

6/4/24, 12:35 PM

WorkForce WV Counter Website

[View Claim.](#)

A value was found in the dump that is not in the summary. [CLICK HERE](#) to view.

SSN

[REDACTED] 1913

Claim Date

06/14/2020 07:04 PM

Name

WRIGHT, SHAMIESE

Confirmation Code

N191325

Mailing Address

907 [REDACTED] CHARLESTON WV 25301

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Phone Number

[REDACTED] 0754

Email Verified

Yes

Client Identifier

75.108.144.30

DOB

04 [REDACTED] /1993

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

RiskLevel**TransactionStatus****Initial Questions -**

Select the state or territory you live in.

WV

Did you work in West Virginia during the last 18 months?

Yes

Have you worked in more than one state during 12/04/2022 - 06/04/2024?

No

Identification Information -

Social Security Number (SSN)

[REDACTED] 1913



6/4/24, 12:35 PM

WorkForce WV Counter Website

Personal Identification Number (PIN)

2916

What was the make and model of your first car?

AUDI QUATTRO

What was your high school mascot?

NOTHING

Personal Information -

First Name

SHAMIESE

Last Name

WRIGHT

Mailing Address

907 [REDACTED]

City

CHARLESTON

Select the state or territory where you receive mail

West Virginia

Select county where you reside

Kanawha County

ZIP Code

25301

Is your street address the same as your mailing address?

Yes

Telephone Number

[REDACTED] **0754**

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Confirm Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Select the highest grade you completed in school.

Twelfth Grade or Equivalent

Are you a citizen of the United States?

Yes

Do you elect to have state income tax in the amount of 3% and federal income tax in the amount of 10% deducted from your gross weekly benefit amount?

No

Are you required to make child support payments?

No

-  Click to edit this section (../Consumer/InitialClaims/Forms/Form_DC1.aspx)

6/4/24, 12:35 PM

WorkForce WV Counter Website

Eligibility Information -

Have you claimed, received, or applied for unemployment compensation in the past twelve (12) months?

No

In the past eighteen (18) months, have you worked as a civilian for the federal government?

No

In the past eighteen (18) months, have you worked for any college, university, or school?

No

In the past eighteen (18) months, have you served on active duty in the U.S. military?

No

In the past eighteen (18) months, did you receive or apply for Workers' Compensation?

No

In the past eighteen (18) months, have you worked for an employer in a state other than West Virginia during 12/04/2022 - 06/04/2024?

No

In the past eighteen (18) months, have you worked for the railroad?

No

Could you start to work today if offered a job?

Yes

Eligibility Continued -

Are you attending school and/or training at this time?

No

Are you planning to attend any schooling and/or training program of any type?

No

Did you/will you receive a lump sum pension and/or monthly retirement benefits?

No

Are you receiving any type of Social Security?

No

Have you applied for any type of Social Security?

No

6/4/24, 12:35 PM

WorkForce WV Counter Website

Do any conditions currently exist which cause you to not be able or available for full-time work?

Yes

Please describe the conditions (Child care, transportation, no weekends/shift work, etc.) and provide the number of days a week affected by the condition.

NO CHILDCARE. NO TRANSPORTATION.

List Positions in which you have job experience or training and are seeking work

CAREGIVER/ CNA

What is the lowest Rate of Pay you will accept? (do not enter \$ sign)

13.00

Select per hour, day, week, or month

Hour

Do you obtain work through a union hiring hall?

No

Have you refused any work since your last job?

No

Are you engaged in self employment?

No

Are you working on a commission basis?

No

Are you the sole owner of a business?

No

Are you a partner in a partnership?

No

Are you a member of a Limited Liability Company (LLC)?

No

Are you an officer of a corporation?

No

Are you or will you receive "Wages in Lieu of Notice"?

No

Employment Information 1 -

Name of Employer

LOVED ONES IN HOME CARE, LLC

Does your employer do business under any other name?

No

Is this employer part of a Federal agency or Military branch?

No

Street Address

144 7TH AVE

City

SOUTH CHARLESTON

State

West Virginia

6/4/24, 12:35 PM

WorkForce WV Counter Website

ZIP Code

25303

Is the Payroll Address (mailing address) the same as the Working Address (Job site address)?

Yes

Phone Number

0481

When did you start working for this employer?

09/25/2019

What was the last date that you worked for this employer?

05/06/2020

Is this the same date you were separated?

No

What date were you separated?

06/08/2020

What is the reason you are not working there now?

Voluntary Quit

Why did you quit?

Personal Reasons

Personal Reason:

Family Reasons

What was the reason you provided to the employer when leaving the job?

DUE TO THE COVID-19 I HAVE NO AVAILABLE CHILDCARE FOR MY CHILDREN AND I ALSO DO NOT HAVE ANY TRANSPORTATION.

Do the circumstances causing you to quit the job remain?

Yes

Are you able and available for full-time work?

No

Provide an explanation as to why you are not able and/or available for full-time work?

DUE TO THE COVID-19 I HAVE NO AVAILABLE CHILDCARE FOR MY CHILDREN AND I ALSO DO NOT HAVE ANY TRANSPORTATION.

What was your job title/function?

CAREGIVER

Rate of Pay (do not enter \$ sign)

9.75

Your rate of pay is based on an (Hourly Rate, Weekly Rate, Monthly Salary)

Hour

Do you have a Recall Date?

No

Are you filing for unemployment due to the storms and flooding on April 2 - April 6, 2024?

No

Have you worked for any other employers during the last 18 months, either part-time or full-time?

Yes

Employment Information 2 -

6/4/24, 12:35 PM

WorkForce WV Counter Website

Name of Employer

GENESIS HEALTHCARE

Street Address

501 CALDWELL LN

City

DUNBAR

State

West Virginia

ZIP Code

25064

Is the Payroll Address (mailing address) the same as the Working Address (Job site address)?

Yes

Phone Number

0754

When did you start working for this employer?

04/22/2020

What was the last date that you worked for this employer?

06/13/2020

What is the reason you are not working there now?

Discharged or Fired

Comments on separation (210 chars. max.)

A RESIDENT WAS THREATENING TO DO BODILY HARM TO ME WHICH MADE ME VERY UPSET. MYSELF AND THIS PARTICULAR RESIDENT ENGAGED IN A ARGUMENT. I WAS FIRED FROM THIS COMPANY AS FOR VERBAL ABUSE OF A RESIDENT.

What was your job title/function?

UNITE AIDE

Rate of Pay (do not enter \$ sign)

11.75

Your rate of pay is based on an (Hourly Rate, Weekly Rate, Monthly Salary)

Hour

Do you have a Recall Date?

No

Have you worked for any other employers during the last 18 months, either part-time or full-time?

No**Job Seeker Information -**

Question ID	Question	Answer
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6/4/24, 12:35 PM

WorkForce WV Counter Website

5	IQ1 - In the past eighteen (18) months, have you worked as a civilian for the federal government?	No
9	IQ1 - Have you claimed, received, or applied for unemployment compensation in the past twelve (12) months?	No
33	IQ1 - In the past eighteen (18) months, have you served on active duty in the U.S. military?	No
37	IQ1 - Did you work in West Virginia during the last 18 months?	Yes
86	IQ1 - Are you a citizen of the United States?	Yes
1001	IQ1 - Have you worked in more than one state during [PERIOD_START_DATE] - [PERIOD_END_DATE]?	No
1006	IQ1 - Select the state or territory you live in.	West Virginia
1166	IQ1 - Select county where you reside	Kanawha County
1176	IQ1 - In the past eighteen (18) months, have you worked for the railroad?	No
21	ID1 - Social Security Number (SSN)	1913
35	ID1 - First Name	SHAMIESE
49	ID1 - Middle Initial	
62	ID1 - Last Name	WRIGHT
1003	ID1 - Personal Identification Number (PIN)	2916
1008	ID1 - Previous Last Name	
10	PI1 - Mailing Address	907
24	PI1 - Mailing Address Line 2	
38	PI1 - City	CHARLESTON
51	PI1 - Select the state or territory where you receive mail	West Virginia
63	PI1 - ZIP Code	25301
73	PI1 - Is your street address the same as your mailing address?	Yes
80	PI1 - Telephone Number	0754
94	PI1 - Alternate Telephone Number	
100	PI1 - Email Address	SHAMIESEWRIGHT93@GMAIL.COM
111	PI1 - Select the highest grade you completed in school.	Twelfth Grade or Equivalent
185	PI1 - Zip Extension	
1005	PI1 - Confirm Email Address	SHAMIESEWRIGHT93@GMAIL.COM
5807	PI1 - What was the make and model of your first car?	AUDI QUATTRO
5808	PI1 - What was your high school mascot?	NOTHING
5809	PI1 - Would you like to receive email updates regarding your claim?	Yes
44	EL1 - Are you required to make child support payments?	No
108	EL1 - Do you obtain work through a union hiring hall?	No
113	EL1 - In the past eighteen (18) months, have you worked for any college, university, or school?	No

6/4/24, 12:35 PM

WorkForce WV Counter Website

1020	EL1 - In the past eighteen (18) months, have you worked for an employer in a state other than West Virginia during [PERIOD_START_DATE] - [PERIOD_END_DATE]?	No
97	EL2 - In the past eighteen (18) months, did you receive or apply for Workers' Compensation?	No
102	EL2 - Are you attending school and/or training at this time?	No
121	EL2 - Did you/will you receive a lump sum pension and/or monthly retirement benefits?	No
124	EL2 - Do you elect to have state income tax in the amount of 3% and federal income tax in the amount of 10% deducted from your gross weekly benefit amount?	No
1033	EL2 - Are you planning to attend any schooling and/or training program of any type?	No
1041	EL2 - When can you take your classes?	
1044	EL2 - Have you ever worked fulltime while attending school?	
1045	EL2 - Please explain when you worked fulltime and where.	
1046	EL2 - Are you willing to drop or rearrange your schooling for fulltime employment?	
1049	EL2 - Are you receiving any type of Social Security?	No
1051	EL2 - Have you applied for any type of Social Security?	No
1054	EL2 - Do any conditions currently exist which cause you to not be able or available for full-time work?	Yes
1056	EL2 - Have you refused any work since your last job?	No
1057	EL2 - Are you engaged in self employment?	No
1058	EL2 - Are you working on a commission basis?	No
1060	EL2 - Are you the sole owner of a business?	No
1061	EL2 - Are you a partner in a partnership?	No
1062	EL2 - Are you a member of a Limited Liability Company (LLC)?	No
1063	EL2 - Are you an officer of a corporation?	No
1065	EL2 - Are you or will you receive "Wages in Lieu of Notice"?	No
1183	EL2 - Please describe the conditions (Child care, transportation, no weekends/shift work, etc.) and provide the number of days a week affected by the condition.	NO CHILDCARE. NO TRANSPORTATION.
1184	EL2 - List Positions in which you have job experience or training and are seeking work	CAREGIVER/ CNA
1185	EL2 - What is the lowest Rate of Pay you will accept? (do not enter \$ sign)	13.00
1186	EL2 - Select per hour, day, week, or month	Hour
5400	EL2 - Why did you quit?	Personal Reasons
5401	EL2 - Personal Reason:	Family Reasons

6/4/24, 12:35 PM

WorkForce WV Counter Website

5477	EL2 - What was the reason you provided to the employer when leaving the job?	DUE TO THE COVID-19 I HAVE NO AVAILABLE CHILDCARE FOR MY CHILDREN AND I ALSO DO NOT HAVE ANY TRANSPORTATION.
5478	EL2 - Do the circumstances causing you to quit the job remain?	1
5480	EL2 - Are you able and available for full-time work?	0
5481	EL2 - Provide an explanation as to why you are not able and/or available for full-time work?	DUE TO THE COVID-19 I HAVE NO AVAILABLE CHILDCARE FOR MY CHILDREN AND I ALSO DO NOT HAVE ANY TRANSPORTATION.
5795	EL2 - Could you start to work today if offered a job?	Yes
6	EMP1 - Street Address	
20	EMP1 - Street Address Line 2	
34	EMP1 - City	
48	EMP1 - State	
61	EMP1 - ZIP Code	
71	EMP1 - Phone Number	0481
78	EMP1 - Street Address	144 7TH AVE
85	EMP1 - Street Address Line 2	
92	EMP1 - City	SOUTH CHARLESTON
98	EMP1 - State	West Virginia
104	EMP1 - ZIP Code	25303
110	EMP1 - When did you start working for this employer?	09/25/2019
115	EMP1 - What was the last date that you worked for this employer?	05/06/2020
119	EMP1 - What is the reason you are not working there now?	Voluntary Quit
122	EMP1 - What was your job title/function?	CAREGIVER
128	EMP1 - Have you worked for any other employers during the last 18 months, either part-time or full-time?	Yes
130	EMP1 - Name of Employer	LOVED ONES IN HOME CARE, LLC
186	EMP1 - Zip Extension	
438	EMP1 - Do you have a Recall Date?	No
475	EMP1 - Does your employer do business under any other name?	No
478	EMP1 - Job Category	
1095	EMP1 - Under what other name does your employer do business ?	
1105	EMP1 - Job Category	
1114	EMP1 - Rate of Pay (do not enter \$ sign)	9.75
1115	EMP1 - Rate of Pay (do not enter \$ sign)	11.75
1124	EMP1 - Your rate of pay is based on an (Hourly Rate, Weekly Rate, Monthly Salary)	Hour

6/4/24, 12:35 PM

WorkForce WV Counter Website

1125	EMP1 - Your rate of pay is based on an (Hourly Rate, Weekly Rate, Monthly Salary)	Hour
1134	EMP1 - Are you filing for unemployment due to the storms and flooding on April 2 - April 6, 2024?	No
1188	EMP1 - Is this employer part of a Federal agency or Military branch?	No
1189	EMP1 - Is this the same date you were separated?	No
1190	EMP1 - What date were you separated?	06/08/2020
1192	EMP1 - Is there anything else you need to tell us regarding your claim filing? (For instance, did you attempt a claim with another state prior to filing today, were you filing Low Earnings and the Employer stopped issuing the forms, etc.)	No
5810	EMP1 - Is your separation from employment a result of or in connection with the Coronavirus Disease 2019 (Covid-19)?	Yes
5812	EMP1 - My employer temporarily shut down due to Covid-19.	
5813	EMP1 - I have been quarantined by a medical professional due to Covid-19	
5814	EMP1 - I have been providing care for a family member quarantined by a medical professional or quarantined by government direction due to Covid-19.	
5815	EMP1 - I am self-quarantined. No medical professional advised me to quarantine.	
5817	EMP1 - Other	Yes
5818	EMP1 - Please explain	DUE TO THE COVID-19 I HAVE NO AVAILABLE CHILDCARE FOR MY CHILDREN.
5819	EMP1 - I plan to return to work with my employer once my employer reopens and/or I'm deemed medically safe to do so	Yes
5821	EMP1 - I have applied or I plan to apply for FMLA?	No
190	EMP2 - Name of Employer	GENESIS HEALTHCARE
193	EMP2 - Street Address	
194	EMP2 - Street Address Line 2	
195	EMP2 - City	
196	EMP2 - State	
197	EMP2 - ZIP Code	
198	EMP2 - Zip Extension	
199	EMP2 - Phone Number	0754
200	EMP2 - Street Address	501 CALDWELL LN
201	EMP2 - Street Address Line 2	
202	EMP2 - City	DUNBAR
203	EMP2 - State	West Virginia
204	EMP2 - ZIP Code	25064

6/4/24, 12:35 PM

WorkForce WV Counter Website

205	EMP2 - Zip Extension	
206	EMP2 - When did you start working for this employer?	04/22/2020
207	EMP2 - What was the last date that you worked for this employer?	06/13/2020
208	EMP2 - What is the reason you are not working there now?	Discharged or Fired
209	EMP2 - Comments on separation (210 chars. max.)	A RESIDENT WAS THREATENING TO DO BODILY HARM TO ME WHICH MADE ME VERY UPSET. MYSELF AND THIS PARTICULAR RESIDENT ENGAGED IN A ARGUMENT. I WAS FIRED FROM THIS COMPANY AS FOR VERBAL ABUSE OF A RESIDENT.
210	EMP2 - What was your job title/function?	UNITE AIDE
211	EMP2 - Have you worked for any other employers during the last 18 months, either part-time or full-time?	No
439	EMP2 - Do you have a Recall Date?	No
1067	EMP9 - Is the Payroll Address (mailing address) the same as the Working Address (Job site address)?	Yes
1068	EMP9 - Is the Payroll Address (mailing address) the same as the Working Address (Job site address)?	Yes

6/4/24, 12:36 PM

WorkForce WV Counter Website

View Claim.

A value was found in the dump that is not in the summary. [CLICK HERE to view.](#)

SSN

██████████1913

Claim Date

12/13/2020 07:01 PM

Name

WRIGHT, SHAMIESE

Confirmation Code

N191351

Mailing Address

907 ██████████ CHARLESTON WV 25301

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Phone Number

██████████1146

Email Verified

Yes

Client Identifier

50.110.150.7

DOB

04/██████/1993

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

RiskLevel

TransactionStatus

Initial Questions -

Select the state or territory you live in.

WV

Did you work in West Virginia during the last 18 months?

Yes

Have you worked in more than one state during 12/04/2022 - 06/04/2024?

No

Identification Information -

Social Security Number (SSN)

██████████1913

6/4/24, 12:36 PM

WorkForce WV Counter Website

Personal Identification Number (PIN)

2916

What was the make and model of your first car?

AUDI

What was your high school mascot?

NONE

Personal Information -

First Name

SHAMIESE

Last Name

WRIGHT

Previous Last Name

WRIGHT

Mailing Address

907

City

CHARLESTON

Select the state or territory where you receive mail

West Virginia

Select county where you reside

Kanawha County

ZIP Code

25301

Is your street address the same as your mailing address?

Yes

Telephone Number

1146

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Confirm Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Select the highest grade you completed in school.

Twelfth Grade or Equivalent

Are you a citizen of the United States?

Yes

Do you elect to have state income tax in the amount of 3% and federal income tax in the amount of 10% deducted from your gross weekly benefit amount?

No

Are you required to make child support payments?

No

-  Click to edit this section ([../Consumer/InitialClaims/Forms/Form_DC1.aspx](https://ucadmin.workforcewv.org/Admin/InitialClaims/Forms/Form_DC1.aspx))

6/4/24, 12:36 PM

WorkForce WV Counter Website

Eligibility Information -

Have you claimed, received, or applied for unemployment compensation in the past twelve (12) months?

Yes

Provide the effective date of the application, if known. Otherwise, please leave blank.

06/20/2020

Enter the state that would have issued or did issue the payments.

West Virginia

In the past eighteen (18) months, have you worked as a civilian for the federal government?

No

In the past eighteen (18) months, have you worked for any college, university, or school?

No

In the past eighteen (18) months, have you served on active duty in the U.S. military?

No

In the past eighteen (18) months, did you receive or apply for Workers' Compensation?

No

In the past eighteen (18) months, have you worked for an employer in a state other than West Virginia during 12/04/2022 - 06/04/2024?

No

In the past eighteen (18) months, have you worked for the railroad?

No

Could you start to work today if offered a job?

Yes

Eligibility Continued -

Are you attending school and/or training at this time?

No

Are you planning to attend any schooling and/or training program of any type?

No

6/4/24, 12:36 PM

WorkForce WV Counter Website

Did you/will you receive a lump sum pension and/or monthly retirement benefits?

No

Are you receiving any type of Social Security?

No

Have you applied for any type of Social Security?

No

Do any conditions currently exist which cause you to not be able or available for full-time work?

Yes

Please describe the conditions (Child care, transportation, no weekends/shift work, etc.) and provide the number of days a week affected by the condition.

COVID 19

List Positions in which you have job experience or training and are seeking work

CAREGIVER

What is the lowest Rate of Pay you will accept? (do not enter \$ sign)

10.00

Select per hour, day, week, or month

Hour

Do you obtain work through a union hiring hall?

No

Have you refused any work since your last job?

No

Are you engaged in self employment?

No

Are you working on a commission basis?

No

Are you the sole owner of a business?

No

Are you a partner in a partnership?

No

Are you a member of a Limited Liability Company (LLC)?

No

Are you an officer of a corporation?

No

Are you or will you receive "Wages in Lieu of Notice"?

No

Employment Information 1 -

Name of Employer

LOVED ONES IN HOME CARE, LLC

Does your employer do business under any other name?

No

Is this employer part of a Federal agency or Military branch?

No

6/4/24, 12:36 PM

WorkForce WV Counter Website

Street Address

144 7TH AVE

City

SOUTH CHARLESTON

State

West Virginia

ZIP Code

25303

Is the Payroll Address (mailing address) the same as the Working Address (Job site address)?

Yes

Phone Number

[REDACTED] 0481

When did you start working for this employer?

09/23/2019

What was the last date that you worked for this employer?

05/05/2020

Is this the same date you were separated?

Yes

Explain why you delayed filing your claim.

MY CLAIM DISAPPEARED AND I COULD NOT FILE ONLINE.

What is the reason you are not working there now?

Voluntary Quit

Why did you quit?

Personal Reasons

Personal Reason:

Other (Use only if you left for a reason unrelated to the employer that is not listed)

Explain in detail the last incident that led you to leave the job.

DUE TO COVID-19 I HAD NO CHILDCARE AND COULD NOT WORK.

Explain any steps (Dates/who you spoke with) that you took to remedy the situation prior to leaving the job.

CONTACTED HR.

Explain in detail how the conditions changed.

THE COVID-19 PANDEMIC IS STILL HAPPENING.

Are you able and available for full-time work?

Yes

What was your job title/function?

CAREGIVER

Rate of Pay (do not enter \$ sign)

10.75

Your rate of pay is based on an (Hourly Rate, Weekly Rate, Monthly Salary)

Hour

Do you have a Recall Date?

No

Are you filing for unemployment due to the storms and flooding on April 2 - April 6, 2024?

6/4/24, 12:36 PM

WorkForce WV Counter Website

No

Have you worked for any other employers during the last 18 months, either part-time or full-time?

No

Job Seeker Information -

Are you a military veteran?

No

Did you serve in the U.S. military, other than active duty for training in the National Guard or Reserves, and receive a discharge other than dishonorable?

No

Did you serve more than 180 days of active duty in the military (Do not include National Guard or Reserve training time)?

No

Are you or were you a National Guard or Reserve member called to active duty under Title 10?

No

Are you a veteran who has served at least 1 day of active duty in the U.S military and who lacks a fixed, regular and adequate residence?

No

Are you a U.S military service member on active duty including separation leave and within 24 months of retirement or 12 months of separation?

No

Did you receive a campaign badge?

No

Were you discharged or released from active duty because of a service-connected disability?

No

Have you been awarded a service-connected disability by the Department of Veterans Affairs since your release from active duty?

No

Are you the spouse of any person who died of a service-connected disability?

No

Are you the spouse of any member of the armed forces serving on active duty who meets one or more of the following: Missing in action; Captured in the line of duty by hostile forces; Forcibly detained/interned in the line of duty by a foreign government or power; Any person who has a total disability (permanent) resulting from a service-connected disability or of a veteran who died while a disability so evaluated existed and has been so for a total of 90 days?

No

Did you attend high school?

Yes

Name of high school

STANLEY G. FALK

City of School

BUFFALO

State

New York

Do you have a high school Diploma?

No

6/4/24, 12:36 PM

WorkForce WV Counter Website

Do you have a GED?

Yes

Did you attend College?

No

Do you have a Vocational degree?

No

Do you have any certifications?

No

Do you have a valid Driver's license?

No

Do you have a valid CDL license?

No

Do you have any other license you need to tell us about?

No

What are occupation(s) in which you are seeking work? Note: Please do not enter "Any" or "All".

HEALTHCARE

Tell us how much experience, if any, you have in this occupation.

More than 2 years

What is the minimum hourly salary you will accept for this job? (do not enter \$ sign)

11.75

What are occupation(s) in which you are seeking work? Note: Please do not enter "Any" or "All".

HEALTHCARE

Tell us how much experience, if any, you have in this occupation.

More than 2 years

What is the minimum hourly salary you will accept for this job? (do not enter \$ sign)

11.75

How many miles are you willing to travel one-way for work?

15

Are you a migrant or seasonal farm worker?

No

Are you an individual with a disability?

Yes

Is the impairment primarily physical, including mobility and sensory impairments?

No

Is the impairment primarily mental, including cognitive and learning impairments?

Yes

Does the impairment include both physical and mental impairments?

No

Are you an individual who either has been subject to any stage of the criminal justice process for committing a status offense of delinquent act, or requires assistance in overcoming barriers to employment resulting from a record or arrest or conviction for committing delinquent acts, such as crime against persons, crimes against property, status offenses, or other crimes?

No

Have you ever been convicted of a felony?

6/4/24, 12:36 PM

WorkForce WV Counter Website

No

Attachments

D2A00E55-7298-497E-8EAC-E5B31528E610.jpeg

Download

Question ID	Question	Answer
5	IQ1 - In the past eighteen (18) months, have you worked as a civilian for the federal government?	No
9	IQ1 - Have you claimed, received, or applied for unemployment compensation in the past twelve (12) months?	Yes
23	IQ1 - Enter the state that would have issued or did issue the payments.	West Virginia
33	IQ1 - In the past eighteen (18) months, have you served on active duty in the U.S. military?	No
37	IQ1 - Did you work in West Virginia during the last 18 months?	Yes
86	IQ1 - Are you a citizen of the United States?	Yes
1001	IQ1 - Have you worked in more than one state during [PERIOD_START_DATE] - [PERIOD_END_DATE]?	No
1006	IQ1 - Select the state or territory you live in.	West Virginia
1166	IQ1 - Select county where you reside	Kanawha County
1176	IQ1 - In the past eighteen (18) months, have you worked for the railroad?	No
21	ID1 - Social Security Number (SSN)	1913
35	ID1 - First Name	SHAMIESE
49	ID1 - Middle Initial	
62	ID1 - Last Name	WRIGHT
1003	ID1 - Personal Identification Number (PIN)	2916
1008	ID1 - Previous Last Name	WRIGHT
10	PI1 - Mailing Address	907
24	PI1 - Mailing Address Line 2	
38	PI1 - City	CHARLESTON
51	PI1 - Select the state or territory where you receive mail	West Virginia
63	PI1 - ZIP Code	25301
73	PI1 - Is your street address the same as your mailing address?	Yes
80	PI1 - Telephone Number	1146

6/4/24, 12:36 PM

WorkForce WV Counter Website

94	PI1 - Alternate Telephone Number	
100	PI1 - Email Address	SHAMIESEWRIGHT93@GMAIL.COM
111	PI1 - Select the highest grade you completed in school.	Twelfth Grade or Equivalent
185	PI1 - Zip Extension	
1005	PI1 - Confirm Email Address	SHAMIESEWRIGHT93@GMAIL.COM
5807	PI1 - What was the make and model of your first car?	AUDI
5808	PI1 - What was your high school mascot?	NONE
5809	PI1 - Would you like to receive email updates regarding your claim?	Yes
44	EL1 - Are you required to make child support payments?	No
108	EL1 - Do you obtain work through a union hiring hall?	No
113	EL1 - In the past eighteen (18) months, have you worked for any college, university, or school?	No
1012	EL1 - Provide the effective date of the application, if known. Otherwise, please leave blank.	06/20/2020
1020	EL1 - In the past eighteen (18) months, have you worked for an employer in a state other than West Virginia during [PERIOD_START_DATE] - [PERIOD_END_DATE]?	No
97	EL2 - In the past eighteen (18) months, did you receive or apply for Workers' Compensation?	No
102	EL2 - Are you attending school and/or training at this time?	No
121	EL2 - Did you/will you receive a lump sum pension and/or monthly retirement benefits?	No
124	EL2 - Do you elect to have state income tax in the amount of 3% and federal income tax in the amount of 10% deducted from your gross weekly benefit amount?	No
1033	EL2 - Are you planning to attend any schooling and/or training program of any type?	No
1041	EL2 - When can you take your classes?	
1044	EL2 - Have you ever worked fulltime while attending school?	
1045	EL2 - Please explain when you worked fulltime and where.	
1046	EL2 - Are you willing to drop or rearrange your schooling for fulltime employment?	
1049	EL2 - Are you receiving any type of Social Security?	No
1051	EL2 - Have you applied for any type of Social Security?	No
1054	EL2 - Do any conditions currently exist which cause you to not be able or available for full-time work?	Yes
1056	EL2 - Have you refused any work since your last job?	No
1057	EL2 - Are you engaged in self employment?	No
1058	EL2 - Are you working on a commission basis?	No
1060	EL2 - Are you the sole owner of a business?	No

6/4/24, 12:36 PM

WorkForce WV Counter Website

1061	EL2 - Are you a partner in a partnership?	No
1062	EL2 - Are you a member of a Limited Liability Company (LLC)?	No
1063	EL2 - Are you an officer of a corporation?	No
1065	EL2 - Are you or will you receive "Wages in Lieu of Notice"?	No
1183	EL2 - Please describe the conditions (Child care, transportation, no weekends/shift work, etc.) and provide the number of days a week affected by the condition.	COVID 19
1184	EL2 - List Positions in which you have job experience or training and are seeking work	CAREGIVER
1185	EL2 - What is the lowest Rate of Pay you will accept? (do not enter \$ sign)	10.00
1186	EL2 - Select per hour, day, week, or month	Hour
5400	EL2 - Why did you quit?	Personal Reasons
5401	EL2 - Personal Reason:	Other (Use only if you left for a reason unrelated to the employer that is not listed)
5490	EL2 - Explain in detail the last incident that led you to leave the job.	DUE TO COVID-19 I HAD NO CHILDCARE AND COULD NOT WORK.
5491	EL2 - Explain any steps (Dates/who you spoke with) that you took to remedy the situation prior to leaving the job.	CONTACTED HR.
5492	EL2 - Explain in detail how the conditions changed.	THE COVID-19 PANDEMIC IS STILL HAPPENING.
5493	EL2 - Are you able and available for full-time work?	1
5795	EL2 - Could you start to work today if offered a job?	Yes
6	EMP1 - Street Address	
20	EMP1 - Street Address Line 2	
34	EMP1 - City	
48	EMP1 - State	
61	EMP1 - ZIP Code	
71	EMP1 - Phone Number	0481
78	EMP1 - Street Address	144 7TH AVE
85	EMP1 - Street Address Line 2	
92	EMP1 - City	SOUTH CHARLESTON
98	EMP1 - State	West Virginia
104	EMP1 - ZIP Code	25303
110	EMP1 - When did you start working for this employer?	09/23/2019
115	EMP1 - What was the last date that you worked for this employer?	05/05/2020
119	EMP1 - What is the reason you are not working there now?	Voluntary Quit
122	EMP1 - What was your job title/function?	CAREGIVER
128	EMP1 - Have you worked for any other employers during the last 18 months, either part-time or full-time?	No

6/4/24, 12:36 PM

WorkForce WV Counter Website

130	EMP1 - Name of Employer	LOVED ONES IN HOME CARE, LLC
186	EMP1 - Zip Extension	
438	EMP1 - Do you have a Recall Date?	No
475	EMP1 - Does your employer do business under any other name?	No
478	EMP1 - Job Category	
1114	EMP1 - Rate of Pay (do not enter \$ sign)	10.75
1124	EMP1 - Your rate of pay is based on an (Hourly Rate, Weekly Rate, Monthly Salary)	Hour
1134	EMP1 - Are you filing for unemployment due to the storms and flooding on April 2 - April 6, 2024?	No
1188	EMP1 - Is this employer part of a Federal agency or Military branch?	No
1189	EMP1 - Is this the same date you were separated?	Yes
1191	EMP1 - Explain why you delayed filing your claim.	MY CLAIM DISAPPEARED AND I COULD NOT FILE ONLINE.
1192	EMP1 - Is there anything else you need to tell us regarding your claim filing? (For instance, did you attempt a claim with another state prior to filing today, were you filing Low Earnings and the Employer stopped issuing the forms, etc.)	No
5810	EMP1 - Is your separation from employment a result of or in connection with the Coronavirus Disease 2019 (Covid-19)?	Yes
5812	EMP1 - My employer temporarily shut down due to Covid-19.	
5813	EMP1 - I have been quarantined by a medical professional due to Covid-19	
5814	EMP1 - I have been providing care for a family member quarantined by a medical professional or quarantined by government direction due to Covid-19.	
5815	EMP1 - I am self-quarantined. No medical professional advised me to quarantine.	
5817	EMP1 - Other	Yes
5818	EMP1 - Please explain	MY CHILDREN'S DAYCARE WAS SHUT DOWN DUE TO COVID 19 AND I COULDN'T WORK.
5819	EMP1 - I plan to return to work with my employer once my employer reopens and/or I'm deemed medically safe to do so	Yes
5821	EMP1 - I have applied or I plan to apply for FMLA?	No
1067	EMP9 - Is the Payroll Address (mailing address) the same as the Working Address (Job site address)?	Yes

6/4/24, 12:37 PM

WorkForce WV Counter Website

View Claim.

A value was found in the dump that is not in the summary. [CLICK HERE to view.](#)

SSN

██████████1913

Claim Date

06/13/2021 01:34 PM

Name

WRIGHT, SHAMIESE

Confirmation Code

N191325

Mailing Address

907 ██████████ CHARLESTON WV 25301

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Phone Number

██████████0523

Email Verified

Yes

Client Identifier

172.58.238.178

DOB

04/██████/1993

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

RiskLevel

TransactionStatus

Initial Questions -

Select the state or territory you live in.

WV

Did you work in West Virginia during the last 18 months?

Yes

Have you worked in more than one state during 12/04/2022 - 06/04/2024?

No

Identification Information -

Social Security Number (SSN)

██████████1913

6/4/24, 12:37 PM

WorkForce WV Counter Website

Personal Identification Number (PIN)

0080

What was the make and model of your first car?

AUDI

What was your high school mascot?

NOTHING

Personal Information -

First Name

SHAMIESE

Middle Initial

L

Last Name

WRIGHT

Mailing Address

907 [REDACTED]

City

CHARLESTON

Select the state or territory where you receive mail

West Virginia

Select county where you reside

Kanawha County

ZIP Code

25301

Zip Extension

2530

Is your street address the same as your mailing address?

Yes

Telephone Number

[REDACTED] **0523**

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Confirm Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Select the highest grade you completed in school.

Twelfth Grade or Equivalent

Are you a citizen of the United States?

Yes

Do you elect to have state income tax in the amount of 3% and federal income tax in the amount of 10% deducted from your gross weekly benefit amount?

No

Are you required to make child support payments?

No

6/4/24, 12:37 PM

WorkForce WV Counter Website

-  Click to edit this section ([../Consumer/InitialClaims/Forms/Form_DC1.aspx](#))

Eligibility Information -

Have you claimed, received, or applied for unemployment compensation in the past twelve (12) months?

No

In the past eighteen (18) months, have you worked as a civilian for the federal government?

No

In the past eighteen (18) months, have you worked for any college, university, or school?

No

In the past eighteen (18) months, have you served on active duty in the U.S. military?

No

In the past eighteen (18) months, did you receive or apply for Workers' Compensation?

No

In the past eighteen (18) months, have you worked for an employer in a state other than West Virginia during 12/04/2022 - 06/04/2024?

No

In the past eighteen (18) months, have you worked for the railroad?

No

Could you start to work today if offered a job?

Yes

Eligibility Continued -

Are you attending school and/or training at this time?

No

Are you planning to attend any schooling and/or training program of any type?

No

Did you/will you receive a lump sum pension and/or monthly retirement benefits?

No

6/4/24, 12:37 PM

WorkForce WV Counter Website

Are you receiving any type of Social Security?

No

Have you applied for any type of Social Security?

No

Do any conditions currently exist which cause you to not be able or available for full-time work?

No

Do you obtain work through a union hiring hall?

No

Have you refused any work since your last job?

No

Are you engaged in self employment?

No

Are you working on a commission basis?

No

Are you the sole owner of a business?

No

Are you a partner in a partnership?

No

Are you a member of a Limited Liability Company (LLC)?

No

Are you an officer of a corporation?

No

Are you or will you receive "Wages in Lieu of Notice"?

No

Employment Information 1 -

Name of Employer

HIGHLAND HOSPITAL

Does your employer do business under any other name?

No

Is this employer part of a Federal agency or Military branch?

No

Street Address

300 56TH ST SE

City

CHARLESTON

State

West Virginia

ZIP Code

25304

Is the Payroll Address (mailing address) the same as the Working Address (Job site address)?

Yes

Phone Number

6/4/24, 12:37 PM

WorkForce WV Counter Website

0523

When did you start working for this employer?

04/14/2021

What was the last date that you worked for this employer?

05/17/2021

Is this the same date you were separated?

Yes

Explain why you delayed filing your claim.

BECAUSE I WAS LOOKING FOR EMPLOYMENT

What is the reason you are not working there now?

Lack of Work or Laid Off

What was your job title/function?

BHT

Rate of Pay (do not enter \$ sign)

11.51

Your rate of pay is based on an (Hourly Rate, Weekly Rate, Monthly Salary)

Hour

Do you have a Recall Date?

No

Are you filing for unemployment due to the storms and flooding on April 2 - April 6, 2024?

No

Have you worked for any other employers during the last 18 months, either part-time or full-time?

Yes

Employment Information 2 -

Name of Employer

SPECIAL TOUCH NURSING SERVICE, INC.

Street Address

325 4TH AVE #1

City

SOUTH CHARLESTON

State

West Virginia

ZIP Code

25303

Is the Payroll Address (mailing address) the same as the Working Address (Job site address)?

Yes

Phone Number

5600

When did you start working for this employer?

09/14/2020

What was the last date that you worked for this employer?

04/12/2021

6/4/24, 12:37 PM

WorkForce WV Counter Website

What is the reason you are not working there now?

Still Employed

Comments on separation (210 chars. max.)

I AM TECHNICALLY STILL EMPLOYED AT THIS COMPANY THERE IS JUST NOT A CLIENT THAT I CAN CARE FOR RIGHT NOW THAT FITS MY SCHEDULE

What was your job title/function?

CAREGIVER

Rate of Pay (do not enter \$ sign)

10.50

Your rate of pay is based on an (Hourly Rate, Weekly Rate, Monthly Salary)

Hour

Do you have a Recall Date?

No

Have you worked for any other employers during the last 18 months, either part-time or full-time?

No**Job Seeker Information -****Attachments**

65F1A8BD-C853-4F7E-BAAB-9286999D68B0.jpeg

Download

B0507D32-7866-47BD-ADC2-2D977366ED91.jpeg

Download

371B3BAE-B388-45AC-A7C6-3458C94A9148.jpeg

Download

0E9D8352-3AA7-4459-BA45-951AE67FE0B5.jpeg

Download

Question ID	Question	Answer
5	IQ1 - In the past eighteen (18) months, have you worked as a civilian for the federal government?	No
9	IQ1 - Have you claimed, received, or applied for unemployment compensation in the past twelve (12) months?	No
33	IQ1 - In the past eighteen (18) months, have you served on active duty in the U.S. military?	No
37	IQ1 - Did you work in West Virginia during the last 18 months?	Yes
86	IQ1 - Are you a citizen of the United States?	Yes

6/4/24, 12:37 PM

WorkForce WV Counter Website

1001	IQ1 - Have you worked in more than one state during [PERIOD_START_DATE] - [PERIOD_END_DATE]?	No
1006	IQ1 - Select the state or territory you live in.	West Virginia
1166	IQ1 - Select county where you reside	Kanawha County
1176	IQ1 - In the past eighteen (18) months, have you worked for the railroad?	No
21	ID1 - Social Security Number (SSN)	1913
35	ID1 - First Name	SHAMIESE
49	ID1 - Middle Initial	L
62	ID1 - Last Name	WRIGHT
1003	ID1 - Personal Identification Number (PIN)	0080
1008	ID1 - Previous Last Name	
10	PI1 - Mailing Address	907
24	PI1 - Mailing Address Line 2	
38	PI1 - City	CHARLESTON
51	PI1 - Select the state or territory where you receive mail	West Virginia
63	PI1 - ZIP Code	25301
73	PI1 - Is your street address the same as your mailing address?	Yes
80	PI1 - Telephone Number	0523
94	PI1 - Alternate Telephone Number	
100	PI1 - Email Address	SHAMIESEWRIGHT93@GMAIL.COM
111	PI1 - Select the highest grade you completed in school.	Twelfth Grade or Equivalent
185	PI1 - Zip Extension	2530
1005	PI1 - Confirm Email Address	SHAMIESEWRIGHT93@GMAIL.COM
5807	PI1 - What was the make and model of your first car?	AUDI
5808	PI1 - What was your high school mascot?	NOTHING
5809	PI1 - Would you like to receive email updates regarding your claim?	Yes
44	EL1 - Are you required to make child support payments?	No
108	EL1 - Do you obtain work through a union hiring hall?	No
113	EL1 - In the past eighteen (18) months, have you worked for any college, university, or school?	No
1020	EL1 - In the past eighteen (18) months, have you worked for an employer in a state other than West Virginia during [PERIOD_START_DATE] - [PERIOD_END_DATE]?	No
97	EL2 - In the past eighteen (18) months, did you receive or apply for Workers' Compensation?	No
102	EL2 - Are you attending school and/or training at this time?	No
121	EL2 - Did you/will you receive a lump sum pension and/or monthly retirement benefits?	No

6/4/24, 12:37 PM

WorkForce WV Counter Website

124	EL2 - Do you elect to have state income tax in the amount of 3% and federal income tax in the amount of 10% deducted from your gross weekly benefit amount?	No
1033	EL2 - Are you planning to attend any schooling and/or training program of any type?	No
1041	EL2 - When can you take your classes?	
1044	EL2 - Have you ever worked fulltime while attending school?	
1045	EL2 - Please explain when you worked fulltime and where.	
1046	EL2 - Are you willing to drop or rearrange your schooling for fulltime employment?	
1049	EL2 - Are you receiving any type of Social Security?	No
1051	EL2 - Have you applied for any type of Social Security?	No
1054	EL2 - Do any conditions currently exist which cause you to not be able or available for full-time work?	No
1056	EL2 - Have you refused any work since your last job?	No
1057	EL2 - Are you engaged in self employment?	No
1058	EL2 - Are you working on a commission basis?	No
1060	EL2 - Are you the sole owner of a business?	No
1061	EL2 - Are you a partner in a partnership?	No
1062	EL2 - Are you a member of a Limited Liability Company (LLC)?	No
1063	EL2 - Are you an officer of a corporation?	No
1065	EL2 - Are you or will you receive "Wages in Lieu of Notice"?	No
5795	EL2 - Could you start to work today if offered a job?	Yes
6	EMP1 - Street Address	
20	EMP1 - Street Address Line 2	
34	EMP1 - City	
48	EMP1 - State	
61	EMP1 - ZIP Code	
71	EMP1 - Phone Number	0523
78	EMP1 - Street Address	300 56TH ST SE
85	EMP1 - Street Address Line 2	
92	EMP1 - City	CHARLESTON
98	EMP1 - State	West Virginia
104	EMP1 - ZIP Code	25304
110	EMP1 - When did you start working for this employer?	04/14/2021
115	EMP1 - What was the last date that you worked for this employer?	05/17/2021
119	EMP1 - What is the reason you are not working there now?	Lack of Work or Laid Off
122	EMP1 - What was your job title/function?	BHT
128	EMP1 - Have you worked for any other employers during the last 18 months, either part-time or full-time?	Yes

6/4/24, 12:37 PM

WorkForce WV Counter Website

130	EMP1 - Name of Employer	HIGHLAND HOSPITAL
186	EMP1 - Zip Extension	
438	EMP1 - Do you have a Recall Date?	No
475	EMP1 - Does your employer do business under any other name?	No
478	EMP1 - Job Category	
1095	EMP1 - Under what other name does your employer do business ?	
1105	EMP1 - Job Category	
1114	EMP1 - Rate of Pay (do not enter \$ sign)	11.51
1115	EMP1 - Rate of Pay (do not enter \$ sign)	10.50
1124	EMP1 - Your rate of pay is based on an (Hourly Rate, Weekly Rate, Monthly Salary)	Hour
1125	EMP1 - Your rate of pay is based on an (Hourly Rate, Weekly Rate, Monthly Salary)	Hour
1134	EMP1 - Are you filing for unemployment due to the storms and flooding on April 2 - April 6, 2024?	No
1188	EMP1 - Is this employer part of a Federal agency or Military branch?	No
1189	EMP1 - Is this the same date you were separated?	Yes
1191	EMP1 - Explain why you delayed filing your claim.	BECAUSE I WAS LOOKING FOR EMPLOYMENT
1192	EMP1 - Is there anything else you need to tell us regarding your claim filing? (For instance, did you attempt a claim with another state prior to filing today, were you filing Low Earnings and the Employer stopped issuing the forms, etc.)	No
5810	EMP1 - Is your separation from employment a result of or in connection with the Coronavirus Disease 2019 (Covid-19)?	No
190	EMP2 - Name of Employer	SPECIAL TOUCH NURSING SERVICE, INC.
193	EMP2 - Street Address	
194	EMP2 - Street Address Line 2	
195	EMP2 - City	
196	EMP2 - State	
197	EMP2 - ZIP Code	
198	EMP2 - Zip Extension	
199	EMP2 - Phone Number	5600
200	EMP2 - Street Address	325 4TH AVE #1
201	EMP2 - Street Address Line 2	
202	EMP2 - City	SOUTH CHARLESTON
203	EMP2 - State	West Virginia
204	EMP2 - ZIP Code	25303
205	EMP2 - Zip Extension	

6/4/24, 12:37 PM

WorkForce WV Counter Website

206	EMP2 - When did you start working for this employer?	09/14/2020
207	EMP2 - What was the last date that you worked for this employer?	04/12/2021
208	EMP2 - What is the reason you are not working there now?	Still Employed
209	EMP2 - Comments on separation (210 chars. max.)	I AM TECHNICALLY STILL EMPLOYED AT THIS COMPANY THERE IS JUST NOT A CLIENT THAT I CAN CARE FOR RIGHT NOW THAT FITS MY SCHEDULE
210	EMP2 - What was your job title/function?	CAREGIVER
211	EMP2 - Have you worked for any other employers during the last 18 months, either part-time or full-time?	No
439	EMP2 - Do you have a Recall Date?	No
1067	EMP9 - Is the Payroll Address (mailing address) the same as the Working Address (Job site address)?	Yes
1068	EMP9 - Is the Payroll Address (mailing address) the same as the Working Address (Job site address)?	Yes

6/4/24, 12:37 PM

WorkForce WV Counter Website

View Claim.

A value was found in the dump that is not in the summary. [CLICK HERE to view.](#)

SSN

██████████1913

Claim Date

08/07/2022 11:04 PM

Name

WRIGHT, SHAMIESE

Confirmation Code

N191333

Mailing Address

907 ██████████ CHARLESTON WV 25301

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Phone Number

██████████0523

Email Verified

No

Client Identifier

172.58.219.147

DOB

04/██████/1993

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

RiskLevel

TransactionStatus

Initial Questions -

Select the state or territory you live in.

WV

Did you work in West Virginia during the last 18 months?

Yes

Have you worked in more than one state during 12/04/2022 - 06/04/2024?

No

Identification Information -

Social Security Number (SSN)

██████████1913

6/4/24, 12:37 PM

WorkForce WV Counter Website

Personal Identification Number (PIN)

2916

What was the make and model of your first car?

AUDI

What was your high school mascot?

NOTHING

Personal Information -

First Name

SHAMIESE

Middle Initial

L

Last Name

WRIGHT

Previous Last Name

WRIGHT

Mailing Address

907 [REDACTED]

City

CHARLESTON

Select the state or territory where you receive mail

West Virginia

Select county where you reside

Kanawha County

ZIP Code

25301

Zip Extension

2530

Is your street address the same as your mailing address?

Yes

Telephone Number

[REDACTED] **0523**

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Confirm Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Select the highest grade you completed in school.

Twelfth Grade or Equivalent

Are you a citizen of the United States?

Yes

Do you elect to have state income tax in the amount of 3% and federal income tax in the amount of 10% deducted from your gross weekly benefit amount?

No

6/4/24, 12:37 PM

WorkForce WV Counter Website

Are you required to make child support payments?

No

-  Click to edit this section ([../Consumer/InitialClaims/Forms/Form_DC1.aspx](#))

Eligibility Information -

Have you claimed, received, or applied for unemployment compensation in the past twelve (12) months?

No

In the past eighteen (18) months, have you worked as a civilian for the federal government?

No

In the past eighteen (18) months, have you worked for any college, university, or school?

No

In the past eighteen (18) months, have you served on active duty in the U.S. military?

No

In the past eighteen (18) months, did you receive or apply for Workers' Compensation?

No

In the past eighteen (18) months, have you worked for an employer in a state other than West Virginia during 12/04/2022 - 06/04/2024?

No

In the past eighteen (18) months, have you worked for the railroad?

No

Could you start to work today if offered a job?

Yes

Eligibility Continued -

Are you attending school and/or training at this time?

No

Are you planning to attend any schooling and/or training program of any type?

6/4/24, 12:37 PM

WorkForce WV Counter Website

No

Did you/will you receive a lump sum pension and/or monthly retirement benefits?

No

Are you receiving any type of Social Security?

No

Have you applied for any type of Social Security?

No

Do any conditions currently exist which cause you to not be able or available for full-time work?

No

Do you obtain work through a union hiring hall?

No

Have you refused any work since your last job?

No

Are you engaged in self employment?

No

Are you working on a commission basis?

No

Are you the sole owner of a business?

No

Are you a partner in a partnership?

No

Are you a member of a Limited Liability Company (LLC)?

No

Are you an officer of a corporation?

No

Are you or will you receive "Wages in Lieu of Notice"?

No

Employment Information 1 -

Name of Employer

UNITED TALENT LLC

Does your employer do business under any other name?

No

Is this employer part of a Federal agency or Military branch?

No

Street Address

4825 MACCORCKLE AVE SW

Street Address Line 2

SUITE D

City

CHARLESTON

State

West Virginia

6/4/24, 12:37 PM

WorkForce WV Counter Website

ZIP Code

25309

Is the Payroll Address (mailing address) the same as the Working Address (Job site address)?

Yes

Phone Number

1190

When did you start working for this employer?

08/01/2021

What was the last date that you worked for this employer?

10/10/2021

Is this the same date you were separated?

Yes

Explain why you delayed filing your claim.

COVID-19

What is the reason you are not working there now?

Lack of Work or Laid Off

What was your job title/function?

GENERAL LABOR

Rate of Pay (do not enter \$ sign)

12

Your rate of pay is based on an (Hourly Rate, Weekly Rate, Monthly Salary)

Hour

Do you have a Recall Date?

No

Are you filing for unemployment due to the storms and flooding on April 2 - April 6, 2024?

No

Have you worked for any other employers during the last 18 months, either part-time or full-time?

No

Job Seeker Information -

Are you a military veteran?

No

Did you serve in the U.S. military, other than active duty for training in the National Guard or Reserves, and receive a discharge other than dishonorable?

No

Did you serve more than 180 days of active duty in the military (Do not include National Guard or Reserve training time)?

No

Are you or were you a National Guard or Reserve member called to active duty under Title 10?

No

Are you a veteran who has served at least 1 day of active duty in the U.S military and who lacks a fixed, regular and adequate residence?

No

Are you a U.S military service member on active duty including separation leave and within 24 months of retirement or 12 months of separation?

6/4/24, 12:37 PM

WorkForce WV Counter Website

No

Did you receive a campaign badge?

No

Were you discharged or released from active duty because of a service-connected disability?

No

Have you been awarded a service-connected disability by the Department of Veterans Affairs since your release from active duty?

No

Are you the spouse of any person who died of a service-connected disability?

No

Are you the spouse of any member of the armed forces serving on active duty who meets one or more of the following: Missing in action; Captured in the line of duty by hostile forces; Forcibly detained/interned in the line of duty by a foreign government or power; Any person who has a total disability (permanent) resulting from a service-connected disability or of a veteran who died while a disability so evaluated existed and has been so for a total of 90 days?

No

Did you attend high school?

Yes

Name of high school

STANLEY G. FAULK

City of School

BUFFALO

State

New York

Do you have a high school Diploma?

No

Do you have a GED?

Yes

Did you attend College?

No

Do you have a Vocational degree?

No

Do you have any certifications?

No

Do you have a valid Driver's license?

Yes

Do you have a valid CDL license?

No

Do you have any other license you need to tell us about?

No

What are occupation(s) in which you are seeking work? Note: Please do not enter "Any" or "All".

HOSPITALITY

Tell us how much experience, if any, you have in this occupation.

More than 2 years

What is the minimum hourly salary you will accept for this job? (do not enter \$ sign)

6/4/24, 12:37 PM

WorkForce WV Counter Website

15

What are occupation(s) in which you are seeking work? Note: Please do not enter "Any" or "All".

IN HOME CARE

Tell us how much experience, if any, you have in this occupation.

More than 2 years

What is the minimum hourly salary you will accept for this job? (do not enter \$ sign)

15

What are occupation(s) in which you are seeking work? Note: Please do not enter "Any" or "All".

IN HOME CARE

Tell us how much experience, if any, you have in this occupation.

More than 2 years

What is the minimum hourly salary you will accept for this job? (do not enter \$ sign)

16

How many miles are you willing to travel one-way for work?

10

Are you a migrant or seasonal farm worker?

No

Are you an individual with a disability?

Yes

Is the impairment primarily physical, including mobility and sensory impairments?

No

Is the impairment primarily mental, including cognitive and learning impairments?

Yes

Does the impairment include both physical and mental impairments?

No

Are you an individual who either has been subject to any stage of the criminal justice process for committing a status offense of delinquent act, or requires assistance in overcoming barriers to employment resulting from a record or arrest or conviction for committing delinquent acts, such as crime against persons, crimes against property, status offenses, or other crimes?

No

Have you ever been convicted of a felony?

No

Attachments

B072B4A5-A7F0-482E-809B-72A225D6E7C6.jpeg

[Download](#)

7DF86E66-61EC-45D9-B6ED-AC44400B3C9B.jpeg

[Download](#)

6/4/24, 12:37 PM

WorkForce WV Counter Website

Question ID	Question	Answer
5	IQ1 - In the past eighteen (18) months, have you worked as a civilian for the federal government?	No
9	IQ1 - Have you claimed, received, or applied for unemployment compensation in the past twelve (12) months?	No
33	IQ1 - In the past eighteen (18) months, have you served on active duty in the U.S. military?	No
37	IQ1 - Did you work in West Virginia during the last 18 months?	Yes
86	IQ1 - Are you a citizen of the United States?	Yes
1001	IQ1 - Have you worked in more than one state during [PERIOD_START_DATE] - [PERIOD_END_DATE]?	No
1006	IQ1 - Select the state or territory you live in.	West Virginia
1166	IQ1 - Select county where you reside	Kanawha County
1176	IQ1 - In the past eighteen (18) months, have you worked for the railroad?	No
5881	IQ1 - Bank Name	
5882	IQ1 - Routing Number	
5883	IQ1 - Confirm Routing Number	
5884	IQ1 - Account Type	Checking
5885	IQ1 - Account Number	
5886	IQ1 - Confirm Account Number	
21	ID1 - Social Security Number (SSN)	1913
35	ID1 - First Name	SHAMIESE
49	ID1 - Middle Initial	L
62	ID1 - Last Name	WRIGHT
1003	ID1 - Personal Identification Number (PIN)	2916
1008	ID1 - Previous Last Name	WRIGHT
10	PI1 - Mailing Address	907
24	PI1 - Mailing Address Line 2	
38	PI1 - City	CHARLESTON
51	PI1 - Select the state or territory where you receive mail	West Virginia
63	PI1 - ZIP Code	25301
73	PI1 - Is your street address the same as your mailing address?	Yes
80	PI1 - Telephone Number	0523
94	PI1 - Alternate Telephone Number	
100	PI1 - Email Address	SHAMIESEWRIGHT93@GMAIL.COM
111	PI1 - Select the highest grade you completed in school.	Twelfth Grade or Equivalent
185	PI1 - Zip Extension	2530
1005	PI1 - Confirm Email Address	SHAMIESEWRIGHT93@GMAIL.COM

6/4/24, 12:37 PM

WorkForce WV Counter Website

5807	PI1 - What was the make and model of your first car?	AUDI
5808	PI1 - What was your high school mascot?	NOTHING
5809	PI1 - Would you like to receive email updates regarding your claim?	Yes
44	EL1 - Are you required to make child support payments?	No
108	EL1 - Do you obtain work through a union hiring hall?	No
113	EL1 - In the past eighteen (18) months, have you worked for any college, university, or school?	No
1020	EL1 - In the past eighteen (18) months, have you worked for an employer in a state other than West Virginia during [PERIOD_START_DATE] - [PERIOD_END_DATE]?	No
97	EL2 - In the past eighteen (18) months, did you receive or apply for Workers' Compensation?	No
102	EL2 - Are you attending school and/or training at this time?	No
121	EL2 - Did you/will you receive a lump sum pension and/or monthly retirement benefits?	No
124	EL2 - Do you elect to have state income tax in the amount of 3% and federal income tax in the amount of 10% deducted from your gross weekly benefit amount?	No
1033	EL2 - Are you planning to attend any schooling and/or training program of any type?	No
1041	EL2 - When can you take your classes?	
1044	EL2 - Have you ever worked fulltime while attending school?	
1045	EL2 - Please explain when you worked fulltime and where.	
1046	EL2 - Are you willing to drop or rearrange your schooling for fulltime employment?	
1049	EL2 - Are you receiving any type of Social Security?	No
1051	EL2 - Have you applied for any type of Social Security?	No
1054	EL2 - Do any conditions currently exist which cause you to not be able or available for full-time work?	No
1056	EL2 - Have you refused any work since your last job?	No
1057	EL2 - Are you engaged in self employment?	No
1058	EL2 - Are you working on a commission basis?	No
1060	EL2 - Are you the sole owner of a business?	No
1061	EL2 - Are you a partner in a partnership?	No
1062	EL2 - Are you a member of a Limited Liability Company (LLC)?	No
1063	EL2 - Are you an officer of a corporation?	No
1065	EL2 - Are you or will you receive "Wages in Lieu of Notice"?	No
5795	EL2 - Could you start to work today if offered a job?	Yes
6	EMP1 - Street Address	
20	EMP1 - Street Address Line 2	

6/4/24, 12:37 PM

WorkForce WV Counter Website

34	EMP1 - City	
48	EMP1 - State	
61	EMP1 - ZIP Code	
71	EMP1 - Phone Number	1190
78	EMP1 - Street Address	4825 MACCORCKLE AVE SW
85	EMP1 - Street Address Line 2	SUITE D
92	EMP1 - City	CHARLESTON
98	EMP1 - State	West Virginia
104	EMP1 - ZIP Code	25309
110	EMP1 - When did you start working for this employer?	08/01/2021
115	EMP1 - What was the last date that you worked for this employer?	10/10/2021
119	EMP1 - What is the reason you are not working there now?	Lack of Work or Laid Off
122	EMP1 - What was your job title/function?	GENERAL LABOR
128	EMP1 - Have you worked for any other employers during the last 18 months, either part-time or full-time?	No
130	EMP1 - Name of Employer	UNITED TALENT LLC
186	EMP1 - Zip Extension	
438	EMP1 - Do you have a Recall Date?	No
475	EMP1 - Does your employer do business under any other name?	No
478	EMP1 - Job Category	
1114	EMP1 - Rate of Pay (do not enter \$ sign)	12
1124	EMP1 - Your rate of pay is based on an (Hourly Rate, Weekly Rate, Monthly Salary)	Hour
1134	EMP1 - Are you filing for unemployment due to the storms and flooding on April 2 - April 6, 2024?	No
1188	EMP1 - Is this employer part of a Federal agency or Military branch?	No
1189	EMP1 - Is this the same date you were separated?	Yes
1191	EMP1 - Explain why you delayed filing your claim.	COVID-19
1192	EMP1 - Is there anything else you need to tell us regarding your claim filing? (For instance, did you attempt a claim with another state prior to filing today, were you filing Low Earnings and the Employer stopped issuing the forms, etc.)	No
1067	EMP9 - Is the Payroll Address (mailing address) the same as the Working Address (Job site address)?	Yes

SSN:

NAME: WRIGHT

TR (TRANSFERRED)

I-IN O-OUT N=NO

SOURCE T ST

OF WAGES P SRC

ST	A ACCOUNT	WAGES	F NUMBER	EMPLOYER NAME	SOURCE	T ST
QTR	CD				OF WAGES	P SRC
32019	54	238.50 N	286509	MANCAN, INC.	WEB	0000 N 00
22019	54	3746.02 N	332038	ELDER AIDE SERVICES LLC, DBA	WEB	0000 N 00
12019	54	3282.92 N	332038	ELDER AIDE SERVICES LLC, DBA	WEB	0000 N 00
42019	00	2376.58 N	332038	ELDER AIDE SERVICES LLC, DBA	WEB	0000 N 00
22018	00	450.00 N	748382	EMPLOYERS' INNOVATIVE NETWORK EDMS	WEB	0000 N 00
12018	00	387.00 N	748382	EMPLOYERS' INNOVATIVE NETWORK	WEB	0000 N 00
12018	00	931.93 N	938807	ATRIUM HOSPITALITY LP, TA	WEB	0000 N 00
32016	54	1758.80 N	151858	ALL AID SERVICES, INC.	WEB	0000 N 00
22016	54	936.27 N	151858	ALL AID SERVICES, INC.	WEB	0000 N 00

SSN:

NAME: WRIGHT

TR (TRANSFERRED)

I-IN O-OUT N-DO

ST

A ACCOUNT

SOURCE

T ST

QTR CD

WAGES

F NUMBER

EMPLOYER NAME

OF WAGES

R SRC

42021	54	82.00	N	944491	UNITED TALENT LLC	WEB	0000	N	00
32021	54	80.00	N	944491	UNITED TALENT LLC	WEB	0000	N	00
22021	54	882.00	N	608095	SPECIAL TOUCH NURSING SERVICE	WEB	0000	N	00
22021	54	631.32	N	839892	SUMMIT BHC WEST VIRGINIA,	WEB	0000	N	00
12021	00	3121.50	N	008095	SPECIAL TOUCH NURSING SERVICE	WEB	0000	N	00
42020	54	3225.00	N	008095	SPECIAL TOUCH NURSING SERVICE	WEB	0000	N	00
32020	54	235.12	N	848042	SUNBRIDGE DUNBAR HEALTH CARE	WEB	0000	N	00
22020	54	2094.00	N	455490	LOVED ONES IN HOME CARE, LLC	EDMS	0000	N	00
22020	54	2580.22	N	848042	SUNBRIDGE DUNBAR HEALTH CARE	WEB	0000	N	00
12020	54	3607.50	N	455490	LOVED ONES IN HOME CARE, LLC	EDMS	0000	N	00
42019	54	4136.49	N	455490	LOVED ONES IN HOME CARE, LLC	EDMS	0000	N	00
32019	54	78.00	N	455490	LOVED ONES IN HOME CARE, LLC	EDMS	0000	N	00
32019	54	1042.08	N	332038	ELDER AIDE SERVICES LLC, DBA	WEB	0000	N	00

FOR MORE THAN 13 WAGE ITEMS ENTER PP2

TRANSACTION OPTION:

6/4/24, 1:51 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

██████████0621

Week End Date

06/20/2020

Confirmation Code

C191373

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

06/24/2020 11:44 AM

Mailing Address

907 ██████████ CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

75.108.144.30 (/Admin/SystemSettings/ActivitySearch.aspx?ip=75.108.144.30)

Phone Number

██████████1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due**Pens Recv Ind**

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:51 PM

WorkForce WV Counter Website

Pri Earn Ind

N

- Although your certification was accepted, you were unavailable the majority of the week and are therefore, ineligible for payment. A written decision will be forthcoming. Continue to file additional weekly certifications timely while awaiting this decision.

Questions And Answers

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?

Were you able to work and available for work each day of the week?

NoNumber of Unavailable Days **7**

Why were you not able and available for work?

NoTransportation

Did you actively seek full-time work during the week?

YesNumber of Job Contacts **4**

Did you refuse any work or refuse or fail to report for a job interview?

No

Did you attend school or training?

No

Did you apply for a pension, retirement pay, or social security benefits?

No

Are you receiving a pension, retirement pay, or social security benefits?

No

Did you work during the week, including self employment?

No

Did you quit or were fired from a job during this week?

No

Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?

No

Have you returned to full time work?

No

6/4/24, 1:50 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

[REDACTED] 0621

Week End Date

06/27/2020

Confirmation Code

C191395

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

06/28/2020 01:07 PM

Mailing Address

907 [REDACTED] CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

75.108.144.30 (/Admin/SystemSettings/ActivitySearch.aspx?ip=75.108.144.30)

Phone Number

[REDACTED] 1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due

Pens Recv Ind

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:50 PM

WorkForce WV Counter Website

Pri Earn Ind

N

No errors for this claim.**Questions And Answers**

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?

Were you able to work and available for work each day of the week?

Yes

Did you actively seek full-time work during the week?

Yes

Number of Job Contacts

5

Did you refuse any work or refuse or fail to report for a job interview?

No

Did you attend school or training?

No

Did you apply for a pension, retirement pay, or social security benefits?

No

Are you receiving a pension, retirement pay, or social security benefits?

No

Did you work during the week, including self employment?

No

Did you quit or were fired from a job during this week?

No

Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?

No

Have you returned to full time work?

No

6/4/24, 1:50 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

██████████0621

Week End Date

07/04/2020

Confirmation Code

C191345

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

07/06/2020 12:12 AM

Mailing Address

907 ██████████ CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

75.108.144.30 (/Admin/SystemSettings/ActivitySearch.aspx?ip=75.108.144.30)

Phone Number

██████████1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due

Pens Recv Ind

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:50 PM

WorkForce WV Counter Website

Pri Earn Ind

N

No errors for this claim.

Questions And Answers

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?

Were you able to work and available for work each day of the week?

Yes

Did you actively seek full-time work during the week?

Yes

Number of Job Contacts

5

Did you refuse any work or refuse or fail to report for a job interview?

No

Did you attend school or training?

No

Did you apply for a pension, retirement pay, or social security benefits?

No

Are you receiving a pension, retirement pay, or social security benefits?

No

Did you work during the week, including self employment?

No

Did you quit or were fired from a job during this week?

No

Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?

No

Have you returned to full time work?

No

6/4/24, 1:50 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

[REDACTED] 0621

Week End Date

07/11/2020

Confirmation Code

C191305

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

07/12/2020 03:59 AM

Mailing Address

907 [REDACTED] CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

99.203.203.124 (/Admin/SystemSettings/ActivitySearch.aspx?ip=99.203.203.124)

Phone Number

[REDACTED] 1146

Proxy Detection Results

The request was aborted; Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due**Pens Recv Ind**

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:50 PM

WorkForce WV Counter Website

Pri Earn Ind

N

No errors for this claim.**Questions And Answers**

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?

Were you able to work and available for work each day of the week?

Yes

Did you actively seek full-time work during the week?

Yes

Number of Job Contacts

7

Did you refuse any work or refuse or fail to report for a job interview?

No

Did you attend school or training?

No

Did you apply for a pension, retirement pay, or social security benefits?

No

Are you receiving a pension, retirement pay, or social security benefits?

No

Did you work during the week, including self employment?

No

Did you quit or were fired from a job during this week?

No

Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?

No

Have you returned to full time work?

No

6/4/24, 1:49 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

██████████ 0621

Week End Date

07/18/2020

Confirmation Code

C191379

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

07/19/2020 10:03 AM

Mailing Address

907 ██████████ CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

99.203.202.76 (/Admin/SystemSettings/ActivitySearch.aspx?ip=99.203.202.76)

Phone Number

██████████ 1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due**Pens Recv Ind**

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:49 PM

WorkForce WV Counter Website

Pri Earn Ind

N

No errors for this claim.**Questions And Answers**

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?

Were you able to work and available for work each day of the week?

Yes

Did you actively seek full-time work during the week?

Yes

Number of Job Contacts

7

Did you refuse any work or refuse or fail to report for a job interview?

No

Did you attend school or training?

No

Did you apply for a pension, retirement pay, or social security benefits?

No

Are you receiving a pension, retirement pay, or social security benefits?

No

Did you work during the week, including self employment?

No

Did you quit or were fired from a job during this week?

No

Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?

No

Have you returned to full time work?

No

6/4/24, 1:48 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

[REDACTED] 0621

Week End Date

07/25/2020

Confirmation Code

C191366

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

07/26/2020 09:14 AM

Mailing Address

907 [REDACTED] CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

173.81.119.184 (/Admin/SystemSettings/ActivitySearch.aspx?ip=173.81.119.184)

Phone Number

[REDACTED] 1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due**Pens Recv Ind**

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:48 PM

WorkForce WV Counter Website

Pri Earn Ind

N

No errors for this claim.**Questions And Answers**

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?

Were you able to work and available for work each day of the week?

Yes

Did you actively seek full-time work during the week?

Yes

Number of Job Contacts

7

Did you refuse any work or refuse or fail to report for a job interview?

No

Did you attend school or training?

No

Did you apply for a pension, retirement pay, or social security benefits?

No

Are you receiving a pension, retirement pay, or social security benefits?

No

Did you work during the week, including self employment?

No

Did you quit or were fired from a job during this week?

No

Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?

No

Have you returned to full time work?

No

6/4/24, 1:48 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

[REDACTED] 0621

Week End Date

08/01/2020

Confirmation Code

C191379

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

08/03/2020 09:15 AM

Mailing Address

907 [REDACTED] CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

99.203.202.121 (/Admin/SystemSettings/ActivitySearch.aspx?ip=99.203.202.121)

Phone Number

[REDACTED] 1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due**Pens Recv Ind**

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:48 PM

WorkForce WV Counter Website

Pri Earn Ind

N

No errors for this claim.**Questions And Answers**

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?

Were you able to work and available for work each day of the week?

Yes

Did you actively seek full-time work during the week?

Yes

Number of Job Contacts

7

Did you refuse any work or refuse or fail to report for a job interview?

No

Did you attend school or training?

No

Did you apply for a pension, retirement pay, or social security benefits?

No

Are you receiving a pension, retirement pay, or social security benefits?

No

Did you work during the week, including self employment?

No

Did you quit or were fired from a job during this week?

No

Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?

No

Have you returned to full time work?

No

6/4/24, 1:47 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

[REDACTED] 0621

Week End Date

08/08/2020

Confirmation Code

C191361

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

08/09/2020 02:24 PM

Mailing Address

907 [REDACTED] CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

99.203.203.210 (/Admin/SystemSettings/ActivitySearch.aspx?ip=99.203.203.210)

Phone Number

[REDACTED] 1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due**Pens Recv Ind**

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:47 PM

WorkForce WV Counter Website

Pri Earn Ind
N

No errors for this claim.

Questions And Answers

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?

Were you able to work and available for work each day of the week? **Yes**

Did you actively seek full-time work during the week? **Yes**

Number of Job Contacts **7**

Did you refuse any work or refuse or fail to report for a job interview? **No**

Did you attend school or training? **No**

Did you apply for a pension, retirement pay, or social security benefits? **No**

Are you receiving a pension, retirement pay, or social security benefits? **No**

Did you work during the week, including self employment? **No**

Did you quit or were fired from a job during this week? **No**

Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay? **No**

Have you returned to full time work? **No**

6/4/24, 1:47 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

[REDACTED] 0621

Week End Date

08/15/2020

Confirmation Code

C191317

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

08/16/2020 08:10 AM

Mailing Address

907 [REDACTED] CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

99.203.64.82 (/Admin/SystemSettings/ActivitySearch.aspx?ip=99.203.64.82)

Phone Number

[REDACTED] 1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due

Pens Recv Ind

N

NBP Pens Ind

N

IC Earn Ind

N

8/4/24, 1:47 PM

WorkForce WV Counter Website

Pri Earn Ind

N

No errors for this claim.

Questions And Answers

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?

Were you able to work and available for work each day of the week?

Yes

Did you actively seek full-time work during the week?

Yes

Number of Job Contacts

7

Did you refuse any work or refuse or fail to report for a job interview?

No

Did you attend school or training?

No

Did you apply for a pension, retirement pay, or social security benefits?

No

Are you receiving a pension, retirement pay, or social security benefits?

No

Did you work during the week, including self employment?

No

Did you quit or were fired from a job during this week?

No

Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?

No

Have you returned to full time work?

No

6/4/24, 1:46 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

[REDACTED] 0621

Week End Date

08/22/2020

Confirmation Code

C191388

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

08/24/2020 02:58 AM

Mailing Address

907 [REDACTED] CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

99.203.81.7 (/Admin/SystemSettings/ActivitySearch.aspx?ip=99.203.81.7)

Phone Number

[REDACTED] 1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due

Pens Recv Ind

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:46 PM

WorkForce WV Counter Website

Pri Earn Ind

N

No errors for this claim.**Questions And Answers**

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?

Were you able to work and available for work each day of the week?

Yes

Did you actively seek full-time work during the week?

Yes

Number of Job Contacts

7

Did you refuse any work or refuse or fail to report for a job interview?

No

Did you attend school or training?

No

Did you apply for a pension, retirement pay, or social security benefits?

No

Are you receiving a pension, retirement pay, or social security benefits?

No

Did you work during the week, including self employment?

No

Did you quit or were fired from a job during this week?

No

Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?

No

Have you returned to full time work?

No

6/4/24, 1:46 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

[REDACTED] 0621

Week End Date

08/29/2020

Confirmation Code

C191321

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

08/30/2020 06:24 PM

Mailing Address

907 [REDACTED] CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

99.203.81.40 (/Admin/SystemSettings/ActivitySearch.aspx?ip=99.203.81.40)

Phone Number

[REDACTED] 1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due**Pens Recv Ind**

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:46 PM

WorkForce WV Counter Website

Pri Earn Ind

N

No errors for this claim.**Questions And Answers**

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?	Yes
Were you able to work and available for work each day of the week?	Yes
Did you actively seek full-time work during the week?	Yes
Number of Job Contacts	7
Did you refuse any work or refuse or fail to report for a job interview?	No
Did you attend school or training?	No
Did you apply for a pension, retirement pay, or social security benefits?	No
Are you receiving a pension, retirement pay, or social security benefits?	No
Did you work during the week, including self employment?	No
Did you quit or were fired from a job during this week?	No
Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?	No
Have you returned to full time work?	No

6/4/24, 1:40 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

0621

Week End Date

09/05/2020

Confirmation Code

C191350

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

09/09/2020 05:41 AM

Mailing Address

907 CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

99.203.81.84 (/Admin/SystemSettings/ActivitySearch.aspx?ip=99.203.81.84)

Phone Number

1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due**Pens Recv Ind**

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:40 PM

WorkForce WV Counter Website

Pri Earn Ind**N****No errors for this claim.****Questions And Answers**

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?	Yes
Were you able to work and available for work each day of the week?	Yes
Did you actively seek full-time work during the week?	Yes
Number of Job Contacts	12
Did you refuse any work or refuse or fail to report for a job interview?	No
Did you attend school or training?	No
Did you apply for a pension, retirement pay, or social security benefits?	No
Are you receiving a pension, retirement pay, or social security benefits?	No
Did you work during the week, including self employment?	No
Did you quit or were fired from a job during this week?	No
Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?	No
Have you returned to full time work?	No

6/4/24, 1:40 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

0621

Week End Date

09/12/2020

Confirmation Code

C191378

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

09/13/2020 03:25 PM

Mailing Address

907 CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

50.110.44.84 (/Admin/SystemSettings/ActivitySearch.aspx?ip=50.110.44.84)

Phone Number

1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due**Pens Recv Ind**

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:40 PM

WorkForce WV Counter Website

Pri Earn Ind

N

No errors for this claim.**Questions And Answers**

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?	Yes
Were you able to work and available for work each day of the week?	Yes
Did you actively seek full-time work during the week?	Yes
Number of Job Contacts	7
Did you refuse any work or refuse or fail to report for a job interview?	No
Did you attend school or training?	No
Did you apply for a pension, retirement pay, or social security benefits?	No
Are you receiving a pension, retirement pay, or social security benefits?	No
Did you work during the week, including self employment?	No
Did you quit or were fired from a job during this week?	No
Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?	No
Have you returned to full time work?	No

6/4/24, 1:22 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

██████████0621

Week End Date

09/19/2020

Confirmation Code

C191350

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

09/20/2020 10:08 AM

Mailing Address

907 ██████████ CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

50.110.47.77 (/Admin/SystemSettings/ActivitySearch.aspx?ip=50.110.47.77)

Phone Number

██████████1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due

Pens Recv Ind

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:22 PM

WorkForce WV Counter Website

Pri Earn Ind

N

No errors for this claim.**Questions And Answers**

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?	Yes
Were you able to work and available for work each day of the week?	Yes
Did you actively seek full-time work during the week?	Yes
Number of Job Contacts	7
Did you refuse any work or refuse or fail to report for a job interview?	No
Did you attend school or training?	No
Did you apply for a pension, retirement pay, or social security benefits?	No
Are you receiving a pension, retirement pay, or social security benefits?	No
Did you work during the week, including self employment?	No
Did you quit or were fired from a job during this week?	No
Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?	No
Have you returned to full time work?	No

6/4/24, 1:22 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

██████████0621

Week End Date

09/26/2020

Confirmation Code

C191395

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

09/27/2020 12:46 PM

Mailing Address

907 ██████████ CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

99.203.81.231 (/Admin/SystemSettings/ActivitySearch.aspx?ip=99.203.81.231)

Phone Number

██████████1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due

Pens Recv Ind

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:22 PM

WorkForce WV Counter Website

Pri Earn Ind

N

- Although your certification was accepted, you have reported that you are attending school or training. The information you provided will be reviewed to determine if your attending school or training affects your claim. Continue to file additional weekly certifications timely while awaiting this decision.

Questions And Answers

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?	Yes
Were you able to work and available for work each day of the week?	Yes
Did you actively seek full-time work during the week?	Yes
Number of Job Contacts	3
Did you refuse any work or refuse or fail to report for a job interview?	No
Did you attend school or training?	Yes
What type of school or training are you onlineclasses attending?	
Is your school or training financed through WIA/NEG grant, or a Pell Grant?	No
Did you apply for a pension, retirement pay, or social security benefits?	No
Are you receiving a pension, retirement pay, or social security benefits?	No
Did you work during the week, including self employment?	No
Did you quit or were fired from a job during this week?	No
Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?	No
Have you returned to full time work?	No

6/4/24, 1:21 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

[REDACTED] 0621

Week End Date

10/03/2020

Confirmation Code

C191313

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

10/04/2020 10:21 AM

Mailing Address

907 [REDACTED] CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

99.203.81.214 (/Admin/SystemSettings/ActivitySearch.aspx?ip=99.203.81.214)

Phone Number

[REDACTED] 1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due**Pens Recv Ind**

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:21 PM

WorkForce WV Counter Website

Pri Earn Ind
N

No errors for this claim.

Questions And Answers

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?	Yes
Were you able to work and available for work each day of the week?	Yes
Did you actively seek full-time work during the week?	Yes
Number of Job Contacts	5
Did you refuse any work or refuse or fail to report for a job interview?	No
Did you attend school or training?	No
Did you apply for a pension, retirement pay, or social security benefits?	No
Are you receiving a pension, retirement pay, or social security benefits?	No
Did you work during the week, including self employment?	No
Did you quit or were fired from a job during this week?	No
Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?	No
Have you returned to full time work?	No

6/4/24, 1:23 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

[REDACTED] 0621

Week End Date

09/12/2020

Confirmation Code

C191378

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

09/13/2020 03:25 PM

Mailing Address

907 [REDACTED] CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

50.110.44.84 (/Admin/SystemSettings/ActivitySearch.aspx?ip=50.110.44.84)

Phone Number

[REDACTED] 1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due**Pens Recv Ind**

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:23 PM

WorkForce WV Counter Website

Pri Earn Ind

N

No errors for this claim.**Questions And Answers**

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?	Yes
Were you able to work and available for work each day of the week?	Yes
Did you actively seek full-time work during the week?	Yes
Number of Job Contacts	7
Did you refuse any work or refuse or fail to report for a job interview?	No
Did you attend school or training?	No
Did you apply for a pension, retirement pay, or social security benefits?	No
Are you receiving a pension, retirement pay, or social security benefits?	No
Did you work during the week, including self employment?	No
Did you quit or were fired from a job during this week?	No
Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?	No
Have you returned to full time work?	No

6/4/24, 1:22 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

[REDACTED] 0621

Week End Date

09/19/2020

Confirmation Code

C191350

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

09/20/2020 10:08 AM

Mailing Address

907 [REDACTED] CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

50.110.47.77 (/Admin/SystemSettings/ActivitySearch.aspx?ip=50.110.47.77)

Phone Number

[REDACTED] 1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due

Pens Recv Ind

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:22 PM

WorkForce WV Counter Website

Pri Earn Ind

N

No errors for this claim.**Questions And Answers**

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?	Yes
Were you able to work and available for work each day of the week?	Yes
Did you actively seek full-time work during the week?	Yes
Number of Job Contacts	7
Did you refuse any work or refuse or fail to report for a job interview?	No
Did you attend school or training?	No
Did you apply for a pension, retirement pay, or social security benefits?	No
Are you receiving a pension, retirement pay, or social security benefits?	No
Did you work during the week, including self employment?	No
Did you quit or were fired from a job during this week?	No
Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?	No
Have you returned to full time work?	No

6/4/24, 1:22 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

[REDACTED] 0621

Week End Date

09/26/2020

Confirmation Code

C191395

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

09/27/2020 12:46 PM

Mailing Address

907 [REDACTED] CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

99.203.81.231 (/Admin/SystemSettings/ActivitySearch.aspx?ip=99.203.81.231)

Phone Number

[REDACTED] 1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due**Pens Recv Ind**

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:22 PM

WorkForce WV Counter Website

Pri Earn Ind

N

- Although your certification was accepted, you have reported that you are attending school or training. The information you provided will be reviewed to determine if your attending school or training affects your claim. Continue to file additional weekly certifications timely while awaiting this decision.

Questions And Answers

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?	Yes
Were you able to work and available for work each day of the week?	Yes
Did you actively seek full-time work during the week?	Yes
Number of Job Contacts	3
Did you refuse any work or refuse or fail to report for a job interview?	No
Did you attend school or training?	Yes
What type of school or training are you onlineclasses attending?	
Is your school or training financed through WIA/NEG grant, or a Pell Grant?	
No	
Did you apply for a pension, retirement pay, or social security benefits?	No
Are you receiving a pension, retirement pay, or social security benefits?	No
Did you work during the week, including self employment?	No
Did you quit or were fired from a job during this week?	No
Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?	No
Have you returned to full time work?	No

6/4/24, 1:21 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

[REDACTED] 0621

Week End Date

10/03/2020

Confirmation Code

C191313

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

10/04/2020 10:21 AM

Mailing Address

907 [REDACTED] CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

99.203.81.214 (/Admin/SystemSettings/ActivitySearch.aspx?ip=99.203.81.214)

Phone Number

[REDACTED] 1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due**Pens Recv Ind**

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:21 PM

WorkForce WV Counter Website

Pri Earn Ind

N

No errors for this claim.**Questions And Answers**

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?	Yes
Were you able to work and available for work each day of the week?	Yes
Did you actively seek full-time work during the week?	Yes
Number of Job Contacts	5
Did you refuse any work or refuse or fail to report for a job interview?	No
Did you attend school or training?	No
Did you apply for a pension, retirement pay, or social security benefits?	No
Are you receiving a pension, retirement pay, or social security benefits?	No
Did you work during the week, including self employment?	No
Did you quit or were fired from a job during this week?	No
Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?	No
Have you returned to full time work?	No

6/4/24, 1:23 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

[REDACTED] 0621

Week End Date

09/12/2020

Confirmation Code

C191378

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

09/13/2020 03:25 PM

Mailing Address

907 [REDACTED] CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

50.110.44.84 (/Admin/SystemSettings/ActivitySearch.aspx?ip=50.110.44.84)

Phone Number

[REDACTED] 1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due

Pens Recv Ind

N

NBP Pens Ind

N

IC Earn Ind

N

6/4/24, 1:23 PM

WorkForce WV Counter Website

Pri Earn Ind
N

No errors for this claim.

Questions And Answers

Were you unemployed or partially unemployed due to disruptions caused by COVID-19?	Yes
Were you able to work and available for work each day of the week?	Yes
Did you actively seek full-time work during the week?	Yes
Number of Job Contacts	7
Did you refuse any work or refuse or fail to report for a job interview?	No
Did you attend school or training?	No
Did you apply for a pension, retirement pay, or social security benefits?	No
Are you receiving a pension, retirement pay, or social security benefits?	No
Did you work during the week, including self employment?	No
Did you quit or were fired from a job during this week?	No
Did you receive a bonus, wages in lieu of notice, holiday pay, or vacation pay?	No
Have you returned to full time work?	No

6/4/24, 1:21 PM

WorkForce WV Counter Website

View Claim Certification.

SSN

██████████ 0621

Week End Date

12/19/2020

Confirmation Code

C191347

Benefit Year End

06/12/2021

Name

WRIGHT, SHAMIESE

File Date/Time

12/21/2020 05:35 AM

Mailing Address

907 ██████████ CHARLESTON, WV 25301

Balance Amount

\$3,406.00

Email Address

SHAMIESEWRIGHT93@GMAIL.COM

Client Identifier

50.110.150.7 (/Admin/SystemSettings/ActivitySearch.aspx?ip=50.110.150.7)

Phone Number

██████████ 1146

Proxy Detection Results

The request was aborted: Could not create SSL/TLS secure channel.

Work Srch Ind

Y

Proc Flag Ind

N

Sch Att Ind

N

Sch Rpt Due**Pens Recv Ind**

N

NBP Pens Ind

N

IC Earn Ind

N