Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, August 23, 2020 and ending Saturday, August 29, 2020:

Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, August 23, 2020 and ending Saturday, August 29, 2020.

Did you work (full or part-time) or earn wages during the week?
No

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Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

WARNING: FURNISHING FALSE INFORMATION OR WITHHOLDING ANY MATERIAL INFORMATION MAY RESULT IN DISQUALIFICATION FROM RECEIVING PANDEMIC UNEMPLOYMENT INSURANCE BENEFITS IN West Virginia AND MAY RESULT IN CRIMINAL PROSECUTION FOR FRAUD.

Summary of COVID-19 Public Health Emergency Information

Summary of COVID-19 Public Health Emergency Information

How did the COVID-19 Public Health Emergency cause your unemployment?
A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

I acknowledge that I understand that making the certification is under penalty of perjury and intentional misrepresentation in self-certifying that I may fall in one or more of these categories is fraud.
Yes, I understand.

Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, August 30, 2020 and ending Saturday, September 5, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

A member of my household has been diagnosed with COVID-19.

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

I had to quit my job as a direct result of COVID-19.

My place of employment is closed as a direct result of the COVID-19 public health emergency.

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

I was denied continued unemployment benefits because I refused to return to work or accept an offer of work at a worksite that, in either instance, is not in compliance with local, state, or national health and safety standards directly related to COVID-19. This includes but is not limited to, those related to facial mask wearing, physical distancing measures, or the provision of personal protective equipment consistent with public health guidelines.

I provide services to an educational institution or educational service agency and am unemployed or partially unemployed because of volatility in the work schedule that is directly caused by the COVID-19 public health emergency. This includes, but is not limited to, changes in schedules and partial closures.

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

None of the above apply to me.

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, August 30, 2020 and ending Saturday, September 5, 2020:

Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, August 30, 2020 and ending Saturday, September 5, 2020.

Did you work (full or part-time) or earn wages during the week?
No

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Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

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Summary of COVID-19 Public Health Emergency Information

Summary of COVID-19 Public Health Emergency Information

How did the COVID-19 Public Health Emergency cause your unemployment?
A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

I acknowledge that I understand that making the certification is under penalty of perjury and intentional misrepresentation in self-certifying that I may fall in one or more of these categories is fraud.
Yes, I understand.

Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, September 6, 2020 and ending Saturday, September 12, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

☐

A member of my household has been diagnosed with COVID-19.

☐

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

☐

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

☐

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

☐

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

☐

I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

☐

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

☐

I had to quit my job as a direct result of COVID-19.

☐

My place of employment is closed as a direct result of the COVID-19 public health emergency.

☐

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

☐

I was denied continued unemployment benefits because I refused to return to work or accept an offer of work at a worksite that, in either instance, is not in compliance with local, state, or national health and safety standards directly related to COVID-19. This includes but is not limited to, those related to facial mask wearing, physical distancing measures, or the provision of personal protective equipment consistent with public health guidelines.

☐

I provide services to an educational institution or educational service agency and am unemployed or partially unemployed because of volatility in the work schedule that is directly caused by the COVID-19 public health emergency. This includes, but is not limited to, changes in schedules and partial closures.

☐

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

☐

None of the above apply to me.

☐ ☐

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, September 6, 2020 and ending Saturday, September 12, 2020:

Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, September 6, 2020 and ending Saturday, September 12, 2020.

Did you work (full or part-time) or earn wages during the week?
No

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Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

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Summary of COVID-19 Public Health Emergency Information

Summary of COVID-19 Public Health Emergency Information

How did the COVID-19 Public Health Emergency cause your unemployment?
A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

I acknowledge that I understand that making the certification is under penalty of perjury and intentional misrepresentation in self-certifying that I may fall in one or more of these categories is fraud.
Yes, I understand.

Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, September 13, 2020 and ending Saturday, September 19, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

A member of my household has been diagnosed with COVID-19.

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

I had to quit my job as a direct result of COVID-19.

My place of employment is closed as a direct result of the COVID-19 public health emergency.

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

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I provide services to an educational institution or educational service agency and am unemployed or partially unemployed because of volatility in the work schedule that is directly caused by the COVID-19 public health emergency. This includes, but is not limited to, changes in schedules and partial closures.

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

None of the above apply to me.

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, September 13, 2020 and ending Saturday, September 19, 2020:

Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, September 13, 2020 and ending Saturday, September 19, 2020.

Did you work (full or part-time) or earn wages during the week?
No

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Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

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Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, September 20, 2020 and ending Saturday, September 26, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

A member of my household has been diagnosed with COVID-19.

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

I had to quit my job as a direct result of COVID-19.

My place of employment is closed as a direct result of the COVID-19 public health emergency.

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

I was denied continued unemployment benefits because I refused to return to work or accept an offer of work at a worksite that, in either instance, is not in compliance with local, state, or national health and safety standards directly related to COVID-19. This includes but is not limited to, those related to facial mask wearing, physical distancing measures, or the provision of personal protective equipment consistent with public health guidelines.

I provide services to an educational institution or educational service agency and am unemployed or partially unemployed because of volatility in the work schedule that is directly caused by the COVID-19 public health emergency. This includes, but is not limited to, changes in schedules and partial closures.

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

None of the above apply to me.

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, September 20, 2020 and ending Saturday, September 26, 2020:

Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, September 20, 2020 and ending Saturday, September 26, 2020.

Did you work (full or part-time) or earn wages during the week?
No

Top

Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

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Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, September 27, 2020 and ending Saturday, October 3, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

☐

A member of my household has been diagnosed with COVID-19.

☐

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

☐

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

☒

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

☐

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

☐

I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

☐

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

☐

I had to quit my job as a direct result of COVID-19.

☐

My place of employment is closed as a direct result of the COVID-19 public health emergency.

☐

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

☐

I was denied continued unemployment benefits because I refused to return to work or accept an offer of work at a worksite that, in either instance, is not in compliance with local, state, or national health and safety standards directly related to COVID-19. This includes but is not limited to, those related to facial mask wearing, physical distancing measures, or the provision of personal protective equipment consistent with public health guidelines.

☐

I provide services to an educational institution or educational service agency and am unemployed or partially unemployed because of volatility in the work schedule that is directly caused by the COVID-19 public health emergency. This includes, but is not limited to, changes in schedules and partial closures.

☐

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

☐

None of the above apply to me.

☐ ☐

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, September 27, 2020 and ending Saturday, October 3, 2020:
Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, September 27, 2020 and ending Saturday, October 3, 2020.
Did you work (full or part-time) or earn wages during the week?
No

Top

Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

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Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, October 4, 2020 and ending Saturday, October 10, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

☐

A member of my household has been diagnosed with COVID-19.

☐

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

☐

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

☑

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

☐

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

☐

I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

☐

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

☐

I had to quit my job as a direct result of COVID-19.

☐

My place of employment is closed as a direct result of the COVID-19 public health emergency.

☐

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

☐

I was denied continued unemployment benefits because I refused to return to work or accept an offer of work at a worksite that, in either instance, is not in compliance with local, state, or national health and safety standards directly related to COVID-19. This includes but is not limited to, those related to facial mask wearing, physical distancing measures, or the provision of personal protective equipment consistent with public health guidelines.

☐

I provide services to an educational institution or educational service agency and am unemployed or partially unemployed because of volatility in the work schedule that is directly caused by the COVID-19 public health emergency. This includes, but is not limited to, changes in schedules and partial closures.

☐

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

☐

None of the above apply to me.

☐ ☐

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, October 4, 2020 and ending Saturday, October 10, 2020:

Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, October 4, 2020 and ending Saturday, October 10, 2020.

Did you work (full or part-time) or earn wages during the week?
No

Top

Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

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Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, October 11, 2020 and ending Saturday, October 17, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

☐

A member of my household has been diagnosed with COVID-19.

☐

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

☐

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

☒

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

☐

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

☐

I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

☐

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

☐

I had to quit my job as a direct result of COVID-19.

☐

My place of employment is closed as a direct result of the COVID-19 public health emergency.

☐

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

☐

I was denied continued unemployment benefits because I refused to return to work or accept an offer of work at a worksite that, in either instance, is not in compliance with local, state, or national health and safety standards directly related to COVID-19. This includes but is not limited to, those related to facial mask wearing, physical distancing measures, or the provision of personal protective equipment consistent with public health guidelines.

☐

I provide services to an educational institution or educational service agency and am unemployed or partially unemployed because of volatility in the work schedule that is directly caused by the COVID-19 public health emergency. This includes, but is not limited to, changes in schedules and partial closures.

☐

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

☐

None of the above apply to me.

☐

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, October 11, 2020 and ending Saturday, October 17, 2020:

Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, October 11, 2020 and ending Saturday, October 17, 2020.

Did you work (full or part-time) or earn wages during the week?
No

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Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

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Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, October 18, 2020 and ending Saturday, October 24, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

☐

A member of my household has been diagnosed with COVID-19.

☐

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

☐

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

☒

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

☐

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

☐

I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

☐

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

☐

I had to quit my job as a direct result of COVID-19.

☐

My place of employment is closed as a direct result of the COVID-19 public health emergency.

☐

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

☐

I was denied continued unemployment benefits because I refused to return to work or accept an offer of work at a worksite that, in either instance, is not in compliance with local, state, or national health and safety standards directly related to COVID-19. This includes but is not limited to, those related to facial mask wearing, physical distancing measures, or the provision of personal protective equipment consistent with public health guidelines.

☐

I provide services to an educational institution or educational service agency and am unemployed or partially unemployed because of volatility in the work schedule that is directly caused by the COVID-19 public health emergency. This includes, but is not limited to, changes in schedules and partial closures.

☐

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

☐

None of the above apply to me.

☐ ☐

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, October 18, 2020 and ending Saturday, October 24, 2020:

Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, October 18, 2020 and ending Saturday, October 24, 2020.

Did you work (full or part-time) or earn wages during the week?
No

Top

Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

WARNING: FURNISHING FALSE INFORMATION OR WITHHOLDING ANY MATERIAL INFORMATION MAY RESULT IN DISQUALIFICATION FROM RECEIVING PANDEMIC UNEMPLOYMENT INSURANCE BENEFITS IN West Virginia AND MAY RESULT IN CRIMINAL PROSECUTION FOR FRAUD.

Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, October 25, 2020 and ending Saturday, October 31, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

☐

A member of my household has been diagnosed with COVID-19.

☐

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

☐

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

☒

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

☐

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

☐

I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

☐

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

☐

I had to quit my job as a direct result of COVID-19.

☐

My place of employment is closed as a direct result of the COVID-19 public health emergency.

☐

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

☐

I was denied continued unemployment benefits because I refused to return to work or accept an offer of work at a worksite that, in either instance, is not in compliance with local, state, or national health and safety standards directly related to COVID-19. This includes but is not limited to, those related to facial mask wearing, physical distancing measures, or the provision of personal protective equipment consistent with public health guidelines.

☐

I provide services to an educational institution or educational service agency and am unemployed or partially unemployed because of volatility in the work schedule that is directly caused by the COVID-19 public health emergency. This includes, but is not limited to, changes in schedules and partial closures.

☐

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

☐

None of the above apply to me.

☐ ☐

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, October 25, 2020 and ending Saturday, October 31, 2020:

Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, October 25, 2020 and ending Saturday, October 31, 2020.

Did you work (full or part-time) or earn wages during the week?
No

Top

Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

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Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, November 1, 2020 and ending Saturday, November 7, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

A member of my household has been diagnosed with COVID-19.

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

I had to quit my job as a direct result of COVID-19.

My place of employment is closed as a direct result of the COVID-19 public health emergency.

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

I was denied continued unemployment benefits because I refused to return to work or accept an offer of work at a worksite that, in either instance, is not in compliance with local, state, or national health and safety standards directly related to COVID-19. This includes but is not limited to, those related to facial mask wearing, physical distancing measures, or the provision of personal protective equipment consistent with public health guidelines.

I provide services to an educational institution or educational service agency and am unemployed or partially unemployed because of volatility in the work schedule that is directly caused by the COVID-19 public health emergency. This includes, but is not limited to, changes in schedules and partial closures.

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

None of the above apply to me.

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, November 1, 2020 and ending Saturday, November 7, 2020:

Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, November 1, 2020 and ending Saturday, November 7, 2020.

Did you work (full or part-time) or earn wages during the week?
No

Top

Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

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Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, November 8, 2020 and ending Saturday, November 14, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

☐

A member of my household has been diagnosed with COVID-19.

☐

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

☐

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

☑

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

☐

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

☐

I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

☐

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

☐

I had to quit my job as a direct result of COVID-19.

☐

My place of employment is closed as a direct result of the COVID-19 public health emergency.

☐

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

☐

I was denied continued unemployment benefits because I refused to return to work or accept an offer of work at a worksite that, in either instance, is not in compliance with local, state, or national health and safety standards directly related to COVID-19. This includes but is not limited to, those related to facial mask wearing, physical distancing measures, or the provision of personal protective equipment consistent with public health guidelines.

☐

I provide services to an educational institution or educational service agency and am unemployed or partially unemployed because of volatility in the work schedule that is directly caused by the COVID-19 public health emergency. This includes, but is not limited to, changes in schedules and partial closures.

☐

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

☐

None of the above apply to me.

☐

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, November 8, 2020 and ending Saturday, November 14, 2020:
Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, November 8, 2020 and ending Saturday, November 14, 2020.
Did you work (full or part-time) or earn wages during the week?
No

Top

Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

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Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, November 15, 2020 and ending Saturday, November 21, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

☐

A member of my household has been diagnosed with COVID-19.

☐

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

☐

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

☒

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

☐

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

☐

I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

☐

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

☐

I had to quit my job as a direct result of COVID-19.

☐

My place of employment is closed as a direct result of the COVID-19 public health emergency.

☐

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

☐

I was denied continued unemployment benefits because I refused to return to work or accept an offer of work at a worksite that, in either instance, is not in compliance with local, state, or national health and safety standards directly related to COVID-19. This includes but is not limited to, those related to facial mask wearing, physical distancing measures, or the provision of personal protective equipment consistent with public health guidelines.

☐

I provide services to an educational institution or educational service agency and am unemployed or partially unemployed because of volatility in the work schedule that is directly caused by the COVID-19 public health emergency. This includes, but is not limited to, changes in schedules and partial closures.

☐

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

☐

None of the above apply to me.

☐ ☐

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, November 15, 2020 and ending Saturday, November 21, 2020:
Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, November 15, 2020 and ending Saturday, November 21, 2020.
Did you work (full or part-time) or earn wages during the week?
No

Top

Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

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Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, November 22, 2020 and ending Saturday, November 28, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

☐

A member of my household has been diagnosed with COVID-19.

☐

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

☐

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

☒

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

☐

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

☐

I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

☐

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

☐

I had to quit my job as a direct result of COVID-19.

☐

My place of employment is closed as a direct result of the COVID-19 public health emergency.

☐

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

☐

I was denied continued unemployment benefits because I refused to return to work or accept an offer of work at a worksite that, in either instance, is not in compliance with local, state, or national health and safety standards directly related to COVID-19. This includes but is not limited to, those related to facial mask wearing, physical distancing measures, or the provision of personal protective equipment consistent with public health guidelines.

☐

I provide services to an educational institution or educational service agency and am unemployed or partially unemployed because of volatility in the work schedule that is directly caused by the COVID-19 public health emergency. This includes, but is not limited to, changes in schedules and partial closures.

☐

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

☐

None of the above apply to me.

☐ ☐

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, November 22, 2020 and ending Saturday, November 28, 2020:

Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, November 22, 2020 and ending Saturday, November 28, 2020.

Did you work (full or part-time) or earn wages during the week?
No

Top

Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

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Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, November 29, 2020 and ending Saturday, December 5, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

☐

A member of my household has been diagnosed with COVID-19.

☐

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

☐

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

☑

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

☐

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

☐

I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

☐

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

☐

I had to quit my job as a direct result of COVID-19.

☐

My place of employment is closed as a direct result of the COVID-19 public health emergency.

☐

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

☐

I was denied continued unemployment benefits because I refused to return to work or accept an offer of work at a worksite that, in either instance, is not in compliance with local, state, or national health and safety standards directly related to COVID-19. This includes but is not limited to, those related to facial mask wearing, physical distancing measures, or the provision of personal protective equipment consistent with public health guidelines.

☐

I provide services to an educational institution or educational service agency and am unemployed or partially unemployed because of volatility in the work schedule that is directly caused by the COVID-19 public health emergency. This includes, but is not limited to, changes in schedules and partial closures.

☐

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

☐

None of the above apply to me.

☐ ☐

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, November 29, 2020 and ending Saturday, December 5, 2020:
Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, November 29, 2020 and ending Saturday, December 5, 2020.
Did you work (full or part-time) or earn wages during the week?
No

Top

Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

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Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, December 6, 2020 and ending Saturday, December 12, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

☐

A member of my household has been diagnosed with COVID-19.

☐

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

☐

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

☒

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

☐

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

☐

I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

☐

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

☐

I had to quit my job as a direct result of COVID-19.

☐

My place of employment is closed as a direct result of the COVID-19 public health emergency.

☐

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

☐

I was denied continued unemployment benefits because I refused to return to work or accept an offer of work at a worksite that, in either instance, is not in compliance with local, state, or national health and safety standards directly related to COVID-19. This includes but is not limited to, those related to facial mask wearing, physical distancing measures, or the provision of personal protective equipment consistent with public health guidelines.

☐

I provide services to an educational institution or educational service agency and am unemployed or partially unemployed because of volatility in the work schedule that is directly caused by the COVID-19 public health emergency. This includes, but is not limited to, changes in schedules and partial closures.

☐

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

☐

None of the above apply to me.

☐ ☐

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, December 6, 2020 and ending Saturday, December 12, 2020:

Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, December 6, 2020 and ending Saturday, December 12, 2020.

Did you work (full or part-time) or earn wages during the week?
No

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Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

WARNING: FURNISHING FALSE INFORMATION OR WITHHOLDING ANY MATERIAL INFORMATION MAY RESULT IN DISQUALIFICATION FROM RECEIVING PANDEMIC UNEMPLOYMENT INSURANCE BENEFITS IN West Virginia AND MAY RESULT IN CRIMINAL PROSECUTION FOR FRAUD.

Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, December 13, 2020 and ending Saturday, December 19, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

☐

A member of my household has been diagnosed with COVID-19.

☐

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

☐

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

☑

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

☐

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

☐

I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

☐

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

☐

I had to quit my job as a direct result of COVID-19.

☐

My place of employment is closed as a direct result of the COVID-19 public health emergency.

☐

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

☐

I was denied continued unemployment benefits because I refused to return to work or accept an offer of work at a worksite that, in either instance, is not in compliance with local, state, or national health and safety standards directly related to COVID-19. This includes but is not limited to, those related to facial mask wearing, physical distancing measures, or the provision of personal protective equipment consistent with public health guidelines.

☐

I provide services to an educational institution or educational service agency and am unemployed or partially unemployed because of volatility in the work schedule that is directly caused by the COVID-19 public health emergency. This includes, but is not limited to, changes in schedules and partial closures.

☐

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

☐

None of the above apply to me.

☐

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, December 13, 2020 and ending Saturday, December 19, 2020:

Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, December 13, 2020 and ending Saturday, December 19, 2020.

Did you work (full or part-time) or earn wages during the week?
No

Top

Weekly Certification

Currently Managing Currently Managing, WRIGHT, SHAMIESE Please review the information below. Click *Next* to continue.

Record Source: Web

Claimant Name: Shamiese Wright User ID: 13288877 Application ID: 247769

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Summary of Eligibility Review Answers

Summary of Eligibility Review Answers

During the week beginning Sunday, December 20, 2020 and ending Saturday, December 26, 2020:

COVID-19 Public Health Emergency Information

COVID-19 Public Health Emergency Information

How has the COVID-19 Public Health Emergency caused your unemployment or partial unemployment? Check all that still applies at this time:

I have been diagnosed with COVID-19 or I am experiencing symptoms of COVID-19 and I am seeking a medical diagnosis.

☐

A member of my household has been diagnosed with COVID-19.

☐

I am providing care for a family member or a member of my household who has been diagnosed with COVID-19.

☐

A child or other person in my household for which I have primary caregiving responsibility is unable to attend school or another facility that is closed as a direct result of the COVID-19 public health emergency and such school or facility care is required for me to work.

☒

I am unable to reach my place of employment because of a quarantine imposed as a direct result of the COVID-19 public health emergency.

☐

I am unable to reach my place of employment because I have been advised by a health care provider to self- quarantine due to concerns related to COVID-19.

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I was scheduled to commence employment and do not have a job or am unable to reach the job as a direct result of the COVID-19 public health emergency.

☐

I have become the breadwinner or major support for a household because the head of the household has died as a direct result of COVID-19.

☐

I had to quit my job as a direct result of COVID-19.

☐

My place of employment is closed as a direct result of the COVID-19 public health emergency.

☐

I am self-employed, an independent contractor, or a gig worker and have experienced a significant decrease of services because of the COVID-19 public health emergency, even if there has not been a suspension of services.

☐

I was denied continued unemployment benefits because I refused to return to work or accept an offer of work at a worksite that, in either instance, is not in compliance with local, state, or national health and safety standards directly related to COVID-19. This includes but is not limited to, those related to facial mask wearing, physical distancing measures, or the provision of personal protective equipment consistent with public health guidelines.

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☐

I am an employee and my hours have been reduced or I was laid off as a direct result of the COVID-19 public health emergency.

☐

None of the above apply to me.

☐ ☐

Other than for reasons that were the direct result of the COVID-19 Public Health Emergency, were you able and available to go to work during the week?
Yes
Did you receive workers' compensation?
No
Did you receive or apply for private income protection for loss of wages including illness or disability?
No
Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?
No
Did you begin receiving a veteran's administration allowance, an employer pension or any other pension (excluding Social Security benefits)?
No
Were you attending school or a training program?
No
Were you still unemployed as a direct result of this COVID-19 Public Health Emergency?
Yes

Summary of Job Offers Refused

Summary of Job Offers Refused

During the week beginning Sunday, December 20, 2020 and ending Saturday, December 26, 2020:

Did you refuse any job offers?
No

Summary of Earned Money

Summary of Earned Money

Listed below are the jobs that have earnings associated with them during the week beginning Sunday, December 20, 2020 and ending Saturday, December 26, 2020.

Did you work (full or part-time) or earn wages during the week?
No

CERTIFICATE OF AUTHENTICITY OF DOMESTIC RECORDS PURSUANT TO FEDERAL RULES OF EVIDENCE 902(11) AND 902(13)

I, Andy Osborne (Name), attest, under penalties of perjury by the laws of the United States of America pursuant to 28 U.S.C. § 1746, that the information contained in this certification is true and correct. I am employed by Workforce WV (Entity) (hereinafter "the entity"), and my title is Assistant Director (Title). I am qualified to authenticate the records attached hereto because I am familiar with how the records were created, managed, stored, and retrieved. I state that the records attached hereto are true duplicates of the original records in the custody of the provider. The attached records consist of Screenshots from the systems (Generally describe records (pages/CDs or DVDs/megabytes)). I further state that:

a. all records attached to this certificate were made at or near the time of the occurrence of the matter set forth by, or from information transmitted by, a person with knowledge of those matters, they were kept in the ordinary course of the regularly conducted business activity of the entity, and they were made by the entity as a regular practice; and

b. such records were generated by the entity's electronic process or system that produces an accurate result, to wit:

1. the records were copied from electronic device(s), storage medium(s), or file(s) in the custody of the entity in a manner to ensure that they are true duplicates of the original records; and

2. the process or system is regularly verified by the entity, and at all times pertinent to the records certified here the process and system functioned properly and normally.

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I further state that this certification is intended to satisfy Rules 902(11) and 902(13) of the Federal Rules of Evidence.

7-8-25
Date

Signature