For Self-Employed and Contract Workers
Step-by-step guide to completing the UI Application during COVID-19

STEP 1. Go to [www.uimn.org](http://www.uimn.org) and select Applicants.

![Welcome to the Minnesota Unemployment Insurance (UI) Program](image-url)

Select who you are:

- [APPLICANTS >>](#)
- [EMPLOYERS & AGENTS >>](#)

Español  Hmoob  Somali
STEP 2. Select **Apply for Benefits**. The link is near the bottom of the page, under *I Need To...*
STEP 3. Start your application.

If you have never applied for Minnesota unemployment benefits, enter your Social Security number and then select **Start**.

**Existing Applicants:** If you have previously had a Minnesota unemployment benefit account, enter your Social Security number, password and then select **Login**. If you do not remember your password, select the checkbox for **Forgot your password** and then Login. Follow the steps on the page to reset your password.
STEP 4. Review information to help you through the application process. Watch videos, review the list of information you will need to complete your application for benefits, and then click each items checkbox before you select Start the application.
STEP 5. Read the Data Privacy Authorization.

Select **Yes**, and then **Next** to move to the next page.

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**Data Privacy Authorization**

The information you provide will be used by the Department of Employment and Economic Development to determine your eligibility for unemployment insurance benefits and help you look for work.

United States Code Title 42 section 1320b-7 requires that applicants provide their social security number to be eligible for unemployment benefits. Minnesota Statute 268.07 requires applicants must be unemployed at the time the application is filed and that they must provide all of the information requested. Incomplete applications cannot be processed.

Employers are authorized by law to provide information on your dates of employment, wages paid, and why you left employment. Information you provide about why you left specific employment may be disclosed to that employer, so your eligibility for benefits and the effect on the employer can be determined.

Information you or your employer provide to the Unemployment Insurance Program is classified as private under Minnesota law. It cannot be disclosed without your written permission except as specified in state or federal law. Below is a partial list of agencies that may obtain information you provide the Unemployment Insurance Program.

- Child Support Enforcement Agencies
- Federal and State Law Enforcement
- Internal Revenue Service
- Minnesota Department of Revenue
- Social Security Administration
- State and Local Public Assistance Agencies
- Unemployment Insurance Programs in other States
- U.S. Immigration and Customs Enforcement

Minnesota Statute 268.19 has the complete list of agencies that may obtain your information from the Unemployment Insurance Program. Information you provided may be verified with these agencies through electronic matching.

* I have read and understand the above.

  - Yes
  - No

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To navigate in the registration process use the **Previous** or **Next** buttons at the bottom of the page. **Do not use the “Back” or arrow buttons on your browser.**
STEP 6. Types of Employment.

Answer each question on this screen.

Be sure to select “yes” to the question “Did you work in Minnesota?” if you worked in Minnesota in the past 18 months.

Be sure to select ‘Yes’ to “Did you work in self-employment or as an independent contractor?”.

Note: You may receive a ☒ Validation Error(s) message if you miss a question or the answer you provide does not match a previous answer given for a similar question. To fix the error, look through the page for the validation symbol ☒.
STEP 7. Applicant Authentication.

Enter your Social Security number (no dashes). Answer the other questions and then select **Next**.

![Image of Applicant Authentication form](image1)


If you selected ‘Yes’ to the question “Do you have a **Driver’s License** or State ID?” you will need to provide your **Driver’s License** # or State ID # (no dashes). Select **Next**.

![Image of Applicant Authentication form](image2)

Enter a unique password, select a security question, and enter the answer to your question. Then select **Next**.

Your password, along with your Social Security number, is your electronic signature. You will need your password to contact a Customer Service Representative. Make sure to keep it in a safe place.

Use a password that you can remember easily (like a word or number) but that only you know.

When you create your password online, you can use letters and numbers, but no spaces or special characters, like symbols or punctuation.

**Good example:** doggy5

**Bad examples:** doggy (space), doggy* (symbols), or doggy! (punctuation)

You will use the same password online and on the phone. When entering your password by phone, you will have to press the buttons corresponding to any letters.

**Example:** If the password you created online is DOGGY5 you would press the buttons on your phone that has each of those letters: 3 6 4 4 9 5
STEP 10. Your contact information.

Enter your address, telephone number, and email address (if you have one). Select **Next**.

During COVID-19, we may use your email address to send you periodic messages about your account.

We are not currently able to answer questions about accounts via email.
**STEP 11. Demographic Information.**

Complete the questions as they apply to you. Select **Next**.

<table>
<thead>
<tr>
<th>Demographic Information</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Are you a U.S. military veteran?</strong></td>
</tr>
<tr>
<td>- Yes</td>
</tr>
<tr>
<td>- No</td>
</tr>
<tr>
<td><strong>Ethnic Heritage:</strong></td>
</tr>
<tr>
<td>- Hispanic or Latino</td>
</tr>
<tr>
<td>- Not Hispanic or Latino</td>
</tr>
<tr>
<td>- I choose not to answer</td>
</tr>
<tr>
<td><strong>Race:</strong></td>
</tr>
<tr>
<td>- White</td>
</tr>
<tr>
<td>- Black or African American</td>
</tr>
<tr>
<td>- Asian</td>
</tr>
<tr>
<td>- Alaskan Native or American Indian</td>
</tr>
<tr>
<td>- Native Hawaiian or other Pacific Islander</td>
</tr>
<tr>
<td>- More than one race</td>
</tr>
<tr>
<td>- I choose not to answer</td>
</tr>
<tr>
<td><strong>Highest level of education:</strong></td>
</tr>
<tr>
<td>(Select one)</td>
</tr>
<tr>
<td><strong>Do you have a <strong>disability</strong>?</strong></td>
</tr>
<tr>
<td>- Yes</td>
</tr>
<tr>
<td>- No</td>
</tr>
<tr>
<td>- I choose not to answer</td>
</tr>
<tr>
<td><strong>Are you a U.S. citizen?</strong></td>
</tr>
<tr>
<td>- Yes</td>
</tr>
<tr>
<td>- No</td>
</tr>
</tbody>
</table>
STEP 11. Demographic Information. – continued. Select Next.

Demographic Information

* Have you recently registered a vehicle?
  - Yes - Enter the state you last registered a vehicle:
  - No - I have not registered a vehicle recently
  - I do not know or remember
  - I choose not to answer

* Did you graduate high school or obtain a GED?
  - Yes - Enter the name of the school and year you graduated:
  - No - I did not graduate from high school
  - I do not know or remember
  - I choose not to answer

* Do you have a professional license or certificate?
  - Yes - Enter your license or certificate title and ID number:
  - No - I do not have a professional license or certificate
  - I do not know or remember
  - I choose not to answer

* Have you recently filed a tax return?
  - Yes - Enter the state where you most recently filed your tax return:
  - No - I have not recently filed a tax return
  - I do not know or remember
  - I choose not to answer

* Are you currently registered with MinnesotaWorks.net?
  - Yes - Enter the name you used on your uploaded resume on MinnesotaWorks.net:
  - No - I have not registered with MinnesotaWorks.net
  - I do not know or remember
  - I choose not to answer

Answer the question and then select **Next**. If you are required to pay child support, you will need to provide additional information before moving on to the next page.

![Child Support Information Form](image)

STEP 13. Work Information.

Answer each question as it applies to you.

**Note:** Most unions in Minnesota are not hiring hall unions.

If you know when you will go back to work, answer ‘Yes’ to the question “Do you have a definite recall date?” Enter that date. Keep that date handy for additional questions later in the application process.

If you do not expect to go back to work or are not sure when you will go back to work, answer ‘No’ to the question about your recall date.

![Work Information Form](image)
STEP 14. Describe your work.

Select the overall type of work that best describes your job and then Next.

For this example, the category that best describes the person’s type of work is Food preparation and services.
STEP 15. Describe your work – continued.

Select your trade or occupation and then select Next.

For this example, the category that best describes the person’s trade or occupation is *Hosts and Hostesses, Restaurant, Lounge, and Coffee Shop.*

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STEP 16. Describe your work – continued.

Select your job title that best describes your job and then select Next.

For this example, the category that best describes the person’s job title is *Hosts and Hostesses, Restaurant, Lounge, and Coffee Shop.*
**STEP 17. Describe your work – continued.**
Enter the number of years you have done this type of work and then select **Next**.

**STEP 18. Payment method.**
Select how you would like to receive your benefit payments.

There are two choices: debit card or direct deposit. If you have a bank account, direct deposit is the most convenient way to ensure faster payments. Select the method you would like and then select **Next**.
STEP 18a. Payment method – direct deposit.

If you select direct deposit, enter your routing number (if you need more information about where to find your routing number, select the routing transit number link). Select Verify to confirm your bank’s routing transit number. Enter your bank account number and then select Next.
STEP 18b. Payment method – Unemployment debit card.

If you chose debit card instead, review the *important information about unemployment debit card fees*, select **Yes**, and then select **Next**.

Unemployment benefits are taxable income under both federal and Minnesota law. Select whether you would like taxes withheld from any unemployment benefits you receive, and then select Next.

Your withholding options are:

- 15% - federal and state taxes;
- 10% - federal only;
- 0% - no income tax withholding.

You may update your withholding choice online at any time.
STEP 20. Employment Information.

Review the list of your known employers.

If you **worked as an employee**, you may see an employer listed. You will have to add your self-employment later. Go to step 21.

If your **only employment was self-employment**, you will not see an employer listed. Go to step 23.

*Example if you had another employer besides self-employment (go to STEP 21):*

*Example if you had only self-employment (click next and go to STEP 22):*

You will now answer questions about the employers listed on the previous page.

Pay attention to the employer name and information listed at the top when answering the question on this page. An employer’s legal name and business address may be different than what you are used to. Look at a paycheck or W-2 from your employer to help determine if you worked for the company listed.

<table>
<thead>
<tr>
<th>Minnesota Employer Legal Name:</th>
<th>Alpha Bravo Charlie, Inc.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minnesota Employer Business Name:</td>
<td>ABC, Inc.</td>
</tr>
<tr>
<td>Employer Address (main office, payroll office, headquarters)</td>
<td>28 WILLOW LN SAINT PAUL MN 55125-1148</td>
</tr>
<tr>
<td>Employer Work Location Address</td>
<td>28 WILLOW LN SAINT PAUL MN 55125-1148</td>
</tr>
<tr>
<td>* Did you work for this employer anytime in the last 18 months?</td>
<td>Yes/No</td>
</tr>
</tbody>
</table>

If "Yes", complete the following information:
If "No", this employer will be notified that you indicated you did not work for them.

Most Recent Work Address: if you did work for this employer, but the work location address is different, enter the address below.

Street Address: 
City: 
State: 
ZIP Code: 

Employer phone number: ( ) - ___ - ___
Complete the questions on this page.

Select COVID-19 as your reason for separation from your employer. Select COVID-19 even if you are still working and your hours have been reduced.

Select Next.

<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>First day worked</td>
<td>(mm/dd/yyyy)</td>
</tr>
<tr>
<td>Last day worked</td>
<td>(mm/dd/yyyy)</td>
</tr>
<tr>
<td>Average number of hours worked per week</td>
<td></td>
</tr>
<tr>
<td>Job title</td>
<td></td>
</tr>
<tr>
<td>Is this business owned or partially owned</td>
<td>by you, your spouse, your parent, or your child?</td>
</tr>
<tr>
<td>Is the employer a temporary agency?</td>
<td></td>
</tr>
<tr>
<td>Reason for separation from this employer</td>
<td>COVID-19: You are currently unemployed as a direct or indirect result of COVID-19/ Coronavirus.</td>
</tr>
</tbody>
</table>
STEP 22. Additional and Complete Employment.

To add your self-employment, select the “Add Minnesota employment” button.

Answer ‘Yes’ to “Did you work for an employer in Minnesota?”. Enter **Self-employment** for the Employer Name and then select **Search**. Be sure to include the hyphen.

You will see your employer listed as SELF EMPLOYMENT. The address will be 332 Minnesota Street. Select this employer and then select Next.
STEP 25. “Minnesota Detail Employment Information”.

On this screen, enter your business address as the most recent work address. Enter your own phone number. Enter the approximate date you started your business as the “first day worked”. Enter the last day you worked. Estimate your pay rate as best you can, as well as your average number of hours worked. Enter your job title. **Select ‘No’ to “Is your business owned or partially owned by you, your spouse, your parent, or your child?”**, even if you were a legal owner of the business. Select **COVID-19** for the reason for separation from this employer. Select **Next**.

Select “Click Here After All Employers Are Entered”.

STEP 27. Employment Information – Benefit Account Date.

Select the week you first became unemployed or had your work hours reduced. Select Next.

There are questions about how your job was affected by COVID19. Answer each question as it applies to you.

![Unemployment insurance Request for Information](image.png)

- **Are you still employed but working reduced hours/earning less income?**
  - Yes, I am still employed but my hours/income were reduced
    - If yes, answer the following questions:
      - If your hours/income were reduced, when did this occur?
      - Were your hours/income reduced because of COVID-19/Coronavirus?
      - What city/state was this job located in?
  - No, I am not currently employed

- **Are you totally unemployed?**
  - If yes, answer the following questions:
    - If you are totally unemployed, what was your last day of work?
    - Are you totally unemployed because of COVID-19/Coronavirus?
    - What city/state was this job located in?

**Are you self-employed?**
- Yes  No

If yes, answer the following questions:
- What is your business/type of work?

How was your business/type of work affected by COVID-19/Coronavirus?

What name do you market your business under?

What city/state were you self-employed in?

What was your [net income] from self-employment in 2019? Please provide the number you reported to the IRS.

**Has the pandemic required you to severely limit or suspend your normal work activities?**
- Yes  No

**Was your place of employment closed as a direct result of the COVID-19 public health emergency?**
- Yes  No

**What is preventing you from working your normal schedule? Select all that apply:**

- [ ] Government shutdown or stay-at-home order
- [ ] My employer laid me off/reduced my schedule because we lost business due to COVID-19, or because the government limited our operations (for example, limits on restaurant capacity)
- [ ] I am self-employed and have lost business due to COVID-19, or the government has limited my operations (for example, limits on nail salon capacity)
- [ ] I was diagnosed with COVID-19
- [ ] A member of my household was diagnosed with COVID-19
- [ ] A healthcare provider recommended that I self-quarantine due to COVID-19

**Daycare/school closed due to COVID-19**

- [ ] Has the school or daycare reopened?  
  - [ ] Yes  
  - [ ] No
- [ ] Have you made efforts to find an alternative care arrangement?  
  - [ ] Yes  
  - [ ] No
- [ ] Can you work from home?  
  - [ ] Yes  
  - [ ] No
- [ ] Have you tried to work with your employer to find an alternate work arrangement?  
  - [ ] Yes  
  - [ ] No

- [ ] I had to quit due to COVID-19-related health issues
- [ ] A job offer was rescinded due to COVID-19

**What is the name of the employer that offered you the job?**

When was the job offered?

When was the job supposed to start?

Did you accept the job?  
- [ ] Yes  
- [ ] No

When was the job offer rescinded?

Did a healthcare professional recommend you self-quarantine?  
- [ ] Yes  
- [ ] No

Do you have a medical condition that puts you at high risk for complications from COVID-19?  
- [ ] Yes  
- [ ] No

If yes, what is the condition?

After completing each question, select Next.

- Are you making efforts to look for more work/customers/jobs?
  - If not, why?

- I will be sending in documents that support my answers.
  - Please describe the documents.

If you wish to provide any additional information about this issue, please provide it below:

If you check the box to submit additional documentation, a cover sheet will be mailed to you to include with your documents. If you would like to print the cover sheet now, go to your Account Home page.
STEP 29. Eligibility Information.

We will ask about other sources of income. Answer Yes or No as appropriate. Select **Next**.

Be sure to report if you will receive vacation pay or Personal Time Off (PTO) pay while you're not working.

<table>
<thead>
<tr>
<th>Eligibility Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you applied for or are you receiving any of the following:</td>
</tr>
<tr>
<td>1. <strong>Social Security</strong> Retirement Benefits based on your own earnings? ○ Yes ○ No</td>
</tr>
<tr>
<td>- Does NOT include Supplemental Security Income (SSI), Survivors or Dependent benefits</td>
</tr>
<tr>
<td>- Individuals are not eligible for Social Security Retirement until age 62</td>
</tr>
<tr>
<td>2. Payments from a <strong>Union Pension fund</strong> contributed to by one or more employers? (Including lump sum ○ Yes ○ No and periodic payments)</td>
</tr>
<tr>
<td>- Payments from a pension fund, annuity fund or a retirement account contributed to by an employer? ○ Yes ○ No</td>
</tr>
<tr>
<td>- (Including 401K, and lump sum or periodic payments)</td>
</tr>
<tr>
<td>- Since 10/01/2018, have you received, applied for, or are you receiving any of the following:</td>
</tr>
<tr>
<td>3. <strong>Social Security</strong> Disability Benefits? ○ Yes ○ No</td>
</tr>
<tr>
<td>- Does NOT include Supplemental Security Income (SSI)</td>
</tr>
<tr>
<td>4. <strong>Workers Compensation payments for loss of wages</strong>? ○ Yes ○ No</td>
</tr>
<tr>
<td>5. <strong>Other disability payments</strong> for loss of wages? ○ Yes ○ No</td>
</tr>
<tr>
<td>- Since 10/01/2018, have you received, or do you expect to receive any of the following upon separation from employment:</td>
</tr>
<tr>
<td>6. Accrued vacation pay or <strong>Personal Time Off (PTO) pay</strong>? ○ Yes ○ No ○ Not Sure</td>
</tr>
<tr>
<td>- Includes temporary layoff</td>
</tr>
<tr>
<td>- Does NOT include holiday pay</td>
</tr>
<tr>
<td>7. Severance or any other separation payments? ○ Yes ○ No ○ Not Sure</td>
</tr>
<tr>
<td>- Examples: bonus pay, wages in lieu of notice (notice pay), sick pay, not working but on the payroll, retention pay</td>
</tr>
<tr>
<td>- Does NOT include holiday pay or regular earnings for work performed</td>
</tr>
<tr>
<td>- Since 10/01/2018:</td>
</tr>
<tr>
<td>8. Have you worked for an <strong>educational institution</strong> or an <strong>employer contracting services to schools</strong>? ○ Yes ○ No</td>
</tr>
<tr>
<td>- Does NOT include Head Start programs</td>
</tr>
<tr>
<td>9. Were you paid to participate in, or train for any sporting events at any level as a coach, athlete or referee? ○ Yes ○ No</td>
</tr>
<tr>
<td>10. Are you currently enrolled in school or a training program? ○ Yes ○ No</td>
</tr>
<tr>
<td>11. Have you refused an offer of employment since 01/26/2020? ○ Yes ○ No</td>
</tr>
<tr>
<td>12.</td>
</tr>
</tbody>
</table>
STEP 30. Review your application – edit answers.

This last page of the application allows you to review all the questions we’ve asked, along with your answers. Please review your answers for each section of the application.

Need to change an answer? Follow the instructions on the next page.

Ready to submit your application? When you are satisfied with your answers, return to the top of this page. Select the Yes checkbox; re-enter your Social Security number (no dashes) and then select the button “Submit the Unemployment Benefit Application.”
STEP 30a. Change an answer.

Each section of the application provides a Modify button for you to quickly return to that section and correct an answer.

When you select the Modify button for a section, it will take you back to the beginning of that section. You most likely will need to move through the application pages to find the answer that needs to be updated. Use the Previous / Next buttons found at the bottom of each page to do this. After you have updated your answer, you must click through the application until you return to the Review page.
STEP 31. Confirmation page.

Your confirmation page provides a copy of your application. Select “View printable version” to print a copy.

You will also see your weekly and maximum benefit amount. Please note that the weekly benefit amount and maximum benefit amount may be blank on this screen; do not worry if this is the case. We will provide an updated benefit amount once we have processed your application.

The Next button provides additional information about using your account and resources to help you return to work.
Your online account

Information about your unemployment benefit account is available online. After filing your unemployment benefit account, each time you log in with your social security number and password, you will be able to do the following:

- **View Your Account Action Items**: When additional information is needed to process your account or payment, your "Account Home Page" will display messages advising you what you need to do.

- **Request Benefit Payments**: Every week you are required to submit a request for benefit payment. Your "Account Home Page" will inform you of the time frame in which to make a timely request for benefit payment. **If you don’t have a link for request payment, don’t panic. We are verifying your information. A link will be added to your account as possible.**

- **View Your Account Information**: You can view any benefit determinations, payment information such as payment dates and amounts, as well as your general account information.

- **Maintain Your Account Information**: You can change your address, update your tax withholding or change your payment method.