Employer Refusal to Accept Work Reporting

5/28/2021

EMPLOYER LOGIN	CREATE ONLINE PROFILE	Log into your online account to	OUNT NUMBER	
Online Business ID	Already have a Hawaii Unemployme Insurance (UI) account Click "Create Online Prome.	get to your dashboard. number or reactivate you	or a UI account our account.	
E-mail Address	Hours of Availability: Monday through Friday 6:30 a.m. to 5:30 p.m. HST 8:00 p.m. to 11:00 p.m. HST	Only owners, partners/members, and officers of the business can register. This person will be designated the administrative user. Each business account		
Sign in Forgot Online Business ID?	Weekends and Holidays 6:30 a.m. to 11:00 p.m. HST	can only have 1 administrative user. The administrative user can add or inactivate sub users.		
	Create Online Profile	Register for UL	Account Number	

Employer Dashboard:

People who would fall into this category:

- Previously laid off employee who asked to return to work or applied to work.
- Offers a job to a new employee and did not accept work

Fraud Reporting

If you suspect someone has used the personal information of your employee to file an unemployment claim and your employee confirms this is the case, report it by going to our fraud reporting form and advise your employee to file a complaint with the Federal Trade Commission at **identitytheft.gov**. You can submit Monday through Friday - 6:30 a.m. to 5:30 p.m. Weekends and Holic to 5:30 p.m.

Administrator, sub-users, and CPA/TPA will see this on Employer's dashboard. No assigned rights necessary.



Refusal to Accept Work Report

Link is only available during hours listed.

States must have a method to address circumstances in which an individual refuses to return to work or to accept an offer of suitable work without good cause. You can submit a Refusal to Accept Work Report Monday through Friday - 6:30 a.m. to 5:30 p.m. Weekends and Holidays - 9:00 a.m. to 5:30 p.m.

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* Indicates required field				
FORMER EMPLOYEE OR JOB APPLICAN	Т			
If available, please provide the SSN	Last Name *	First Name *		
Was this person offered employment? *	Did this person refuse an offer of employme	ent? *		
YES ○ NO	○ YES ○ NO			
Mailing Address *		Phone Number *		
		()		
E-mail Address	Last employer of	Last employer on job application		
Position applied	Days and hours available to work	Date application submitted *		
		MM/DD/YYYY		

EMPLOYER INFORMATION / STATEMENT			Employer Name will auto-populate and is not editable.		
Name of Company	Address *		Employer address and phone number will autopopulate and is editable for this form only.		
Phone Number *	Email Address *		p - p and to and to date		
What was the rate of pay? *	What were the work days and hours offered? * What date wa		as the offer of work made? *		
		MM/DD/	YYYY		
What is the job title for the work that's being offere	ed? * Method of contact(i.e.	in person, phone	, email, etc.) *		
Please describe the duties of this position *					
Was the applicant qualified and capable to perforn	n the work offered? *				
YES NO	in the more entired:				
PERSON WHO OFFERED THE POSITION					
Name *	Title *	Phone Numb	per *		
		()			
Email Address *					
				Click save and continue to	
				get to the review page and	
Cancel and Exit Save and Continue				confirmation page.	