



SEPARATION INFORMATION E-RESPONSE WEB SITE

USER GUIDE

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1 Introduction

SIDES E-Response makes it possible for employers to respond electronically to requests for information from participating state unemployment insurance agencies. This guide provides step-by-step guidance for responding to requests for information about the reasons that a former worker was separated from employment, including samples of the screens that you will see when you log-in to E-Response and enter information related to a specific claim/individual. The E-Response system performs a comprehensive check of the information to ensure that it is complete before it is submitted. When a response is submitted, E-Response provides a confirmation number for your records.

2 Getting Started

2.1 Minimum Requirements, Credentials, and Conventions

Minimum Requirements.

The minimum system requirements to use SIDES E-Response are:

- Internet Explorer version 7.0 or higher.
- Javascript must be turned on.
- A minimum screen resolution of 1024 x 768.

2.2 Credentials

Before logging into SIDES E-Response, you will need the following credentials:

- Federal Employer Identification Number (FEIN)
- State Employer Identification Number (SEIN) if used by requesting State.
- Personal Identification Number (PIN)

The State Unemployment Insurance (UI) agency requesting information will provide your PIN either with the notice that requests separation information or through another avenue. Some States may assign a business one PIN for access to all requests sent to it; other states may assign a separate PIN for access to each request. If you have questions regarding credentials for logging in to E-Response, please contact the State UI agency from which you have received a request.

2.3 Conventions

This guide uses the following conventions:

[Button]: Brackets indicate a button and the button label you will see on the screen.

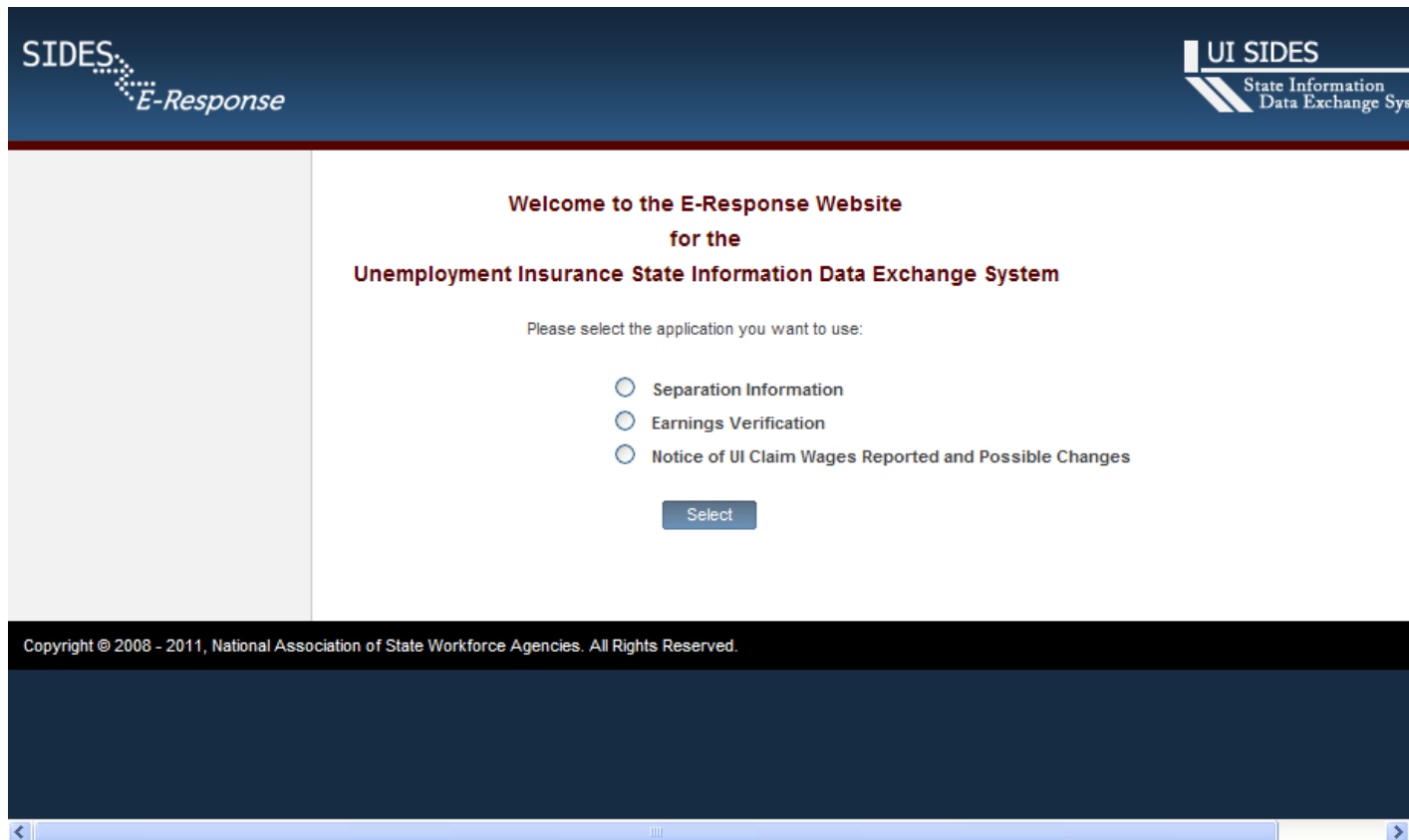
- Hyperlink:** All hyperlinks in the screen will be indicated with a bold underline.
- “Area of screen”:** Double quotes indicate headers or some other specific area of a particular screen.
- SMALL CAPS:** Screen titles are shown in SMALL CAPS.

3 Logging In

To log-in to SIDES E-Response:

- Launch an Internet Browser (Internet Explorer, version 7.0 or higher required)
- Go to <http://uisides.org>

The screen shown below will appear.



On the WELCOME screen, select Separation Information, and click the [Select] button.

The screen shown below will appear.

* indicates a Required Field

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Note: Dashes and/or other punctuation should be omitted from the Federal/State Employer Identification Numbers.

Separation Information Application Response Entry

To respond to your separation information request(s), please login using the instructions provided by the State Agency.

* State: ?

* Federal Employer Identification Number: ?


* State Employer Identification Number: ?

* Identification Number/Access Code: ?

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On the LOGIN screen, do the following:

- Select the appropriate State from the drop-down list;
 - Enter your Federal Employer Identification Number (FEIN) without dashes or other punctuation;
 - Enter your State Employer Identification Number (SEIN) without dashes or other punctuation;
- Note:** If a State UI agency does not use a State Employer Identification Number, the SEIN is not required and no SEIN box will be displayed on the Login screen;
- Enter the PIN provided to you by the requesting State UI agency, and
 - Click the [Login] button.

- Help Icon.  This symbol indicates help is available for the particular field where it is found. Simply mouse over the icon to see the help text.
- Screen Identification Number. The number in the bottom right corner of each screen identifies it. Should you have questions or problems with a particular screen/page, please refer to this screen number when contacting your State UI agency.
- Standard Web Interface Features. Many pages include navigation and functions that are common on most websites, including clickable radio buttons, check boxes, drop-down menus, and text fields. Remember to use only the navigation features built into the site. Using browser navigation features to go back, forward, or print could cause you to lose your work.

5 Separation Information Requests Screen

After logging in to E-Response you will see the pending separation information request or requests that are associated with the PIN that you entered. A sample screen is shown below.

Search by SSN: (Omit Dashes)

Search

Select a Separation Information Request to create a response and/or view/print. Or, select a Separation Information Response to edit, delete or view/print.

Select "Create Response" to begin a response.

Select "Edit Response" to edit information to a response that has not yet been submitted.

Select "Delete Response" to delete a response that has not yet been submitted.

Select "Create Amendment" to change a response that has already been submitted.

Select "Edit Amended Response" to edit information on an amendment in progress.

Select "Delete Amended Response" to delete an amended response that has not yet been submitted.

Note: Requests remain on the SIDES E-Response Website for 30 days.

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Announcement: Welcome to UI SIDES SEW.

Separation Information Requests

Separation Information Requests for PIN:

SSN: 000-98-9494 Name: WHEELOCK, PHILIPPE M Date Due: 11:59 PM Eastern on 12/24/2011	Response Status: Not Started Create Response	View/Print	?
SSN: 007-79-8253 Name: RONQUILLO, OSMIN Date Due: 11:59 PM Eastern on 12/24/2011	Response Status: Not Started Create Response	View/Print	?
SSN: 561-24-7802 Name: JOHANSON, ALLEN Date Due: 11:59 PM Eastern on 12/24/2011	Response Status: Not Started Create Response	View/Print	?
SSN: 001-29-3253 Name: BRUNTZ, AMANDA Date Due: 11:59 PM Eastern on 01/14/2012	Response Status: Not Started Create Response	View/Print	?

No separation requests found for other PINs.

At the top left is a "Search by SSN" box. If the list of pending requests is lengthy, you can locate a specific request by entering the SSN to which it relates in this box and clicking [Search].

The list shows each claimant's name, SSN, and the date and time that the separation information response is due to the requesting state. It is important that each response be submitted by its due date to ensure that the information can be used to determine whether the individual is eligible for unemployment benefits.

Response Status Buttons. The buttons shown for each pending request indicates its status.

- If the response has not yet been started, the button will show [Create Response]

- If the response is in progress, you can choose the buttons [Edit Response] or [Delete Response]
- If the response has been submitted, the button will show [Create Amendment].

5.1 Creating a Response

This section takes you step by step in the process of creating and submitting a response. At any point in the process, you can save your work and come back to it later. When you login to work on it later, click the [Edit Response] button which will take you back to the beginning of the response pages. You also have the option of deleting all of the information that you have entered and starting fresh by clicking the [Delete Response] button.

To begin work on a response, click [Create Response]. You will then see the **CLAIMANT AND EMPLOYER IDENTIFICATION** page. A sample is shown below.

* indicates a Required Field

Please review Employer Information and enter any corrections.

Please select **SAVE** to view any newly required fields due to data input into the system since the last **SAVE**.

Note: Selecting the **NEXT** or **GO** buttons will **SAVE** the data entered before moving away from this screen. Saved data can be changed later if necessary. If you do not want to save the data entered on this screen, press the **CANCEL** button before selecting **NEXT** or **GO**.

TPA: Third Party Administrator

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Response for: SSN: 000-98-9494 Claim Number: 65070 Name: WHEELLOCK, PHILIPPE M

Claimant and Employer Identification

Save completed successfully.

Requesting State

State: **NJ**
Agency: **E ORANGE**
Phone: **6095559055**
Fax: **6095559014**

Claimant Provided Information

SSN: **000-98-9494**
Name: **WHEELLOCK, PHILIPPE M**
Other Last Name Used:
State Claim Number: **65070**

Employer Information

Information of Record

Employer Name: **ELDORA ENTERPRISES LTD LIABILITY CO**
State Employer Identification Number: **342424001**
Federal Employer Identification Number: **841173055**

Employer Information (if different)

?
 ?
 ?

- Check here if claimant did NOT work for this employer ?
 Check here if TPA receiving this request does NOT represent this employer ?

Preparer Information

* Who is providing this response?

Employer TPA ?

* If the preparer is a TPA, what is the TPA company name?

?

* Name of the person preparing this response?

?

* Job title of the person preparing this response?

?

* Preparer's telephone number plus extension? (Only digits, omit parenthesis, dashes or spaces)

?

Preparer's e-mail address?

?

Preparer's Fax number? (Only digits, omit parenthesis, dashes or spaces)

?

Cancel

Save

Main Menu

Next >

Go to Page

Go

This page includes a series of pre-populated fields including “Requesting State” information and “Claimant Information.” This information cannot be changed.

“Employer Information” is also pre-filled; however, should this information be incorrect, you may provide corrected information. If you enter information into the “Corrected Employer Information” fields, the changed data will be routed to the appropriate State UI agency for review and handling.

Immediately below this section, there is an opportunity to check a box indicating that the request has been sent to you in error either because the individual did not work for your business or, if you are a TPA, that you do not represent the employer for whom the individual worked. If you check one of these boxes, click [Next] which will give you the opportunity to provide comments and submit the response.

In the “Preparer Information” section you will enter information about the entity and person preparing the response.

After completing the required information on the Claimant and Employer Identification page, click [Next]. This will take you to the **ADDITIONAL CLAIMANT INFORMATION REQUEST** page. A sample is shown below.

* indicates a Required Field

Enter any additional or corrected information.

Documents may be attached to this Separation Information Request. Note: Some documents may require your response.

Note: Selecting the **BACK**, **NEXT** or **GO** buttons will **SAVE** the data entered before moving away from this screen. Saved data can be changed later if necessary. If you do not want to save the data entered on this screen, press the **CANCEL** button before selecting **BACK**, **NEXT** or **GO**.

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Response for: SSN: 000-98-9494 Claim Number: 65070 Name: WHEELLOCK, PHILIPPE M

Additional Claimant Information Request

Information of Record

Did the claimant work under any other Social Security Number (SSN)? (Omit dashes) **000-98-9494**

Claimant Name used to file claim: **WHEELLOCK, PHILIPPE M**

Other Last Name Used:

State Claim Number: **65070**

Benefit Year Beginning Date: **09/28/2011**

Type of Claim: **New Initial Claim**

Additional Information

?

?

Informational only Attachments:			
Document Name	Document Extension	Size	
ExampleDocument1.rtf	RTF	3923	Download
ExampleDocument2.pdf	PDF	60040	Download
ExampleDocument3.txt	TXT	25	Download
ExampleDocument4.tif	TIFF	633832	Download
ExampleDocument5.csv	CSV	824	Download

[< Back](#) [Cancel](#) [Save](#) [Main Menu](#) [Next >](#)

Go to Page [Go](#)

On this page you are asked to provide any other SSN or name used by the claimant and to download any documents that the requesting state agency has attached to the request. Please download any attachments, review, and complete any that must be returned with your response.

After reviewing/completing this page, click [Next] which takes you to the **EMPLOYMENT INFORMATION** page. You will enter information about the claimant's employment and earnings with your business on this page, a sample of which is shown below.

* Indicates a Required Field

Enter all applicable information using the space provided.

Please select **SAVE** to view any newly required fields due to data input into the system since the last **SAVE**.

Note: Selecting the **BACK**, **NEXT** or **GO** buttons will **SAVE** the data entered before moving away from this screen. Saved data can be changed later if necessary. If you do not want to save the data entered on this screen, press the **CANCEL** button before selecting **BACK**, **NEXT** or **GO**.

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Response for: SSN: 000-98-9494 Claim Number: 65070 Name: WHEELLOCK, PHILIPPE M

Employment Information

Claimant's Job Title:	SKI PATROL	<input type="text"/>	?
Was this seasonal employment?		<input type="checkbox"/> Yes <input type="checkbox"/> No	?
First day of work:	11/25/2005	<input type="text"/>	?
Last day of work:	04/10/2011	<input type="text"/>	?
	If the date the claimant was separated from employment is different than the actual last day of work, what was the date of separation?	<input type="text"/>	?
What was the claimant's average weekly wage?		<input type="text"/>	?
What was the average number of hours the claimant worked per week?		<input type="text"/>	?
What were the total wages earned by the claimant after 10/27/2011:		<input type="text"/>	?
What were the total hours worked by the claimant after 10/27/2011:		<input type="text"/>	?

< Back

Cancel

Save

Main Menu

Next >

Go to Page: Employment Information

Go

After entering this information, click [Next] which will take you to the **REASON FOR SEPARATION** page.

* Indicates a Required Field

Enter all applicable information using the space provided.

N/A: Not Applicable

Please select **SAVE** to view any newly required fields because of data input into the system since the last **SAVE**.

Note: Selecting the **BACK**, **NEXT** or **GO** buttons will **SAVE** the data entered before moving away from this screen. Saved data can be changed later if necessary. If you do not want to save the data entered on this screen, press the **CANCEL** button before selecting **BACK**, **NEXT** or **GO**.

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Response for: SSN: 000-98-9494 Claim Number: 65070 Name: WHEELLOCK, PHILIPPE M

Reason for Separation

Claimant Provided Reason for Separation:

Temporary Layoff

* Employer's Reason for Claimant's Separation:

If the reason for separation is a Labor Dispute, is the claimant not working due to a strike or a lockout? Strike Lockout

Does the claimant have reasonable assurance of returning to work? Yes No

If yes, what date do you expect the claimant to return to work?

If the claimant is still doing some work, is the claimant working all available hours? Yes No N/A

If no, why isn't the claimant working all available hours?

< Back

Cancel

Save

Main Menu

Next >

Go to Page Reason for Separation

Go

Below are the separation reasons available to you from the “Employer’s Reason for Claimant’s Separation” drop-down list. If you know the specific number associated with your reason, you may simply type the number of your choice to jump to that reason in the list.

- | | |
|--|--|
| 1 = Temporary Layoff | 11 = Still Employed, Hours Reduced by Employer |
| 2 = Laid Off/Lack of Work | 12 = On Call or Temporary Status |
| 3 = Fired/Discharged | 13 = Leave of Absence |
| 4 = Vacation/Holiday Shutdown | 14 = Retirement |
| 5 = Asked to Resign | 15 = Disciplinary Suspension |
| 6 = Voluntary Quit/Separation | 16 = Labor Dispute |
| 7 = School Employee Between Semesters or Terms, Likely to Return | 17 = Professional Athlete Between Sports Seasons |
| 8 = School Employee Between Semesters or Terms, Not Likely to Return | 18 = Disaster Related Suspension |
| 9 = Still Employed, Full Time | 19 = Other |
| 10 = Still Employed, Part Time | 99 = Not Provided |

After selecting one of the reasons from the list above, you will be directed to additional pages and asked a series of questions related to that particular reason.

If after you begin answering the questions, you decide that another reason may be more accurate, you may go back and change the reason selected. If you do so, you will see a screen asking you to confirm the change and warning that your answers to the questions related to the prior reason will be deleted.

The screenshot displays the SIDES E-Response interface. At the top, the header includes the SIDES E-Response logo, the South Carolina Department of Employment and Workforce (dew) logo, and the agency's FEIN (999991000) and SEIN (123456789). A 'Sign out' button is located in the top right corner. The main content area is titled 'Change Reason For Separation' and contains a warning message: 'Warning: If you change the reason for separation previously entered for this claimant all of the information you entered pertaining to the original reason for separation will be deleted. However, all general information entered on screens that precede the Reason for Separation screen shall remain.' Below the warning is a link to the 'Users Guide'. The central text asks, 'Do you want to continue?' and provides two buttons: 'Cancel' and 'Continue'. The footer of the page contains copyright information: 'Copyright © 2008 - 2011, National Association of State Workforce Agencies. All Rights Reserved.' and the version number '6.1'.

After completing all the questions related to the reason for separation, click [Next] which will take you to the ATTACHMENTS page.

* indicates a Required Field

> indicates a Required Field if Step 1 is filled in

If an attachment to the separation request reply is in Microsoft Word format, choose **Save As** from the Microsoft Word menu and convert it to RTF (Rich Text Format) or TXT (text) format. If the attachment is in Excel format, choose **Save As** and convert it to CSV (comma delimited) format.

Enter Attachment Information then click on the Save To Table button. Entry will move to Table and clear the data fields.

Add additional attachment information. Repeat as needed.

To view or edit an Attachment in the table, click the radio button to the left of the Attachment and then click on the View/Edit button. The information will appear in the data entry section above and may be edited. Then, Save to Table.

To remove an Attachment from the table, click on the radio button to the left of the Attachment and click on the Delete button.

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Response for: SSN: 000-98-9494 Claim Number: 65070 Name: WHEELLOCK, PHILIPPE M

Attachments

Do you have any attachments (up to 10 documents) which support your statement regarding the Reason for Separation?

Acceptable file formats are: csv, pdf, rtf, tiff, txt.

If Yes, go to Step 1 and enter each attachment separately (See HELP on the left side of this screen).

If No, go to the NEXT page.

Step 1: Add Attachments.

> Attachment File Name: ?

> Describe the document being attached (e.g. Warning Documents, Notice of Separation): ?

Note: Any data in the above fields will be lost unless the 'Save to Table' button is selected to add to or edit the Summary Table below. 'Save to Table' before moving from this screen to save data.

Step 2: Review/Edit Entries.

Response Attachments				
Select	Document Description	Document Type	Size (bytes)	Attachment
No Records Found.				

Go to Page

If you have attachments that support the reason for separation you have provided you may enter them here. The following file types can be attached to the Separation Request or Response:

Type	Description	Programs to Use to Access
RTF	A rich text format document	Most word processing applications
PDF	An Adobe PDF	Adobe PDF Reader or Adobe PDF

Type	Description	Programs to Use to Access
TXT	A text file	All word processing applications and all text editors (Notepad, vi, etc...)
TIFF	A tiff image file	Graphical tools and picture tools
CSV	A comma-separated values file	Most spreadsheet programs and database management systems

After attaching any supporting documents click [Next] to go to the **SUBMISSION** page. A sample is shown below.

The screenshot displays the SIDES E-Response interface. At the top, the header includes the SIDES E-Response logo, the South Carolina Department of Employment and Workforce logo, and contact information (FEIN: 999991000, SEIN: 123456789) along with a 'Sign out' button. The main content area shows the user's response details: 'Response for: SSN: 007-79-8253 Claim Number: 1 Name: RONQUILLO, OSMIN'. The status is 'Submission', and there is a 'View/Print' link. Navigation buttons include '< Back', 'Main Menu', and 'Submit to State'. A sidebar on the left contains instructions: 'Please view your Separation Information Response. If correct, click on the Submit button to send the Separation Information to the State Unemployment Insurance office. You will receive a confirmation number on successful submission. If you need to make a correction prior to submission, press the BACK button until you reach the appropriate screen to amend. Users Guide'. The footer contains copyright information: 'Copyright © 2008 - 2011, National Association of State Workforce Agencies. All Rights Reserved.' and the page number '19'.

The [Submit to State] button will be grayed out until the system has determined that the Separation Response is fully compliant with the data input validation and business rules.

If there are errors with the business or validation rules, you will see links on this screen displaying the screen and field name in question. See SUBMISSION screen with errors below.

Simply click on the link in order to be directed to the screen and error.



When the Separation Response has been successfully validated, you can submit it to the State UI agency.

You may print the Separation Response at any time by clicking the [View/Print](#) link. It will display in Adobe PDF format and can be printed from an Adobe Acrobat reader. You will be able to see all information you entered up to the time of printing as well as the information on the Separation Request.

As with other important steps in the editing of a Separation Response, a warning screen will appear to make sure you are fully prepared to submit to the State.

After you click [Submit] you will see a **CONFIRMATION** page, sample below, which provides your confirmation number. Keep this confirmation number in your files. The confirmation number will also appear at the top of the PDF under the [View/Print](#) link. We strongly recommend you print a copy of your submission for your records. You may also save an electronic copy of the PDF document; however the PDF document is deleted from the web site after 30 days.

The screenshot shows the SIDES E-Response website interface. At the top, there is a dark blue header with the SIDES E-Response logo on the left, the South Carolina Department of Employment and Workforce logo in the center, and the FEIN (999991000) and SEIN (123456789) on the right. A 'Sign out' button is also present. Below the header, a navigation bar contains the text: 'Response for: SSN: 000-98-9494 Claim Number: 65070 Name: WHEELLOCK, PHILIPPE M'. The main content area is titled 'Confirmation' and states: 'Your response has been accepted. Your confirmation number is: 8F2C 692A CCE6 3541 E7D6 9A79 247C 6097'. Below this, it says 'Please print this pdf and keep with your records.' There is a 'View/Print' button with a printer icon and a 'Main Menu' button. On the left side, there is a 'Users Guide' link. At the bottom of the page, there is a footer with the text: 'Copyright © 2008 - 2011, National Association of State Workforce Agencies. All Rights Reserved.' and '13-143 - Build 15320' on the left, and the page number '21' on the right.

6 Amending a Submitted Response

After you submit a response, it remains on the SIDES E-Response website for 30 days from the date of the request; during that period you can correct the response or add additional information. **However, any changes made to the response after the due date for submission to the requesting state agency may or may not be used in determining the individual's eligibility for unemployment benefits depending on state policy.**

To amend a response, log-in to E-Response using the appropriate PIN (either a permanent PIN issued by the state to which the response was submitted or a one-time PIN linked to the request for which the response was submitted.) Identify the case on the SEPARATION INFORMATION REQUESTS page and click [Create Amendment]. You will then see the same series of screens that were presented when you created your submitted response. Make whatever changes are needed on those screens. Before submitting the Amended Response, you will be asked to explain why you are amending your previous submission and what has changed. See sample AMENDED RESPONSE page below.

* indicates a Required Field

Enter all applicable information using the space provided.

Note: Selecting the BACK, NEXT or GO buttons will SAVE the data entered before moving away from this screen. Saved data can be changed later if necessary. If you do not want to save the data entered on this screen, press the CANCEL button before selecting BACK, NEXT or GO.

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Response for: SSN: 000-98-9494 Claim Number: 65070 Name: WHEELLOCK, PHILIPPE M

Amended Response

Amended Response Number

1

* Why is the response being amended and what changed?



< Back

Cancel

Save

Main Menu

Next >

Go to Page Amended Response

Go