

# 如何申请普通失业保险

分步演示 (仅供参考)



MARCH 27, 2020 卡城华人耆英会 111 Riverfront AVE. SW. Calgary 1. 判断自己是否符合申请失业保险的条件

Table 1: Number	of hours o	fingurable	omploy	aant raquii	rod to d	u alify	forl	honofite
Table 1: Number	of nours o	T insurable	employn	nent requi	rea to a	quality	ror r	penerits

Regional rate of unemployment	Required number of hours of employment in the last 52 weeks		
6% or less	700 hours		
6.1% to 7%	665 hours	截至 2020 年 2 月卡尔加里失业率	
7.1% to 8%	630 hours	7.2%,也就是说在过去的 52 周内	
8.1% to 9%	595 hours	雇员至少需要累积 630 个小时的工	
9.1% to 10%	560 hours	时才可以申请失业保险	
10.1% to 11%	525 hours		
11.1% to 12%	490 hours		
12.1% to 13%	455 hours		
13.1% or more	420 hours		

2. 进入网站 https://www.canada.ca/en/services/benefits/privacy-notice.html, 翻至页面下方

#### Apply now

By starting this application, you consent to the terms of the above privacy notice statement.



#### 3. 进入申请页面



4. 选择失业保险类型 (雇员还是自雇)



#### 5. 输入申请代码 (如果有,适用于特殊情况/行业,此处不做讨论,选择没有)

## **Reference Code**

Answers to fields and questions with an asterisk (\*) are mandatory.

\* Are you part of a group of employees in an Apprenticeship program, a Work-sharing program, a group layoff situation (including layoffs due to a natural disaster), or the automotive industry AND were you given a reference code to submit with this application?

N	I.

● No	$\frown$	上十山品如姑
Previous	Continue	<b>点</b> 击此处继续

6. 选择所申请失业保险的类型,必须回答。此指南以普通失业保险为例



7. 所需准备的材料

It is important to read the following instructions and gather the necessary information. This will be nesure that there are no delays in processing your application
You will need • your soot • your med • your your your your your your your your
• your com • your com • if your and • if your a
• We name 址, 电话, 工作起止日期, 及离职原因。如果过去一年收入不固定, 提供收入最高
· If your as insurable 的周工资信息(周日到周六) · Recorde · Recorde
provide copies to Service Canada. <ul> <li>If your employer issues ROEs in paper format, you must request all ROEs issued during the last 52 weeks and provide them to Service Canada as</li> <li>soon as possible after you submit your El application. You must mail us your paper ROEs or drop them off in person at a Service Canada Centre.</li> </ul>
Reactivating or terminating a previous El claim
If you started a new claim for EI benefits within the past 52 weeks, and there are weeks still payable on that claim, it will be reactivated when you complete this application online.
If you started a new claim for El benefits within the past 52 weeks, and there are weeks still payable on that claim, it will be reactivated when you complete this application online. If you prefer to terminate your existing claim and begin another El claim, <b>do not start the application at this time.</b> To terminate a claim, you must first contact us by calling 1-800-206-7218 (TTY: 1-800-529-3742). Your decision to terminate a claim is final and cannot be changed.
If you started a new claim for El benefits within the past 52 weeks, and there are weeks still payable on that claim, it will be reactivated when you complete this application online. If you prefer to terminate your existing claim and begin another El claim, <b>do not start the application at this time</b> . To terminate a claim, you must first contact us by calling 1-800-206-7218 ( <u>TY</u> 1-800-529-3742). Your decision to terminate a claim is final and cannot be changed.
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If you started a new claim for EI benefits within the past 52 weeks, and there are weeks still payable on that claim, it will be reactivated when you complete this application online. If you prefer to terminate your existing claim and begin another EI claim, <b>do not start the application at this time</b> . To terminate a claim, you must first contact us by calling 1-800-206-7218 ( <u>TTY</u> 1-800-529-3742). Your decision to terminate a claim is final and cannot be changed. If your existing claim is reactivated and you have worked since the start of that claim, you may be able to establish a new claim when this claim runs out. • To establish a new claim, you must have enough insurable hours and meet the qualifying conditions. • If you start a new claim instead of reactivating your existing claim, the remaining weeks payable on the existing claim will be lost. • Before you start receiving benefits, there is a waiting period for which you will not be paid. <b>Note:</b> If you require additional information to help you make the decision to reactivate or terminate an existing claim, this information is only available by phone at 1-800-206-7218 ( <u>TTY</u> 1-800-529-3742).
If you started a new claim for EI benefits within the past 52 weeks, and there are weeks still payable on that claim, it will be reactivated when you complete this application online. If you prefer to terminate your existing claim and begin another EI claim, <b>do not start the application at this time</b> . To terminate a claim, you must first contact us by calling 1-800-206-7218 (Tr): 1-800-529-3742). Your decision to terminate a claim, is final and cannot be changed. If your existing claim is reactivated and you have worked since the start of that claim, you may be able to establish a new claim when this claim runs out. To establish a new claim instead of reactivating your existing claim, the remaining weeks payable on the existing claim will be lost. To establish a new claim instead of reactivating your existing claim, the remaining weeks payable on the existing claim will be lost. To establish a new claim instead of reactivating your existing claim, the remaining weeks payable on the existing claim will be lost. To establish a new claim instead of reactivating your existing claim the remaining weeks payable on the existing claim will be lost. To establish a new claim information to help you make the decision to reactivate or terminate an existing claim, this information is only available by phone at 1-800-620-67218 (Try 1-800-529-3742). Help section
If you started a new claim for El benefits within the past 52 weeks, and there are weeks still payable on that claim, it will be reactivated when you complete this application online. If you prefer to terminate your existing claim and begin another El claim, <b>do not start the application at this time</b> . To terminate a claim, you must first contact us by calling 1-800-206-7218 [TY - 800-529-3742]. Your decision to terminate a claim is final and cannot be changed. If your existing claim is reactivated and you have worked since the start of that claim, you may be able to establish a new claim when this claim runs out.  • To establish a new claim, you must have enough insurable hours and meet the qualifying conditions. • If you require meeting there is a waiting period for which you will not be paid. Note: If you require additional information to help you make the decision to reactivate or terminate an existing claim, this information is only available by phone at 1-800-206-7218 [TT - 800-529-3742]. <b>Help section</b> If you encounter any difficulties while completing the application, spice on the help icon next to the question or refer to the "Help for this page" located at the top of some pages. • Provious Continue

#### 8. 个人资料

* Social Insurance Number (without spaces or hyphens) 工卡号
* Date of Birth
Year: 出生年/月/日 V Day: V
* Last name (as indicated on your SIN card/letter)
姓,与工卡一致
* First given name (as indicated on your SIN card/letter) 名,与工卡一致
Other given name 「其他名,可不填
* Last name at birth
、 月 女 ile
非以上选项
* Mother's maiden name/mother's family name at her birth 0
妈妈出生时的姓
Previous Continue 点击此处继续

9. 确认个人信息页面,如果正确点击继续,不正确返回修改

## **Identity Validation**

Review the information you provided below. If the information is correct click the "Continue" button. If you wish to change any of your information click the "Previous" button.



#### 10. 记住你的临时密码以备申请中断重新开始

## Temporary Password

password exactly as shown.

Your temporary password is:

This temporary password has been randomly generated. Your temporary password along with the information you completed on the last screen are the key to retrieving your partially-completed application. This temporary password will stay active for a 72 hour period. If you fail to complete your application in a 72 hour period, your application will be deleted and you will be required to start a new application.

Service Canada takes measures to ensure that your electronic transactions with us are secure and your privacy is protected.



11. 个人信息

## **Personal Information**

#### Help for this page

Answers to fields and questions with an asterisk (\*) are mandatory. 打\*的问题必须回答
I prefer service ir 我选择的服务语言
\* Speaking 说
● Englis 英语
● Frenc 法语
\* Writing 写
● Englisi 英语
● Frenct 法语
Your email address may be shared with Job Bank to assist you in finding potential employment. In addition, it may be shared with your provincial or territorial

When Service Canada agents cannot reach you by telephone, they may contact you by email to ask you to call them back.

Please review the input of your email address and ensure the information you enter is correct.

government and its authorized service providers to help you with employment programs and services.

Information about your claim cannot be shared by email.

Email address

#### 邮箱

Area Code and Telephone Number

(地区号) 电话号码

Mobile Number

手机号

If possible, it is important to provide a telephone number where we can leave you messages. If we cannot reach you we will be required to contact you by mail. This may delay the processing of your application.

Telephone Number for messages or TTY/TDD Number 0

可以留言的电话号码 Extension 分机 \* Mailing Address: 邮寄地址 \* Enter your postel code and select the "Retrieve address" button to display your mailing address. 在方框内填入邮编,然后按地 业生成键继续 Check if the address is outside Canada International Address Previous Contigue

#### 12. 社会身份 (可不填)

## **Programs and services**

Employment and Social Development Canada and its partners have a number of programs and services designed to assist workers who have particular employment needs. The information sought below is for determining your eligibility for these programs and services and also for statistical purposes.

This information will also be used to determine how much income tax, if any, will be deducted from your benefits.

Completion of this section is voluntary.

l am

Status Indian

(Status Indian is someone who is registered, ith Crown-Indigenous Relations and Northern Affairs Canada as an Indian, or who is entitled to be so registered, according to the terms of the Indian



#### 13. 税务信息, 打\*的问题必须回答

#### Income tax information

Answers to fields and questions with an asterisk (\*) are mandatory.

#### Your T4E (Statement of Employment Insurance and Other Benefits)

点击继续

You need your T4E to complete your income tax return. You can get it sooner online than by mail through My Service Canada Account (MSCA). To register, visit

Canada.ca/myservicecanad	
How will you accore your T	你您通过问种力式收到14E(大业休险金明细半)用于报税:
How will you access your 14	
O I will access it online from	• 在云版务部网上账户(MISCA)获取(二月一日石)
Please send me a paper of	• 邮寄纸质文件(二月二十八日后寄出)
Personal tax credit	
The amount of tax de + #	
The amount of tax de 在头	、业保险金甲抵扣的个人所停税金额与你所在省份和你报税情况有关。你如何报税
* Please select your p	
• basic	● 基本(自己)
O basic and spouse (	<ul> <li>基本(自己+配偶,如果你把配偶作为被抚养人来报税)</li> </ul>
According to the Inco 如果	选择后者,扣税会少于前者
Selecting "basic and spouse	results in tess tax being deducted nonn your Employment insurance than selecting basic.
Modifying your personal ta	x credit
To change the amount of inco	ome t <del>ax to be deducted from your EL</del> after you submit your application, call 1-800-206-7218.

#### 14. 银行信息用以政府直接将钱打入你的银行账户, 打\*的问题必须回答

Direct Deposit	t
Answers to fields and questions	
Direct Deposit is the standard n	
Provide your banking information	• 你以往申请失业保险的时候使用直接入帐方式吗?
* Have you used Direct Deposit	● 有
⊖ Yes	● 没方
No	
* Banking information	<ul> <li>● 银行信息</li> </ul>
I have my banking informatio	■ 我现在有银行信息
$\bigcirc$ I do not have my banking infe	■ 我现在没有,以后可以提供
O I cannot use Direct Deposit	● 我天注使田吉 注入 帐 服冬
Previous Continue	

## **Direct Deposit - Banking Information**

Answers to fields and questions with an asterisk (\*) are mandatory.

It is important to provide accurate bank account information. This information is used to deposit your Employment Insurance benefits.

Refer to your cheque for the official name of your Financial Institution

The bottom of a typical personal cheque is in this format:

Cheque sample
II* 9 9 9 9 III     1 9 9 9 9 III     9 9 9 III       Cheque     Branch     Financial     Applovent
number number institution riumber number
* Branch/Transit Number 创 根据你的支票信息填写相对应的银行信息
Financial Institution (F1.) - Click on your financial institution from this list below 下拉菜单,选择你的银行
If you have not located your panking institution in the list, enter its name and institution number below (enter only the last 3 digits for the number):
* F.I. Name
如果是联名账户.提供其他人的名字
If this is a joint account, provide the name of the other person(s)
I authorize Employment and Social Development Canada to redirect the deposit of my Employment Insurance benefits and/or Employment benefits to an account number other than the one listed above when <u>ESDC</u> is notified by the financial institution of changes to the Financial Institution, branch/transit, or account number
To avoid delayed payments, I will contact the Telephone Information Service immediately if I change financial institutions, branches, close my account, or change my residence or mailing address.
Previous Continue 点击继续

### 15. 其他个人信息, 打\*必须回答

Other Personal Information						
Answers to fields and questions with an asterisk (*) are mandatory.						
* Indicate your highest completed leve 你的最高学历, University	下拉菜单,选择					
* Are you a member of a Union or Professional Association?						
○Yes ●No     你是否隶属工会或者专业协会,是/否,						
Previous Continue 点击继续						

#### 16. 雇主信息



#### 17. 离职原因, 必须回答

#### **Reason for Separation** Answers to fields and questions with an asterisk (\*) are mandatory. Employer: Name Phone Number First day worked Last day worked \* Why are you no longer workir 离职原因,可以参照 ROE There was a shortage of work 没有足够的工作 ٠ 因为退休,健康,或者跟随配偶/抚养人搬迁而离职 O I quit (includes retirement, h 被解雇 O I was dismissed or suspende O I am on sick leave (includes 生病 孕妇/产妇休假 O I am on maternity leave. 照顾新生儿/最近领养孩子的父母假期 O I am on parental leave (inclu 照顾病危亲属(为临终人员提供照顾与支持) O I am on compassionate care 照顾家庭成员 (照顾重病或受伤的家庭成员) O I am on family caregiver leave 雇主破产 O My employer went bankrupt 学徒培训 O I am on apprenticeship train 与雇主签订工作分享协议 O I have a work-sharing agree 休假 O I am on a leave of absence. Continue Previous 点击此处继续

18. 工资 (小时工资或年薪), 可以不填



19. 输入你的工种 Job title

#### 20. 有关 ROE (雇用记录)的信息,必须回答

#### **ROE Information - Last Employer**

Answers to fields and questions with an asterisk (\*) are mandatory.

Employer:	
Name Manual Manual Kanga Kang	
First day worked	
Last day worked	
* We need a Record of Employment (ROE) covering this period of work to process your claim. If your employer issued you an ROE with begins with "S," "W" or "Y," Select one of the following I have a paper Record of electronically. I requested or will reques My employer did not issu A Record of Employment shares of the business I wo Previous Controle L 击继续	a serial number that of Employment 40% of the voting

21. 其他雇主, \*必须回答

#### **Other employers**

Answers to fields and questions with an asterisk (\*) are mandatory.



22. 魁北克省父母失业保险

## Information on Quebec Parental Insurance Plan benefits

Answers to fields and questions with an asterisk (\*) are mandatory.

\* The province benefits from Q · Yes No

Previous
Continue
Lat继续

#### 23. 你是否领取或将领取工伤保险

# Workers' Compensation Payments

Answers to fields and questions with an asterisk (\*) are mandatory.

\* Have you received or will you receive money through Workers' Compensation?

○Yes ● 是 ○No 否 Previous Continue 点击继续

#### 24. 现在或者在接下来的 52 周内你是否可以领取养老金

#### Information on pensions Answers to fields and questions with an asterisk (\*) are mandatory. \* Are you now or will you be receiving a pension within the next 52 weeks? ○ Yes • 是



## 25. 与公司的关系, 打\*的问题必须回答

## **Business Relationship Information**

Answers to fields and questions with an asterisk (\*) are mandatory.

#### Family relationship with Employer

* Are you rela ⊖ Yes ● No	在你工作的f • 是 • 否	壬何公司,你是否与公司的所有人/合伙人或者参与经营的股东有关联	ing the business?
Answer "Yes • your fa • your br • your sc • your sp • your au	如果公司所 <sup>#</sup>	有人,合伙人,或者股东符合以下情形回答"是" :的爸爸,妈妈,祖父母或曾祖父母 ,弟姐妹 ,子,女儿,孙辈,曾孙辈 ?偶(包括同居) ?叔,阿姨,侄子,侄女,堂兄妹	
Note: You an Record of Er			n fishing for which you receive a
Sharehol	der in a co	prporation for which you worked	_
* Did you own ○ Yes ● No	more than 40 %	在你工作的任何公司,你是否拥有 40%以上的股份	
A shareholder	is a person who	owns shares in a corporation (a business that has been legally incorporated).	<b>_</b>
Sole own	er or parti	ner in a business for which you worked	7
* Were you the ◯ Yes ◉ No	e owner or part-	在你工作的任何公司,你是公司所有人或合伙人吗? • 是 • 否	
Previous	Continue	点击继续	_

26. 如果你的每周工资是不固定的金额, 你需要提供此信息, 打\*的问题必须回答

Variable Best Weeks		
Answers to fields and questions with an asterisk (*) are	什么是最佳浮动周?	
What is the variable best weeks calculation?	如果你的周上资每周都个一样,那么你的失业保险金是基于你上资收入 最高的那些星期的收入来计算的(一般是指最后 52 周丁作期间或从你上	
Variable best weeks are the weeks of work (except self will calculate your El benefit rate based on the best wee	一次申请失业保险开始)	
Information to give	• 请提供你的最佳浮动周工资的准确完整的信息,因为我们将依	
Please give accurate and complete information about y Calculate your weekly earnings based on a <b>Sunday to</b>	据这个信息和 ROE 来计算的失业保险金 e. 周工资就算从周日到周六	
For each week (Sunday to Saturday) that you earned th	请提供你收入最高的那些星期的信息	
<ul> <li>the dates; and</li> <li>your gross weekly pay (before deductions) includi</li> </ul>	<ul> <li>日朔</li> <li>税前周工资总额,包括任何休假和公众假期的工资</li> </ul>	
* In the last year did you work loss than 20 wooks?		
○Yes 过去的一年里工作少于 20 周?		
● No ● 是		
• 合		
<ul> <li>过去的 52 周里收入个固定?</li> <li>● Yes</li> </ul>		
<ul> <li>一定</li> <li>○No</li> <li>本</li> </ul>		
● 台 ★Wassing 过丰 52 周亚均周丁洛笑干动老宫干\$1042?		
● No ● 否		
你愿意提供高周收入的细节吗?	,	
* Would you lik ●  是		
● Yes ● 否		
○ No		
Previous Continue 点击继续		

如果你选择现在提供信息,你将会进入下一个页面,你需要将收入最高的那些星期的信息输入, 包括起止日期和金额。你也可以选择否,以后提供,在申请的最后会要求你下载一个表格,你填 好后寄回去。

#### 27. 其他工作信息, 打\*必须回答

# Workforce History

#### ► Help for this page

Answers to fields and questions with an asterisk (\*) are mandatory.

During the last 2 years, were you at any time:			
* in receipt of Workers' Compensation?	过去的两年里,任何时候你是否		
⊖ Yes	领取工伤福利?		
○ No	• 是		
•	• 否		
* unable to work for medical reasons?	由于身体原因无法工作?		
⊖ Yes	● 是		
O No	<ul> <li>● 否</li> </ul>		
* in receipt of group wage loss insurance benef	领取集体性无工资保险?		
⊖ Yes	● 是		
○ No	····································		
* prevented from working due to a labour disput	中于荧盗纠纷无法工作(罢工或考关门)?		
	<ul> <li>■</li> <li>■</li> <li>■</li> </ul>		
○ No			
* on a training course to which you were referre	被指定的机构转介参加培训课程 		
⊖ Yes	●		
○ No	● 否		
* in iail2	坐牢?		
) Yes	• 是		
○ No	• 否		
	领取工资保障计划福利?		
* in receipt of a payment from the Wage Earner	● 是		
⊖ Yes	<ul> <li>● 否</li> </ul>		
○ No			
Previous Continue 点击继续			

28. 除了渔业和农业,你是否自雇?选择"是"或者"否"



29. 关于农业信息,必须回答。在你报税时,你会上报农业收入吗?选择"是"或者"否"

#### **Farming Information**

Answers to fields and questions with an asterisk (\*) are mandatory.

* Do you or will you declare farming i	ncome on your Income	Tax Return?
○ Yes		
○ No		
Dravious		
Previous Continue	点击继续	

30. 培训课程, 必须回答。你现在或者将参加任何培训课程吗? 选择"是"或者"否"



31. 你现在怀孕或者在过去 17 周内刚生完孩子?选择"是"或者"否"



32. 是否有第三方帮助你完成这个申请?选择"是"或者"否"



#### 如果你选择"是",将第三方信息填入

## **Third Party Assistance**

Answers to fields and questions with an asterisk (\*) are mandatory.

\* Did someone assist you in completing this application?

Yes

○ No

Your personal information is confidential. If someone assisted you in completing this application, this person must complete the following:



33. 责任和义务(1-5页)



34. 责任与义务(第六页)

#### Rights and Responsibilities: Page 6 of 6

Answers to fields and questions with an asterisk (\*) are mandatory.

#### Other important information

#### Interest

We charge interest on any debts you incur as a result of misrepresentation. We calculate interest on overdue debts daily, and that interest compounds monthly on the amount owing at the average Bank of Canada rate plus 3%.

#### False or misleading statements

If you knowingly withhold information or make a false or misleading statement, you have committed an act or omission that could result in an overpayment of benefits as well as severe penalties or prosecution. However if you notify Service Canada of your actions, we can waive monetary penalties or prosecution if we are not already investigating the matter.

#### Money owing



#### 35. 认证/声明你所填信息真实准确

## Attestation

Answers to fields and questions with an asterisk (\*) are mandatory.

I declare that the information given to the questions on the Application for Employment Insurance benefits online and questionnaires is true to the best of my knowledge.

I understand that this information will be used to determine my eligibility for Employment Insurance Benefits (including Family Supplement) and/or Employment Benefits, Services and Training. I have read and understand the Diabte and Responsibilities statement.

I understand that the information provided is	你的名字	that making a false statement on an Application for Employment Insurance benefits online				
is subject to an administrative penetry or criminar proceedings for knowingly making this false or misleading statement.						
	> /					
$\bigcirc$ accept the above attestation and want	to submit 点击选打	选择"我接受" ent Insurance benefits online.				
O do not accept the above attestation and wish to abay on my Application for Employment Insurance benefits online.						
Previous Submit 点	击继续					

#### 36. 确认及其他信息,恭喜!加拿大社会服务部已经收到你的申请

