

OREGON



How to Submit a Work Share Application

How to Apply for or Renew a Work Share Plan

- Work Share plans are valid for 52 weeks.
- Plans can start on the Sunday of the week the application is submitted or on a future Sunday.
- Plans can be renewed year after year.
- Plans are tied directly to the Oregon Business Identification Number (BIN) that provides payroll for the affected employees.



On the Home tab, select the “More” hyperlink in either the Wages and Contributions panel or the Unemployment Insurance panel.

(Depending on your access, you may not see both panels.)



DUNDER MIFFLIN PAPER CO

00-000589798
3385 CENTER ST NE
SALEM OR 97301-4609

Welcome, David Wallace

You last logged in on Wednesday, Mar 6, 2024 9:30:33 AM

[Manage My Profile](#)

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

Filter

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Contributions
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Wages and Contributions

Payable Balance

(\$399.81)

Period

2023 Quarter 4

Report Filing

Quarterly: Form OQ and 132

Status

Ontime-Processed

> [View and File Payroll Reports](#)

> [Report a Change in Business Status](#)

> [More...](#)

Unemployment Insurance

Current Tax Rate

2.40%

> [View Tax Rates](#)

> [View More Employer Details](#)

> [Notice of Election to Cover Employees](#)

> [Corporate Officer Exclusion](#)

> [More...](#)

Paid Leave Oregon

> [Submit an Equivalent Plan Application](#)

> [Submit an Assistance Grant Application](#)

> [Submit an Adjustment Grant Application](#)

On the More tab, you will see several sub-panels, including Work Share Plans.

(Depending on your access, you may not see all panels.)



More...

Contributions
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More...

What are you looking for?

Wages and Contributions

Submit requests relating to your wages and contributions account.

- > View and File Payroll Reports
- > Make Garnishment Payment
- > Report a Change in Business Status
- > Add Authorized Representative
- > Tax Compliance Certification

Refunds

Request a new or replacement refund for your contributions account.

- > Request a New Refund
- > Request a Replacement Refund

Unemployment Insurance

Submit requests relating to Unemployment Insurance.

- > Enter School Break Dates
- > FUTA Certification
- > Request a Good Cause Waiver or Deletion
- > Report Separation Reason and Request Relief of Charges
- > Notice of Election to Cover Employees
- > Corporate Officer Exclusion
- > Benefit Charges Inquiry

Appeals

Submit requests relating to appeals.

- > Submit a Benefits Appeal
- > View Benefits Appeal
- > Submit a Tax Appeal
- > Withdraw a Tax Appeal

Tax Rates

Submit requests relating to your tax rates.

- > View Tax Rates
- > Rate Review and Redetermination

Paid Leave Oregon

Submit requests relating to Paid Leave Oregon.

- > Submit an Equivalent Plan Application
- > Request Data Access for Coverage

Multi-BIN Filing

File payroll reports for multiple BINs.

- > Multi-BIN Filing
- > Add New Client Accounts To My Business
- > Work With My Clients
- > Remove Clients My Business No Longer Works With

Work Share Plans

Apply for Work Share or view and manage an existing Work Share plan.

- > Apply for Work Share
- > Work Share Plans
- > View Filed Claims

SIDES

The State Information Data Exchange System (SIDES), is a system that allows electronic transmission of information regarding unemployment insurance claims between agencies and employers. Click below to register for SIDES or request a PIN reset.

- > Register for SIDES
- > Reset SIDES PIN

Work Share is an Oregon Employment Department Program

5

From the Work Share Plan panel, you can:

- Select “Apply for Work Share” to submit an application.
- Select "Work Share Plans" to change an existing plan.
- Select "View Filed Claims" to view or dispute previous weeks claimed.

Work Share Plans

Apply for Work Share or view and manage an existing Work Share plan.

> [Apply for Work Share](#)

> [Work Share Plans](#)

> [View Filed Claims](#)



The Introduction screen shows minimum requirements information and Work Share program guidelines.

After reviewing, select “Next” to continue.

[< More...](#)

Work Share Application

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Introduction

Introduction

The Work Share program provides an alternative for employers and workers who may be facing a layoff situation. Work Share allows employers to reduce work hours for their employees by providing partial unemployment insurance benefits that supplement workers' reduced wages.

To qualify for the program, the following criteria must be met:

- Minimum of three (3) qualifying employees must be participating throughout the program.
- Seasonal or temporary employees are not eligible for the Work Share program.
- Weekly work hours and wages for participating employees will be reduced by at least 10% and not more than 50%.
- Customary work week may not fluctuate from week to week.
- If the participating employees are part of a union, then the plan must be approved by the collective bargaining agent for each affected employee under a collective bargaining agreement.

Plans are in effect for one year from the start date. The plan may be cancelled or adjusted at any time within the year using Frances Online.

An employer may apply for the program by completing the following application and participant information.

Cancel

[< Previous](#)

[Next >](#)



Review the list of information needed to complete the Work Share application.

After reviewing, select “Next” to continue.

[< More...](#)

Work Share Application

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✓

Introduction

➤

Required Information

Required Information

The following information is required to complete an application:

- Name, job title, email, and phone number of all representatives from your business that will coordinate with Work Share program specialists for program enrollment and participation.
- Date that the plan will start. Plans must begin on a Sunday.
- How you plan to implement the program and notify your employees of the plan.
- Signed approvals from Authorized Union Representative (if applicable).
- Name, social security number, date of hire, current hours, proposed reduced hours, and the reason why the individual is being added to the plan for each participating employee.

Cancel

[< Previous](#)

[Next >](#)



This screen describes Employer and Participating Employees' responsibilities related to the Work Share program.

After reviewing, select “Next” to continue.

< More...

Work Share Application

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✓

Introduction

✓

Required Information

➤

Responsibilities

Employer’s and Participating Employees’ Responsibilities

The business is responsible for the following:

- Notifying all employees participating in the Work Share plan with a link to the Initial Claim application located in Frances Online.
- Informing participants that they must report all secondary earnings e.g. outside employment, self-employment, rental property income, dividends, and other capital income.
- Notifying the Employment Department immediately if there are any changes to the information on the plan application or the participating employees.
- Furnishing all reports and information necessary for proper administration of the Work Share plan.
- Continuing to provide health benefits under the same terms and conditions as when the affected employee worked their usual weekly hours, unless health benefits change for all employees.
- Providing retirement benefits under a defined benefit plan or contributions under a defined contribution plan under the same terms and conditions as when the affected employee worked their usual weekly hours, unless retirement benefits change for all employees.
- Understanding participation in the Work Share program may have an adverse effect on the annual Unemployment Insurance tax rate assigned to the business.

The participating employees are responsible for the following:

- Completing all weekly claims, corrections, certifications, and submitting them to the Employment Department no later than seven (7) days after the end of the week for which benefits are claimed. That includes completed claim certifications with earnings for another employer or missed work opportunities.
- Understanding any hours reported above 40 for a customary work week should be entered as 40 hours on their weekly claim.

Cancel

< Previous

Next >



Choose the appropriate answer from the dropdown menu and select “Next” to continue.

Work Share Application

DUNDER MIFFLIN PAPER CO
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Introduction

Required Information

Responsibilities

Employer Information

Employer Information

How did you learn about Work Share? *

Required

Cancel

Previous

Next



Enter the name and contact information for an authorized Work Share program representative.

You must provide one Primary Employer Representative; however, we strongly encourage designating an alternate.

Enter the appropriate information and select “Next” to continue.



[< More...](#)

Work Share Application

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✓

Introduction

✓

Required Information

✓

Responsibilities

✓

Employer Information

➤

Employer Representatives

Employer Representatives

Please identify two representatives from your business to coordinate with Work Share Program Specialists for program enrollment and participation.

Primary Employer Representative:

Name *

Job Title *

Email *

Phone *

Alternate Employer Representative:

Name

Job Title

Email

Phone

Cancel

< Previous

Next >

Here you will enter information about your plan, including:

Plan Preferred Name (required): Can be any combination of numbers and/or letters. Names commonly seen are plan numbers, dates/years or office locations.

Requested Plan Start Date (required): Must be a Sunday date, can be the Sunday of the current week or a future Sunday date.

After providing your plan information, select “Next” to continue.



< More...

Work Share Application
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Progress bar: Introduction (checked), Required Information (checked), Responsibilities (checked), Employer Information (checked), Employer Representatives (checked), **Plan Information** (active)

Plan Information

Preferred Plan Name *

Requested Plan Start Date *

Estimated Number of Employees Affected *

How many layoffs will you avoid? *

Describe how your business plans to implement the Work Share program. *

How do you plan to notify your employees of the Work Share plan? *

If the affected employees have a Union Affiliation, use this screen to upload signed approvals.

OED does not have a formal form for this purpose. You may use your own letter or document signed by the Authorized Union Representatives.

After providing the appropriate information, select “Next” to continue.

[< More...](#)

Work Share Application

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✓

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nsibilitiesEmployer InformationEmployer RepresentativesPlan InformationWork Share PresentationUnion Affiliation

Union Affiliation(s) Information

The employer's Work Share plan must be approved by the collective bargaining agent for each affected employee under a collective bargaining agreement.

Please upload signed approvals from Authorized Union Representative(s) using the button below

Upload Signed Approval

Attachments

Type	Name	Description	Size	
There are no attachments.				

Add Attachment

Cancel

[< Previous](#)[Next >](#)



You must add a **minimum of three** employees to your Work Share participant list to submit your plan.

You can manually add participants or add multiple names at once using an Excel spreadsheet.

Select “View Upload Format Specifications” to use an Excel spreadsheet.

[< More...](#)

Work Share Application

DUNDER MIFFLIN PAPER CO
00-000589798

Information

Employer Representatives

Plan Information

Work Share Presentation

Union Affiliation

Participant List

Work Share Participant List

Please provide the requested information for each of the participating employees.

Employee participants in the work share plan will appear in the box below once you have selected the **Add Employee** link and filled out the fields. Alternatively, you may upload a file by using the button below and following the specified formatting instruction. Be aware that using a file upload will overwrite any previously added employees.

[View Upload Format Specifications](#)

Upload Participant List

You can review added participant's information or remove them from the list directly from the box below.

You can click the **Show Errors** hyperlink to see which employee records need reviewed before you can continue.

Participating Employees

	Social Security Number	Last Name	First Name	MI
<div>+ Add Employee</div>				

+ Add Employee

Cancel

[< Previous](#)

Next >



Select “Excel Template” to download the Participant List template.

After downloading the Excel Template, select “OK” to continue.

Work Share Participant List

Please provide the requested information for each of the participating employees.

Employee participants in the work share plan will appear in the box below once you have selected the **Add Employee** link and filled out the fields. Alternatively, you may upload a file by using the button below and following the specified formatting instruction. Be aware that using a file upload will overwrite any previously added employees.

[View Upload Format Specifications](#)

Upload Participant List

Upload Format Specifications

Work Share Participant List Specifications and Template Download

[Excel Template](#)

Note that Excel Spreadsheet uploads:

- Must be composed of one file containing a sheet named **WorkShareParticipants** that contains the employee data.
- The first row in the spreadsheet will not be read and should only contain column names.

Cancel **OK**

Cancel **Previous** **Next**



Example Participant List spreadsheet:

“Current Hours” = number of hours the employee works during normal (not reduced) operations.

“Reduced Hours” = estimation of proposed reduced hours during a business slowdown.

Actual reductions may differ and do not require approval or updates to the Participant List.

	A	B	C	D	E	F	G	H
1	SSN	Last Name	First Name	Middle Initial	Date of Hire	Current Hours	Reduced Hours	Why is this person being added?
2	***_**-4825	Beesley	Pam		5/7/2018	40	32	Reduction in work hours
3	***_**-8755	Flenderson	Toby		1/31/2012	40	32	Reduction in work hours
4	***_**-7462	Halpert	Jim		2/1/2019	40	32	Reduction in work hours
5	***_**-8510	Hannon	Erin		10/3/2021	40	32	Reduction in work hours
6	***_**-6468	Hudson	Stanley		1/5/2009	40	32	Reduction in work hours
7	***_**-5485	Kapoor	Kelly		11/1/2020	40	32	Reduction in work hours
8	***_**-2104	Malone	Kevin		10/1/2015	40	32	Reduction in work hours
9	***_**-8754	Martin	Angela		3/2/2017	40	32	Reduction in work hours
10	***_**-4852	Nunez	Oscar		9/2/2016	40	32	Reduction in work hours
11	***_**-0548	Palmer	Meredith		5/3/2016	40	32	Reduction in work hours
12	***_**-1425	Schrute	Dwight		4/6/2015	40	32	Reduction in work hours
13	***_**-2255	Scott	Michael		8/15/2012	40	32	Reduction in work hours
14	***_**-3908	Vance	Phyllis		6/1/2010	40	32	Reduction in work hours
15								
16								



To upload the Participant List Excel spreadsheet, select “Upload Participant List.”

To upload correctly, the file name **must** be: **WorkShareParticipants**

(no spaces)

[< More...](#)

Work Share Application

DUNDER MIFFLIN PAPER CO
00-000589798

Information

Employer Representatives

Plan Information

Work Share Presentation

Union Affiliation

Participant List

Work Share Participant List

Please provide the requested information for each of the participating employees.

Employee participants in the work share plan will appear in the box below once you have selected the **Add Employee** link and filled out the fields. Alternatively, you may upload a file by using the button below and following the specified formatting instruction. Be aware that using a file upload will overwrite any previously added employees.

[View Upload Format Specifications](#)

Upload Participant List

You can review added participant's information or remove them from the list directly from the box below.

You can click the **Show Errors** hyperlink to see which employee records need reviewed before you can continue.

Participating Employees

	Social Security Number	Last Name	First Name	MI
+ Add Employee				

+ Add Employee

Cancel

[< Previous](#)

[Next >](#)



Confirm participating employees are listed correctly.

To remove employees, select the “X” next to the appropriate line.

To update other participant information, select the “pencil” icon next to the appropriate line.



Work Share Participant List

Please provide the requested information for each of the participating employees.

Employee participants in the work share plan will appear in the box below once you have selected the **Add Employee** link and filled out the fields. Alternatively, you may upload a file by using the button below and following the specified formatting instruction. Be aware that using a file upload will overwrite any previously added employees.

[View Upload Format Specifications](#)

Upload Participant List

You can review added participant's information or remove them from the list directly from the box below.

You can click the **Show Errors** hyperlink to see which employee records need reviewed before you can continue.

Participating Employees

	Social Security Number	Last Name	First Name	MI
		***-**-4825	BEESLEY	PAM
		***-**-8755	FLENDERSON	TOBY
		***-**-7462	HALPERT	JIM
		***-**-8510	HANNON	ERIN
		***-**-6468	HUDSON	STANLEY
		***-**-5485	KAPOOR	KELLY
		***-**-2104	MALONE	KEVIN
		***-**-8754	MARTIN	ANGELA
		***-**-4852	NUNEZ	OSCAR
		***-**-0548	PALMER	MEREDITH
		***-**-1425	SCHRUTE	DWIGHT
		***-**-2255	SCOTT	MICHAEL
		***-**-3908	VANCE	PHYLLIS

+ Add Employee

+ Add Employee

Employee Information can be manually added on this screen.

“Current Hours” = number of hours the employee works during normal (not reduced) operations.

“Reduced Hours” = estimation of proposed reduced hours during a business slowdown.

Actual reductions may differ and do not require approval or updates to the Participant List.

After entering all required information, select “Add” to continue.

Employee Information

Employee Information

Social Security Number *
Required

Last Name *
Required

First Name *
Required

Middle Initial

Employment Information

Date of Hire *
Required

Current Hours *
Required

Proposed Reduced Hours *
Required

Why is this person being added? *
Required

What date is this employee being added?
03-Mar-2024

Cancel

Add



When you are finished adding participating employees, select “Next” to continue.

If you did not add at least three participants, you will see an error message and will need to add additional employees to continue.

[< More...](#)

Work Share Application

DUNDER MIFFLIN PAPER CO
00-000589798

Information

Employer Representatives

Plan Information

Work Share Presentation

Union Affiliation

Participant List

Work Share Participant List

Please provide the requested information for each of the participating employees.

Employee participants in the work share plan will appear in the box below once you have selected the **Add Employee** link and filled out the fields. Alternatively, you may upload a file by using the button below and following the specified formatting instruction. Be aware that using a file upload will overwrite any previously added employees.

[View Upload Format Specifications](#)

Upload Participant List

You can review added participant's information or remove them from the list directly from the box below.

You can click the **Show Errors** hyperlink to see which employee records need reviewed before you can continue.

Participating Employees

	Social Security Number	Last Name	First Name	MI
<div>+ Add Employee</div>				

+ Add Employee

Cancel

< Previous

Next >



Review the agreements and enter your name in the “Print Name” block.

Select “Submit” to complete the application.

[< More...](#)

Work Share Application

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00-000589798

✓

representatives

✓

Plan Information

✓

Work Share Presentation

✓

Union Affiliation

✓

Participant List

>

Submit

Submit

By submitting this form, I agree to abide by all federal and state unemployment laws and follow the business’ responsibilities of the Work Share Program. I attest that all information provided in this application is true and correct.

By signing this form electronically, I understand and acknowledge that this electronic signature has the same meaning and validity as my handwritten signature. I further attest that I have signature authority with the named employer.

Print Name: *

Required

Required

Cancel

[< Previous](#) **Submit**



The application will show as “Plan Pending Review” while Work Share staff are reviewing your plan.

Select “More” at the top of the screen to return to the More tab.

[< More...](#)

Work Plans

Contributions
00598765-8
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Work Plans

[View Active and Pending Plans](#)

Plan ID F9-7J32-6924 03-Mar-2024 - 03-Mar-2025	Plan Name Scranton Percentage of Work Reduction 20.00	Received 05-Mar-2024	Update Work Plan
Plan Pending Review			



When the Work Share plan has been approved, the status on this screen will change to “Plan Approved on (date)”

After your plan is approved, more options will be visible in the Work Plans panel, including:

- “View Plan Employees”
- “Update Work Plan.”

Select “More” at the top of the screen to return to the More tab.

< More...

Work Plans

Contributions

00598765-8

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Work Plans

Work Plans

View Active and Pending Plans

Filter

Plan ID F9-7J32-6924	Plan Name Scranton	Received 05-Mar-2024	View Plan Employees
03-Mar-2024 - 03-Mar-2025	Percentage of Work Reduction 20.00		Update Work Plan
Plan Approved on 05-Mar-2024			

