RESEA Checklist: What to Submit and How to Do It

1. Fill Out the 3 One-Page Forms

- [ ] UI Eligibility Form
- [ ] Career Action Plan (CAP)
- [ ] Labor Market Information (LMI)

- These forms are inside the PDF you received.
- Fill in all sections marked with an "X."
- You can type directly into the PDF (no need to print).

2. Attach Your Resume

Please attach the most recent version of your resume

3. Attach Your Work Search Logs

You must provide 3 work search activities for each week that you have claimed UI benefits
(Select one method)

- [ ] Download logs from your UI online account (please see directions on page 9)
- [ ] Use the official WORK SEARCH LOG form
- [ ] Send your own log (Example: Excel worksheet or Word Document)
  Please include: Date/ Employer/ Position/ Pay Rate/ Outcome

4. Email Everything Together

- Please email all documents to Resea@masshiremsw.com
- Include: UI Eligibility Form/ Career Action Plan (CAP)/ Labor Market Information Sheet (LMI)/ Resume/ Work Search Logs

Helpful Links

- Jobquest: https://jobquest.dcs.eol.mass.gov/
- MassCIS: https://portal.ma.cis360.org/
- Newsletter: https://masshiremsw.com/newsletter-registration/

Example only. Please complete document on next page. *Fill out all sections marked with an "X".*

Attachment A

CLEAR FIELDS

MASSHIRE

RESEA UI ELIGIBILITY ASSESSMENT QUESTIONNAIRE

MASSHIRE

X **NAME** FirstName LastName

X **JOB SEEKER I.D. #** 12345678 *Your ID should be in the email you received- in the subject line.*

Please Indicate YES or NO to the questions below:	YES	NO
X **1. Since filing your unemployment claim, have you been:** • Physically able to work • Actively seeking work • Ready to accept work	☑ ☑ ☑	☐ ☐ ☐
X **2. Since filing your unemployment claim, have you applied for or started receiving ANY of the following?** ***Circle any that apply.*** *If any apply, click on the statement, drag your curser to shade that statement then, right click, select "highlight". Select a color.* • workers' compensation benefits • payment in lieu of dismissal notice • payments from a pension fund • payments from a retirement account contributed to by an employer • vacation or personal time off payments from an employer • payments from a union pension fund • payments from an annuity fund • severance pay • stay bonus • continuation pay • payments from a 401K fund • **If you circled any of the above, have you reported this information to the Department of Unemployment Assistance?**	☑	☐
X **3. Have you worked during any of the weeks you claimed and NOT reported earnings for those weeks worked to the Department of Unemployment Assistance?**	☐	☑
X **4. Are you currently enrolled in school or a training program?** • **If you answered YES, have you applied for Training Opportunities Program (Section 30) approval?**	☐ ☐	☑ ☐

REMINDER: If you have moved since you filed your claim for benefits, you must notify the Department of Unemployment Assistance by accessing your U.I. Online account or by calling 617-626-6800.

X **SIGNATURE:** FirstName LastName X **DATE:** today's date

NOTE: The Reemployment Services and Eligibility Assessment Program (RESEA) is a mandatory program designed to ensure that you meet state and federal requirements to receive unemployment insurance benefits. Any information that you provide may affect your eligibility to receive those benefits.

Revised: September 2018

Attachment A

CLEAR FIELDS

RESEA UI ELIGIBILITY ASSESSMENT QUESTIONNAIRE

NAME_____ **JOB SEEKER I.D. #** _____

Please Indicate YES or NO to the questions below:	YES	NO
1. Since filing your unemployment claim, have you been: • Physically able to work • Actively seeking work • Ready to accept work	☐ ☐ ☐	☐ ☐ ☐
2. Since filing your unemployment claim, have you applied for or started receiving <u>ANY</u> of the following? ***<u>Circle</u> any that apply.*** • workers' compensation benefits • payment in lieu of dismissal notice • payments from a pension fund • payments from a retirement account contributed to by an employer • vacation or personal time off payments from an employer • payments from a union pension fund • payments from an annuity fund • severance pay • stay bonus • continuation pay • payments from a 401K fund • **If you circled any of the above, have you reported this information to the Department of Unemployment Assistance?**	☐	☐
3. Have you worked during any of the weeks you claimed and <u>NOT</u> reported earnings for those weeks worked to the Department of Unemployment Assistance?	☐	☐
4. Are you currently enrolled in school or a training program? • **If you answered YES, have you applied for Training Opportunities Program (Section 30) approval?**	☐ ☐	☐ ☐

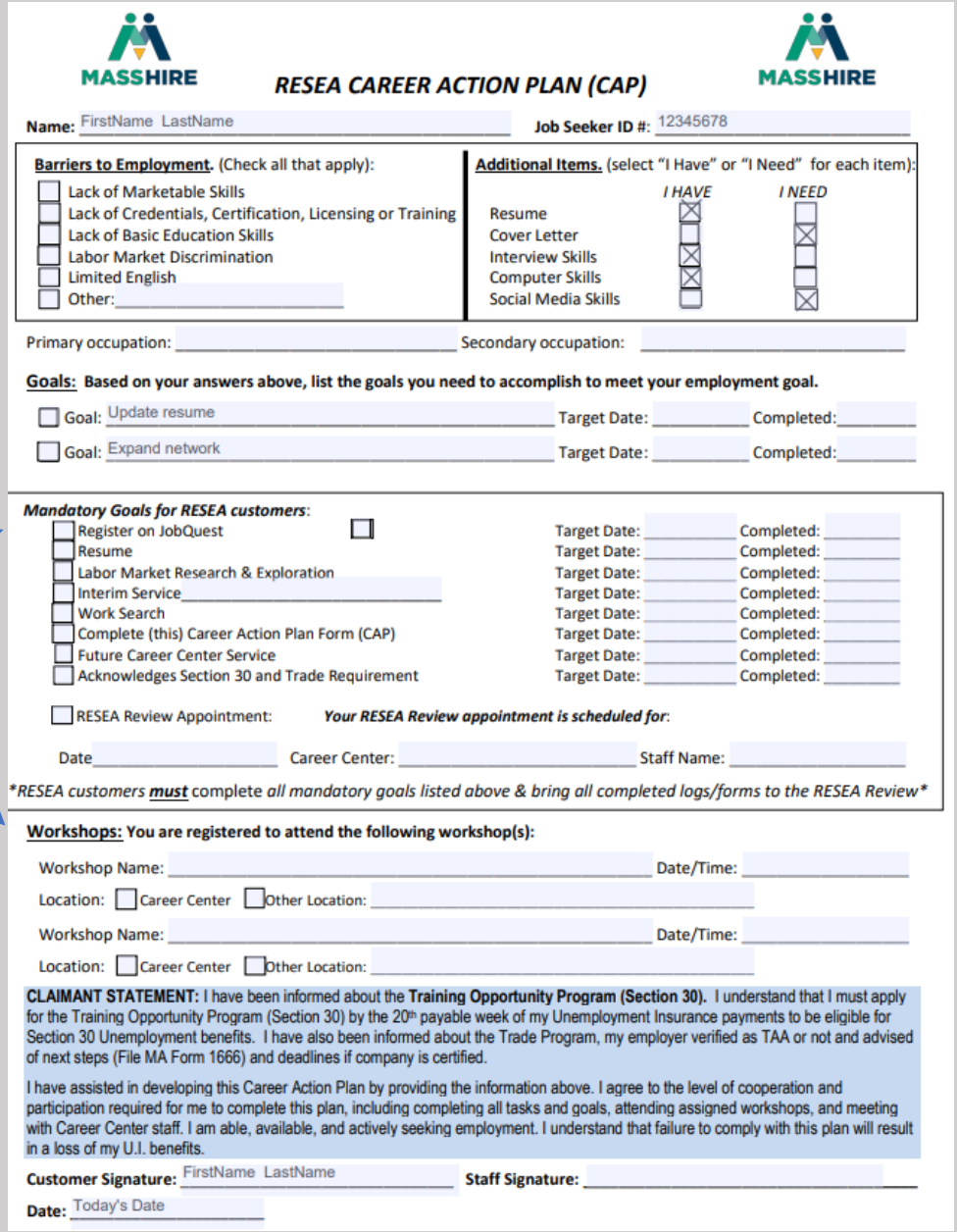
REMINDER: If you have moved since you filed your claim for benefits, you must notify the Department of Unemployment Assistance by accessing your U.I. Online account or by calling 617-626-6800.

SIGNATURE: _____ **DATE:** _____

NOTE: The Reemployment Services and Eligibility Assessment Program (RESEA) is a mandatory program designed to ensure that you meet state and federal requirements to receive unemployment insurance benefits. Any information that you provide may affect your eligibility to receive those benefits.

Revised: September 2018

Example only. Please complete document on next page. *Fill out all sections marked with an "X".*



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RESEA CAREER ACTION PLAN (CAP)

MASSHIRE

X X

Name: FirstName LastName **Job Seeker ID #:** 12345678

X X

Barriers to Employment. (Check all that apply):

- ☐ Lack of Marketable Skills
- ☐ Lack of Credentials, Certification, Licensing or Training
- ☐ Lack of Basic Education Skills
- ☐ Labor Market Discrimination
- ☐ Limited English
- ☐ Other: _____

Additional Items. (select "I Have" or "I Need" for each item):

	I HAVE	*I NEED*
Resume	☒	☐
Cover Letter	☐	☒
Interview Skills	☒	☐
Computer Skills	☒	☐
Social Media Skills	☐	☒

Primary occupation: _____ Secondary occupation: _____

Goals: Based on your answers above, list the goals you need to accomplish to meet your employment goal.

X X

☐ Goal: Update resume Target Date: _____ Completed: _____

☐ Goal: Expand network Target Date: _____ Completed: _____

***Mandatory Goals for RESEA customers*:**

☐ Register on JobQuest	Target Date:	Completed:
☐ Resume	Target Date:	Completed:
☐ Labor Market Research & Exploration	Target Date:	Completed:
☐ Interim Service	Target Date:	Completed:
☐ Work Search	Target Date:	Completed:
☐ Complete (this) Career Action Plan Form (CAP)	Target Date:	Completed:
☐ Future Career Center Service	Target Date:	Completed:
☐ Acknowledges Section 30 and Trade Requirement	Target Date:	Completed:

☐ RESEA Review Appointment: ***Your RESEA Review appointment is scheduled for*:**

Date _____ Career Center: _____ Staff Name: _____

RESEA customers **must complete *all mandatory goals listed above & bring all completed logs/forms to the RESEA Review**

You do not need to fill out these sections.

Workshops: You are registered to attend the following workshop(s):

Workshop Name: _____ Date/Time: _____

Location: ☐ Career Center ☐ Other Location: _____

Workshop Name: _____ Date/Time: _____

Location: ☐ Career Center ☐ Other Location: _____

CLAIMANT STATEMENT: I have been informed about the **Training Opportunity Program (Section 30).** I understand that I must apply for the Training Opportunity Program (Section 30) by the 20th payable week of my Unemployment Insurance payments to be eligible for Section 30 Unemployment benefits. I have also been informed about the Trade Program, my employer verified as TAA or not and advised of next steps (File MA Form 1666) and deadlines if company is certified.

I have assisted in developing this Career Action Plan by providing the information above. I agree to the level of cooperation and participation required for me to complete this plan, including completing all tasks and goals, attending assigned workshops, and meeting with Career Center staff. I am able, available, and actively seeking employment. I understand that failure to comply with this plan will result in a loss of my U.I. benefits.

Read

It is OK to type in your name for your signature

X X

Customer Signature: FirstName LastName **Staff Signature:** _____

Date: Today's Date

CLEAR FIELDS

RESEA CAREER ACTION PLAN (CAP)

Name: _____ **Job Seeker ID #:** _____

Barriers to Employment. (Check all that apply):

- ☐ Lack of Marketable Skills
- ☐ Lack of Credentials, Certification, Licensing or Training
- ☐ Lack of Basic Education Skills
- ☐ Labor Market Discrimination
- ☐ Limited English
- Other:_____

Additional Items. (select "I Have" or "I Need" for each item):

	I HAVE	*I NEED*
Resume	☐	☐
Cover Letter	☐	☐
Interview Skills	☐	☐
Computer Skills	☐	☐
Social Media Skills	☐	☐

Primary occupation: _____ Secondary occupation: _____

Goals: Based on your answers above, list the goals you need to accomplish to meet your employment goal.

Goal: _____ Target Date: _____ Completed:_____

Goal: _____ Target Date: _____ Completed:_____

Mandatory Goals for RESEA customers:

☐ Register on JobQuest	Target Date: _____	Completed: _____
☐ Resume	Target Date: _____	Completed: _____
☐ Labor Market Research & Exploration	Target Date: _____	Completed: _____
☐ Interim Service_____	Target Date: _____	Completed: _____
☐ Work Search	Target Date: _____	Completed: _____
☐ Complete (this) Career Action Plan Form (CAP)	Target Date: _____	Completed: _____
☐ Future Career Center Service	Target Date: _____	Completed: _____
☐ Acknowledges Section 30 and Trade Requirement	Target Date: _____	Completed: _____

☐ RESEA Review Appointment: ***Your RESEA Review appointment is scheduled for***:

Date_____ Career Center: _____ Staff Name: _____

RESEA customers **must complete all mandatory goals listed above & bring all completed logs/forms to the RESEA Review**

Workshops: You are registered to attend the following workshop(s):

Workshop Name: _____ Date/Time: _____

Location: ◯ Career Center ◯ Other Location: _____

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I have assisted in developing this Career Action Plan by providing the information above. I agree to the level of cooperation and participation required for me to complete this plan, including completing all tasks and goals, attending assigned workshops, and meeting with Career Center staff. I am able, available, and actively seeking employment. I understand that failure to comply with this plan will result in a loss of my U.I. benefits.

Customer Signature: _____ **Staff Signature:** _____

Date: _____

Example only. Please complete document on next page. *Fill out all sections marked with an "X".*

Read first

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Re-Employment Services Eligibility Assessment (RESEA) Requirements

1. **Obtain Labor Market Information (LMI)** – the following websites are helpful to answer the questions listed below:

US Bureau of Labor Statistics: https://www.bls.gov/
O*Net Online: https://www.onetonline.org/
My Skills My Future: https://www.myskillsmyfuture.org/
My Next move: https://www.mynextmove.org/
MassHire Career Information System (MassCIS): https://portal.masscis.intocareers.org/

How to Navigate on MassCIS:

- Go to **MassHire Career Information System (MassCIS)** web site at: https://portal.masscis.intocareers.org/
- Click on **Massachusetts Resident**, then click on the **Adult** button. Next, choose a town and enter the zip code. Click on **Sign In.**
- At the top red menu bar, click on **Careers**, then Click on the **Careers** box. Search for an occupation by typing it in the Search field, e.g. Accountant, Sales Rep., etc. Keep in mind, the occupation you enter may not exist as such in MACIS so you may have to try a few occupations or search for one that is most similar.
- Once in the specific occupation page, select **Wages**, and write down the wage range for MA in Question #2 below.
- Then select **Employment & Outlook** in the blue bar. This will provide you with LMI data for MA in Question #3 below.

PLEASE Complete LMI and Bring to your RESEA REVIEW!

Fill in the Information below based on your Labor Market Research:

X 1. Primary Occupation Title: Accountant (please note – not all occupational titles will be listed on theses websites - pick the title that is the closest match to your occupation)

X 2. What is the salary range? (if no range found, then list median wage.
$ 60,000 to $ 150,000 per hour or annual (circle one).

X 3. Are opportunities in this occupation (in the state you are looking for work): See example below
   a. x Growing or Declining (check one box)
   b. By what percent 3 %
   c. How many jobs openings are available annually in your occupation: 6,298

X 4. Based on your research, do you possess the appropriate certifications, licenses, or credentials for this occupation? yes

Mass CIS Example for question 3:

3a&b

3c

Location	Employment		Growth		>>>>>>	Annual Openings
			This occupation	All Occupations		
Massachusetts	37,166 Very Large		8.5%	7.4%	>>>>>>>	3,691 Very High

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MassHire Programs & Services are funded in full by US Department of Labor (USDOL) Employment and Training

www.MassHireMSW.com

7/31/2020

Recommended to use mass.cis website to respond to the below questions.

Even if the job category isn't perfect, try picking the closest one that make sense.

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Re-Employment Services Eligibility Assessment (RESEA) Requirements

1. **Obtain Labor Market Information (LMI)** – the following websites are helpful to answer the questions listed below:

US Bureau of Labor Statistics: https://www.bls.gov/
O*Net Online: https://www.onetonline.org/
My Skills My Future: https://www.myskillsmyfuture.org/
My Next move: https://www.mynextmove.org/
Mass Career Information System (MassCIS): https://portal.masscis.intocareers.org/ (log in required - instructions below)

How to Navigate on MassCIS:

- Go to **Massachusetts Career Information System (MassCIS)** web site at: https://portal.ma.cis360.org/
- Click on Massachusetts Resident, then click on the **Adult** button. Choose a town and enter the zip code. Sign in.
- Locate the red menu bar at top of screen. Click on **Career**, then click on **Careers** box.
- Search for an occupation by typing in the search field, e.g. Accountant, Sales Rep., etc. Keep in mind, the occupation you enter must not exist as such in MACIS. You may have to try a few occupations or search for one that is the most similar.
- Once in the specific occupation page, select **Wages**. Write down the **wage range** for MA in Question #2 below.
- Select Employment & Outlook in the blue bar. This will provide the LMI data for MA in Question #3 below.
-

PLEASE Complete LMI and Bring to your RESEA REVIEW!

Fill in the Information below based on your Labor Market Research:

1. Primary Occupation Title: _____ (please note – not all occupational titles will be listed on theses websites - pick the title that is the closest match to your occupation)
2. What is the salary range? (if no range found, then list median wage.
   $_____ to $ _____ per hour or annual (circle one).
3. Are opportunities in this occupation (in the state you are looking for work): See example below
   a. Growing / Declining (circle one)
   b. By what percent _____%
   c. How many jobs are available annually in your occupation: _____
4. Based on your research, do you possess the appropriate certifications, licenses, or credentials for this occupation?

Mass CIS Example:

3 a & b

3 c

Location	Employment		Growth		>>>>>>	Annual Openings
			This occupation	All Occupations		
Massachusetts	37,166 Very Large		8.5%	7.4%	>>>>>>>	3,691 Very High

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Additional RESEA requirements:

2. **Register on JobQuest** at mass.gov/jobquest.

3. **Work Search Activity Logs** (www.mass.gov/dua/worksearch). Bring in your work search activity logs from the date that you filed for UI benefits to your appointment date. Your work search activity log should reflect the 3 different days of work search activity e.g., attending workshops, websites, networking, sending your résumé, online applications, etc.

4. **Résumé** – Bring in your résumé and we will provide a brief résumé review.

5. **First Service** – The service should be completed **prior** to your RESEA Review Appointment. You may choose any activity or additional service, i.e. attend a workshop at any MA One-Stop Career Center, attend a Job Fair, meet with an outplacement Job Coach, etc. (*See RESEA Service Requirements document*).

6. **Second Service** - The service should be completed **within approximately one month** (30 Days) from the date of your completed RESEA review. You may choose any activity or additional service, i.e. attend a workshop at a MA One-Stop Career Center, attend a Job Fair or other Career Center event (*See RESEA Service Requirements document).*

7. **RESEA Action Career Plan (CAP)** - Bring your original CAP to your scheduled RESEA Review meeting.

***If you accept employment before your RESEA deadline, contact your RESEA specialist**. You may or may not have to attend your RESEA Review meeting, but it is **important** you contact us to avoid possibly having your UI account sanctioned.

THANK YOU AND WE LOOK FORWARD TO MEETING WITH YOU.

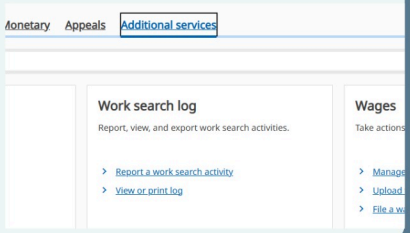
Print Work Search Activities

Claimants can print their work search activities on Unemployment Services for Workers in case they need to present them to DUA or DCS.

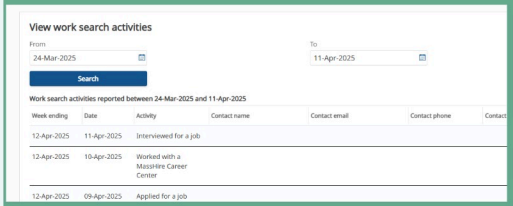
Just a few easy steps

1. Log In and Locate

On the Dashboard, click the View more benefit details hyperlink. View the Additional Services tab and then click the View or print log hyperlink.



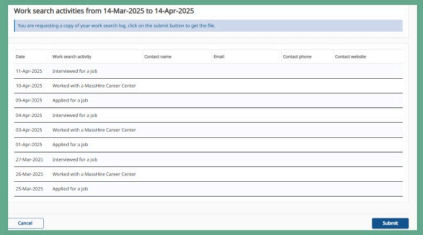
2. Filter Date Range



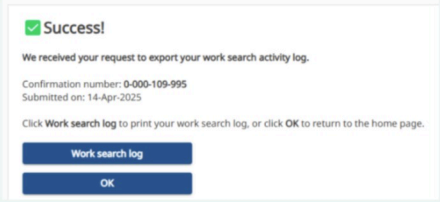
Use the From and To filters to search for a specific range of dates, if needed. Click the Search button.

3. Print and Submit

Click the Print hyperlink and then click the Submit button at the bottom to complete the request.



4. Print and Submit



Use the From and To filters to search for a specific range of dates, if needed. Click the Search button.

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EQUAL OPPORTUNITY IS THE LAW

It is against the law for this recipient of Federal financial assistance to discriminate on the following bases: against any individual in the United States, on the basis of race, color, religion, sex (including pregnancy, childbirth, and related medical conditions, sex stereotyping, transgender status, and gender identity), national origin (including limited English proficiency), age, disability, or political affiliation or belief, or, against any beneficiary of, applicant to, or participant in programs financially assisted under Title I of the Workforce Innovation and Opportunity Act, on the basis of the individual's citizenship status or participation in any WIOA Title I–financially assisted program or activity.

The recipient must not discriminate in any of the following areas: deciding who will be admitted, or have access, to any WIOA Title I–financially assisted program or activity; providing opportunities in, or treating any person with regard to, such a program or activity; or making employment decisions in the administration of, or in connection with, such a program or activity.

Recipients of federal financial assistance must take reasonable steps to ensure that communications with individuals with disabilities are as effective as communications with others. This means that, upon request and at no cost to the individual, recipients are required to provide appropriate auxiliary aids and services to qualified individuals with disabilities.

WHAT TO DO IF YOU BELIEVE YOU HAVE EXPERIENCED DISCRIMINATION

If you think that you have been subjected to discrimination under a WIOA Title I–financially assisted program or activity, you may file a complaint within 180 days from the date of the alleged violation with either: the recipient's Equal Opportunity Officer (or the person whom the recipient has designated for this purpose);

AA/EO Officer: Zoie Jaklitsch
MassHire Metro South/West
MassHire Framingham: (508) 861-7993
MassHire Norwood: (781) 262-5494

MassHire Framingham
39 Grant St., Suite 150
Framingham, MA 10702

MassHire Norwood
128 Carnegie Row, Suite 109
Norwood, MA 02062

or

Director, Civil Rights Center (CRC), U.S. Department of Labor
200 Constitution Avenue NW, Room N-4123, Washington, DC 20210 or
electronically as directed on the CRC website at www.dol.gov/crc.

Verizon Telephone Relay Service: TDD/TTY: 1-800-439-2370 Voice: 1-800-439-0183
Auxiliary aids and services are available upon request. Equal Opportunity Employer/Program

If you file your complaint with the recipient, you must wait either until the recipient issues a written Notice of Final Action, or until 90 days have passed (whichever is sooner), before filing with the Civil Rights Center (see address above). If the recipient does not give you a written Notice of Final Action within 90 days of the day on which you filed your complaint, you may file a complaint with CRC before receiving that Notice. However, you must file your CRC complaint within 30 days of the 90-day deadline (in other words, within 120 days after the day on which you filed your complaint with the recipient). If the recipient does give you a written Notice of Final Action on your complaint, but you are dissatisfied with the decision or resolution, you may file a complaint with CRC. You must file your CRC complaint within 30 days of the date on which you received the Notice of Final Action