settings', and 'I Want To...'. Below the navigation bar is a 'Filter' input field. The main content area is divided into two columns. The left column displays the user's name 'COLIN HUGHES', a masked phone number '***-**-3908', and an address '21217 NW SAUVIE ISLAND RD, PORTLAND OR 97231-1319'. The right column contains several sections: 'Claimant Services' with a link to 'File a Paid Leave Oregon Claim'; 'Current Unemployment Insurance Benefits' with details on benefit start/end dates and eligibility, and a link to 'Action Center Items'; 'Claim for Week of 05-Jul-2025' with a status of 'Ready to File' and a 'File Now' button circled in red; 'Benefit Details' showing a weekly benefit amount of \$812.00 and links to view history, change details, or update the payment method; and 'Restart My Claim' with a link to 'Reopen or File an Additional Claim'. A red arrow points from the 'Ready to File' status to the 'File Now' button.

