



SEPARATION INFORMATION E-RESPONSE WEB SITE

USER GUIDE

Version: 2.7

Date: September 2017

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1 Introduction

SIDES E-Response is a website that makes it possible for employers to respond electronically to requests for information from participating state unemployment insurance agencies. This guide provides step-by-step direction for responding to requests for information about the reasons that a former worker was separated from employment, including samples of the screens that you will see when you login to E-Response and enter information related to a specific claim/individual. The E-Response system performs a comprehensive check of the information to ensure that it is complete before it is submitted. When a response is submitted, E-Response provides a confirmation number for your records.

2 Getting Started

2.1 Minimum Requirements, Credentials, and Conventions

Minimum Requirements.

The minimum system requirements to use SIDES E-Response are:

- Internet Explorer version 11.0 or higher.
- Chrome V44 or higher.
- Firefox V37 or higher.
- JavaScript must be turned on.
- A minimum screen resolution of 1024 x 768.

2.2 Credentials

Before logging into SIDES E-Response, you will need the following credentials:

- Federal Employer Identification Number (FEIN)
- State Employer Identification Number (SEIN) if used by requesting State
- Personal Identification Number (PIN)

The State Unemployment Insurance (UI) agency requesting information will provide your PIN either with the notice that requests separation information or through another avenue. Some States may assign a business one PIN for access to all requests sent to it; other states may assign a separate PIN for access to each request. If you have questions regarding credentials for logging in to E-Response, please contact the State UI agency from which you have received a request.

2.3 Conventions

This guide uses the following conventions:

[Button]: Brackets indicate a button and the button label you will see on the screen.

Hyperlink: All hyperlinks in the screen will be indicated with a bold underline.

“Area of screen”: Double quotes indicate headers or some other specific area of a particular screen.

SMALL CAPS: Screen titles are shown in SMALL CAPS.

3 Logging In

To log-in to SIDES E-Response:

- Launch an Internet Browser (Internet Explorer, version 9.0 or higher required)
- Go to <http://uisides.org>

The screen shown below will appear.

The screenshot shows the SIDES E-Response website. The header features the SIDES E-Response logo on the left and the SIDES logo on the right. The main content area is titled "Welcome to the E-Response Website for the Unemployment Insurance State Information Data Exchange System". Below the title, it asks the user to "Please select the application you want to use:". Underneath, there are two sections of radio button options. The first section is "Notice of UI Claim Filing" with three options: "Separation Information", "Wages Reported and Possible Charges", and "Determinations and Decisions". The second section is "Earnings Verification" with one option: "Benefit Charges". A "Select" button is located below the second section. On the left side of the page, there is a sidebar with the text "SIDES E-Response supports the following browsers:" followed by a list: "IE 11 and above", "Chrome V44 and higher", and "Firefox V37 and higher". At the bottom of the page, there is a footer with the text "Copyright © 2008 - 2016, National Association of State Workforce Agencies. All Rights Reserved." and navigation arrows.

On the WELCOME screen, select Separation Information, and click the [Select] button. The screen shown below will appear.

[Users Guide](#)

[Help with E-Response](#)

* indicates a Required Field

All values entered into the FEIN/SEIN/PIN fields are case SenSITive

Note: Dashes and/or other punctuation should be omitted from the Federal Employer Identification Number.

Separation Information Application Response Entry

To respond to your separation information request(s), please login using the instructions provided by the State Agency.

* State: ?

* Federal Employer Identification Number: ?

* State Employer Identification Number: ?

* Identification Number/Access Code (PIN): ?

[Return to the Main E-Response Selection Page](#)

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On the LOGIN screen, do the following:

- Select the appropriate State from the drop-down list;
- Enter your Federal Employer Identification Number (FEIN) without dashes or other punctuation;
- Enter your State Employer Identification Number (SEIN) without dashes or other punctuation;

Note: If a State UI agency does not use a State Employer Identification Number, the SEIN is not required and no SEIN box will be displayed on the Login screen;

- Enter the PIN provided to you by the requesting State UI agency, and

Note: PINs are case SenSitive

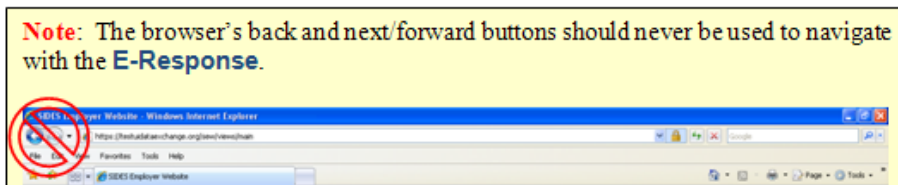
- Click the [Login] button.


If the login is unsuccessful, first try again, being very careful with your key strokes. If you continue to have a problem, either your credentials are incorrect or there are no separation information requests pending at this time. Contact the requesting State UI agency if you received a notice that a separation request is pending and you cannot log into the system to enter your response.

4 Features Included in Multiple Screens

- Identifying Information. Your FEIN and SEIN (if used) will be displayed in the upper right portion of the screens.
- Information Bar. A vertical section on the left side of the screen provides specific instructions to help you navigate specific pages.
- Site Navigation Buttons. At the bottom of most pages you will find the following buttons:
 - [Back]—saves your work and takes you to the previous page.
 - [Cancel]—deletes data from the screen, and you remain on the same page.
 - [Save]—saves data entered and runs validations, but you remain on the same page.
 - [Main Menu]—does not save data entered, and returns you to the Separation Information Requests page.
 - [Next]—saves data entered and moves to the next page.
 - [Go]—a drop down menu allows you to select and jump to a particular page.

Note: Using the browser navigation button to go back or go forward will **NOT** ensure the proper functioning of the site and could cause you to lose work.



- Sign Out Button. The [Sign Out] button located in the upper far-right portion of each page will log you out of the E-Response website. Be sure you have saved your work before signing out.
- Help Icon.  This symbol indicates help is available for the particular field where it is found. Simply mouse over the icon to see the help text.
- Screen Identification Number. The number in the bottom right corner of each screen identifies it. Should you have questions or problems with a particular screen/page, please refer to this screen number when contacting your State UI agency.

- Standard Web Interface Features. Many pages include navigation and functions that are common on most websites, including clickable radio buttons, check boxes, drop-down menus, and text fields. Remember to use only the navigation features built into the site. Using browser navigation features to go back, forward, or print could cause you to lose your work.

5 Separation Information Requests Screen

After logging in to E-Response you will see the pending separation information request or requests that are associated with the PIN that you entered. A sample screen is shown below.

SIDES E-Response SOUTH CAROLINA DEPARTMENT OF EMPLOYMENT AND WORKFORCE FEIN: 111111111 SEIN: 111111111 Sign out

Search by SSN: (Omit Dashes) Search

Announcement: Welcome to UI SIDES E-Response. SIDES E-Response supports the following browsers:

- IE 9 and above
- Chrome V44 and higher
- Firefox V37 and higher

Please Note: The system has regularly scheduled maintenance from 12:00:01 AM ET Sunday - 04:00:00 AM ET Sunday. You should not work on your responses during this window as the system may go down unexpectedly.

Separation Information Requests

Separation Information Requests for PIN: Order by:

SSN: 560-34-8475 Name: Smith, John T, Jr. Date Due: 11:59 PM Eastern on 04/29/2017	Response Status: Not Started Create Response	View/Print	?
SSN: 560-34-8476 Name: Wilson, Jim Date Due: 11:59 PM Eastern on 04/29/2017	Response Status: Not Started Create Response	View/Print	?
SSN: 560-34-8478 Name: Wilson, Brian S Date Due: 11:59 PM Eastern on 04/29/2017	Response Status: Not Started Create Response	View/Print	?
SSN: 560-34-8479 Name: Wilson, Charlie Date Due: 11:59 PM Eastern on 04/29/2017	Response Status: Not Started Create Response	View/Print	?

No separation requests found for other PINs.

Note: Requests remain on the SIDES E-Response Website for 35 days.

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At the top left is a “Search by SSN” box. If the list of pending requests is lengthy, you can locate a specific request by entering the SSN to which it relates in this box and clicking [Search].

The list shows each claimant’s name, SSN, and the date and time that the separation information response is due to the requesting state. It is important that each response be submitted by its due

date to ensure that the information can be used to determine whether the individual is eligible for unemployment benefits. **Not responding by the due date by adversely affect your account.**

Response Status Buttons. The buttons shown for each pending request indicates its status.

- If the response has not yet been started, the button will show [Create Response]
- If the response is in progress, you can choose the buttons [Edit Response] or [Delete Response]
- If the response has been submitted, the button will show [Create Amendment].
- **Requests will on remain on the website for 35 days after the request date.**

5.1 Creating a Response

This section takes you step-by-step through the process of creating and submitting a response. At any point in the process, you can save your work and come back to it later. When you login to work on it later, click the [Edit Response] button which will take you back to the beginning of the response pages. You also have the option of deleting all of the information that you have entered and starting fresh by clicking the [Delete Response] button.

Note: Only a limited character set (numbers and letters) may be keyed into text fields. Use care when cutting and pasting from other applications, such as Microsoft Word. Invisible characters such as a paragraph symbol may be pasted into the text field that will cause an error message to be displayed.

To begin work on a response, click [Create Response]. You will then see the **CLAIMANT AND EMPLOYER IDENTIFICATION** page. A sample is shown below.

Rest of Page Intentionally Blank

FEIN: 111111111
 SEIN: 111111111

[Sign out](#)

Response for: SSN: 560-34-8476 Claim Number: 388620 Name: Wilson, Jim
 Request Date: 04/10/2017 Date Due: 04/29/2017 Claim Effective Date: 04/19/2015

Claimant and Employer Identification

Requesting State

State: **CA**

Agency: **Park Oaks**

Phone: **6085264400**

Fax: **6085269394**

Claimant Provided Information

SSN: **560-34-8476**

Name: **Wilson, Jim**

Other Last Name Used:

State Claim Number: **388620**

Benefit Year Begin Date: **2011-04-19**

Type of Claim: **New Initial Claim**

Employer Information

Information of Record

Employer Name: **JC PENNEY COMPANY INC**

State Employer Account Number: **0065560**

Federal Employer Identification Number: **794741844**

Employer Type: **Last Employer**

Check here if employer information is incorrect ?

Check here if the claimant worked under any other SSN or Name ?

Employer Status

Check here if claimant did NOT work for this employer ?

Check here if TPA receiving this request does NOT represent this employer

TPA = Third Party Administrator

Cancel
Save
Main Menu
Next >

Go to Page Claimant and Employer Identification Go

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This page includes a series of pre-populated fields including “Requesting State” information and “Claimant Provided Information.” This information cannot be changed.

“Employer Information” is also pre-filled; however, if “Claimant Provided Information” or “Employer Information” is incorrect, you may supply corrected information. Select the checkbox(es) next to “Check here if employer information is incorrect” and/or “Check here if the claimant worked under any other SSN or Name”.

Immediately below this section, there is an opportunity to check a box indicating that the request has been sent to you in error either because the individual did not work for your business or, if you are a Third Party Administrator (TPA), that you do not represent the employer for whom the individual worked.

After completing the **CLAIMANT AND EMPLOYER IDENTIFICATION** page, click [Next] to continue your response. If you selected a check-box to provide corrected “Claimant Provided Information” or “Employer Information”, the **CLAIMANT AND EMPLOYER IDENTIFICATION**

CHANGE page is displayed. Enter information into the “Corrections (if different)” fields and the changed data will be routed to the appropriate State UI agency for review and handling.

Response for: SSN: 560-34-8476 Claim Number: 388620 Name: Wilson, Jim
Request Date: 04/10/2017 Date Due: 04/29/2017 Claim Effective Date: 04/19/2015

Claimant and Employer Identification Change

Claimant Information

	Information of Record	Corrections(if different)
SSN:	560-34-8476	<input type="text"/> ?
Claimant Name used to file claim:	Wilson, Jim	<input type="text"/> ?
Other Name Used:		<input type="text"/> ?

Employer Information

	Information of Record	Corrections(if different)
Employer Name:	JC PENNEY COMPANY INC	<input type="text"/> ?
State Employer Account Number:	0065560	<input type="text"/> ?
Federal Employer Identification Number:	794741844	<input type="text"/> ?

< Back Cancel Save Main Menu Next >

Go to Page: Claimant and Employer Identification Change Go

TPA = Third Party Administrator

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Rest of Page Intentionally Blank

The **PREPARER INFORMATION PAGE** is the next page to be filled out in the separation response sequence. Enter the information about the entity and person preparing the response. After reviewing/completing this page, click [Next].

Response for: SSN: 560-34-8476 Claim Number: 388620 Name: Wilson, Jim
Request Date: 04/10/2017 Date Due: 04/29/2017 Claim Effective Date: 04/19/2015

Preparer Information
Save completed successfully.

Enter Information:

Employer TPA

*Who is providing this response?
If the preparer is a TPA, what is the TPA company name?

*Name of the person preparing this response:

*Job title of the person preparing this response:

*Preparer's telephone number plus extension: (Only digits, omit parenthesis, dashes or spaces)

*Preparer's e-mail address:

Preparer's Fax number: (Only digits, omit parenthesis, dashes or spaces)

< Back Cancel Save Main Menu Next >

Go to Page Preparer Information Go

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Rest of Page Intentionally Blank

If there are any attachments on the request for separation, the **ATTACHMENTS FROM UI AGENCY** page is displayed. Attachments may be informational only or actionable. Click the [Download] button to retrieve any attachments. A sample of the **ATTACHMENTS FROM UI AGENCY** page is shown below.

Response for: SSN: 560-34-8476 Claim Number: 388620 Name: Wilson, Jim
Request Date: 08/17/2017 Date Due: 08/28/2017 Claim Effective Date: 09/20/2015

Attachments from UI Agency

Informational only attachments:

Document Name	Document Extension	Size	
Instructions.tif	RTF	5,840	Download

< Back Cancel Save Main Menu Next >

Go to Page: [Go](#)

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* indicates a Required Field

Enter any additional or corrected information.



Documents may be attached to this Separation Information Request. Note: Some documents may require your response.

Note: Selecting the **BACK**, **NEXT** or **GO** buttons will **SAVE** the data entered before moving away from this screen. Saved data can be changed later if necessary. If you do not want to save the data entered on this screen, press the **CANCEL** button before selecting **BACK**, **NEXT** or **GO**.

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After reviewing/completing this page, click [Next] which takes you to the **EMPLOYMENT INFORMATION** page. You will enter information about the claimant's employment and earnings with your business on this page, a sample of which is shown below.

Rest of Page Intentionally Blank



 FEIN: 111111111
 SEIN: 111111111

Response for: SSN: 560-34-8476 Claim Number: 388620 Name: Wilson, Jim
 Request Date: 04/10/2017 Date Due: 04/29/2017 Claim Effective Date: 04/19/2015

Employment Information

Claimant's Job Title: ?
 Was this seasonal employment? Yes No ?
First day of work: **Claimant Provided:** ?
*** Last day of work:** **Claimant Provided:** ?
If the date the claimant was separated from employment is different than the actual last day of work, what was the date of separation? ?
What was the claimant's average weekly wage? ?
What was the average number of hours the claimant worked per week? ?
Claimant Provided Reason for Separation: Laid Off/Lack of Work
 Claimant did not provide a reason for leaving.

*** Employer's Reason for Claimant's Separation:** ?
If the reason for separation is a Labor Dispute, is the claimant not working due to a strike or a lockout? Strike Lockout ?
If the reason for separation was retirement, was the claimant's retirement mandatory? Yes No ?

Go to Page

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The separation reasons available to you from the “Employer’s Reason for Claimant’s Separation” drop-down list are below. If you know the specific number associated with your reason, you may simply type the number of your choice to jump to that reason in the list.

- Temporary Layoff
- Laid Off/Lack of Work
- Fired/Discharged
- Vacation/Holiday Shutdown
- Asked to Resign
- Voluntary Quit/Separation
- School Employee Between Semesters or Terms, Likely to Return
- School Employee Between Semesters or Terms, Not Likely to Return
- Still Employed, Full Time
- Still Employed, Part Time
- Still Employed, Hours Reduced by Employer
- On Call or Temporary Status
- Leave of Absence
- Retirement
- Disciplinary Suspension
- Labor Dispute
- Professional Athlete Between Sports Seasons
- Disaster Related Separation
- Not Listed Above (Use only if the situation does not fit a reason listed above)
- Refuse to Provide

After selecting one of the reasons from the list above, you will be directed to additional pages and asked a series of questions related to that particular reason.

If after you begin answering the questions, you decide that another reason may be more accurate, you may go back and change the reason selected. If you do so, you will see the **CHANGE REASON FOR SEPARATION** page asking you to confirm the change and warning that your answers to the questions related to the prior reason will be deleted.

SIDES E-Response SOUTH CAROLINA DEPARTMENT OF EMPLOYMENT AND WORKFORCE FEIN: 111111111 SEIN: 111111111 Sign out

Change Reason For Separation

You have chosen to change the Reason for Separation selected. The Reason for Separation determines the follow-on questions asked. Responses to questions pertaining to the Reason for Separation being changed will be deleted.

Do you want to continue?

Cancel Continue

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Warning: If you change the reason for separation previously entered for this claimant all of the information you entered pertaining to the original reason for separation will be deleted. However, all general information entered on screens that precede the Reason for Separation screen shall remain.

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After entering this information, click [Next] which will take you to the **ADDITIONAL SEPARATION INFORMATION** page.

Rest of Page Intentionally Blank

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* indicates a Required Field

Enter all applicable information using the space provided.

Please select **SAVE** to view any newly required fields due to data input into the system since the last **SAVE**.

Note: Selecting the **BACK**, **NEXT** or **GO** buttons will **SAVE** the data entered before moving away from this screen. Saved data can be changed later if necessary. If you do not want to save the data entered on this screen, press the **CANCEL** button before selecting **BACK**, **NEXT** or **GO**.

Response for: SSN: 560-34-8476 Claim Number: 388620 Name: Wilson, Jim
Request Date: 04/10/2017 Date Due: 04/29/2017 Claim Effective Date: 04/19/2015

Additional Separation Information

Claimant reported return to work date: **2017-05-04**

* Does the claimant have reasonable assurance of returning to work? Yes No ?

If yes, what date do you expect the claimant to return to work? ?

If the claimant is still doing some work, is the claimant working all available hours? Yes No ?

If no, why isn't the claimant working all available hours?

* Will the claimant receive any of the following compensation on or after the last day of work: ?

Severance	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Separation Pay	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Vacation	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Holiday	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Profit Sharing	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Wages In Lieu of Notice	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Back Pay	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Bonus Pay	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Residual Pay	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Commissions	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sick Pay	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Disability	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Not Listed Above	<input type="checkbox"/> Yes	<input type="checkbox"/> No

* Will or is the claimant receiving a company pension? Yes No ?

< Back Cancel Save Main Menu Next >

Go to Page: Go

On this page you are asked to provide return to work information and specify if the claimant will receive any of the following compensation on or after the last day of work. Below are the compensation types available to you.

- | | |
|-------------------------|------------------|
| Severance | Back Pay |
| Separation Pay | Residual Pay |
| Vacation | Commissions |
| Holiday | Sick Pay |
| Profit Sharing | Disability |
| Bonus Pay | Not Listed Above |
| Wages In Lieu of Notice | |

Please also specify if the claimant is receiving a company pension.

After completing the **ADDITIONAL SEPARATION INFORMATION** page, click [Next] which will take you to the **COMPENSATION AFTER SEPARATION** – page(s) for the remuneration types that were selected. Note that **COMPENSATION AFTER SEPARATION** pages are only displayed if you selected “Yes” to a compensation type or company pension. A sample **COMPENSATION AFTER SEPARATION** page is below.

Response for: SSN: 560-34-8476 Claim Number: 388620 Name: Wilson, Jim
Request Date: 04/10/2017 Date Due: 04/29/2017 Claim Effective Date: 04/19/2015

Compensation After Separation - Severance

Severance

- Was the severance pay allocated to a specific period of time? Yes No
- If Yes - What is the beginning date for the severance pay allocation?
- What is the ending date for the severance pay allocation?
- What is the frequency of the claimant's severance pay after separation? Select One
- What is the amount of the severance pay per period?
- What date will or was the severance pay paid?

< Back Cancel Save Main Menu Next >

Go to Page Compensation After Separation - Severance Go

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After completing all the questions related to compensation after separation, click [Next] which will take you to the **COMPENSATION AFTER SEPARATION SUMMARY** page. You may select an individual compensation after separation, and edit or delete it from the summary page.

Rest of Page Intentionally Blank

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* indicates a Required Field

Enter all applicable information using the space provided.

Please select **SAVE** to view any newly required fields due to data input into the system since the last SAVE.Note: Selecting the **BACK**, **NEXT** or **GO** buttons will **SAVE** the data entered before moving away from this screen. Saved data can be changed later if necessary. If you do not want to save the data entered on this screen, press the **CANCEL** button before selecting **BACK**, **NEXT** or **GO**.Response for: SSN: 560-34-8476 Claim Number: 388620 Name: Wilson, Jim
Request Date: 04/10/2017 Date Due: 04/29/2017 Claim Effective Date: 04/19/2015**Compensation After Separation Summary**

Review/Edit Entries.

Summary of Compensation after Separation						
Select	Type	Amount Per Period	Period Frequency	Date Issued	Employer Allocation	
					Begin Date	End Date
<input type="radio"/>	Severance	\$1,000.00	Lump Sum	03/25/2017		
<input type="radio"/>	Pension	\$10,000.00	Lump Sum	03/31/2017		

[Edit](#) [Delete](#)

[< Back](#)[Main Menu](#)[Next >](#)Go to Page [Go](#)After completing your review, click [Next] which will take you to the **ATTACHMENTS** page.**Rest of Page Intentionally Blank**

Response for: SSN: 560-34-8476 Claim Number: 388620 Name: Wilson, Jim
Request Date: 04/10/2017 Date Due: 04/29/2017 Claim Effective Date: 04/19/2015

Attachments

Do you have any attachments (up to 10 documents) which support your statement regarding the Reason for Separation?

Acceptable file formats are: csv, pdf, rtf, tiff (tif), txt.

If Yes, go to Step 1 and enter each attachment separately (See HELP on the left side of this screen).

If No, go to the NEXT page.

WARNING - The total size of all attachments is limited to a maximum of 5 megabytes. Scanned PDFs have the possibility of being very large but by decreasing the dpi size, scanning it in as PDF text or removing some of the extended features of a PDF the size can be greatly reduced. Another option would be to scan it in as a TIFF (TIF) document instead of a PDF.

Step 1: Add Attachments.

> Attachment File Name (See **WARNING** above): Browse... ?

> Describe the document being attached (e.g. Warning Documents, Notice of Separation) - Description is required to submit your response: ?

Note: Any data in the above fields will be lost unless the 'Save to Table' button is selected to add to or edit the Summary Table below. 'Save to Table' before moving from this screen to save data.

Step 2: Review/Edit Entries.

Select	Document Description	Document Type	Size (bytes)	Attachment
No Records Found.				

Go to Page

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* Indicates a Required Field

> indicates a Required Field if Step 1 is filled in

If an attachment to the separation request reply is in Microsoft Word format, choose **Save As** from the Microsoft Word menu and convert it to RTF (Rich Text Format) or TXT (text) format. If the attachment is in Excel format, choose **Save As** and convert it to CSV (comma delimited) format.

Enter Attachment Information then click on the Save To Table button. Entry will move to Table and clear the data fields.

Add additional attachment information. Repeat as needed.

To view or edit an Attachment in the table, click the radio button to the left of the Attachment and then click on the View/Edit button. The information will appear in the data entry section above and may be edited. Then, Save to Table.

To remove an Attachment from the table, click on the radio button to the left of the Attachment and click on the Delete button.

If you have attachments that support the reason for separation you have provided you may enter them here. The following file types can be attached to the Separation Request or Response:

Type	Description	Programs to Use to Access
RTF	A rich text format document	Most word processing applications
PDF	An Adobe PDF	Adobe PDF Reader or Adobe PDF
TXT	A text file	All word processing applications and all text editors (Notepad, vi, etc...)
TIFF, TIF	A tiff/tif image file	Graphical tools and picture tools

Type	Description	Programs to Use to Access
CSV	A comma-separated values file	Most spreadsheet programs and database management systems

After attaching any supporting documents click [Next] to go to the **SUBMISSION** page. A sample is shown below.

The [Submit to State] button will be grayed out until the system has determined that the Separation Response is fully compliant with the data input validation and business rules.

If there are errors with the business or validation rules, you will see links on this screen displaying the screen and field name in question. See SUBMISSION screen with errors below.

Simply click on the link in order to be directed to the screen and error.

Rest of Page Intentionally Blank

Response for: SSN: 560-34-8475 Claim Number: 012345678901234567 Name: Smith, John T., Jr.
Request Date: 04/10/2017 Date Due: 04/29/2017 Claim Effective Date: 04/19/2015

Submission

[View/Print](#)

Please correct the following errors:

Amended Response - Amended Response Description is required

[< Back](#) [Main Menu](#) [Submit to State](#)

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When the Separation Response has been successfully validated, you can submit it to the State UI agency.

You may print the Separation Response at any time by clicking the [View/Print](#) link. It will display in Adobe PDF format and can be printed from an Adobe Acrobat reader. You will be able to see all information you entered up to the time of printing as well as the information on the Separation Request.

As with other important steps in the editing of a Separation Response, a warning screen will appear to make sure you are fully prepared to submit to the State.

After you click [Submit] you will see a **CONFIRMATION** page, sample below, which provides your confirmation number. Keep this confirmation number in your files. The confirmation number will also appear at the top of the PDF under the [View/Print](#) link. We strongly recommend you print a copy of your submission for your records. You may also save an electronic copy of the PDF document; however the PDF document is deleted from the web site after 35 days.

The screenshot shows the SIDES E-Response website interface. At the top, there is a navigation bar with the SIDES E-Response logo on the left, the South Carolina Department of Employment and Workforce logo in the center, and FEIN: 111111111 and SEIN: 111111111 on the right. A 'Sign out' button is also present. Below the navigation bar, the page title is 'Submit Confirmation'. The main content area displays the text: 'Response for: SSN: 560-34-8475 Claim Number: 012345678901234567 Name: Smith, John T., Jr.' followed by 'Submit Confirmation'. Below this, it states 'You have chosen to submit your Separation Information Response to the State Unemployment Insurance Office'. A question is posed: 'Do you want to submit this response?'. Two buttons are provided: '< Back' and 'Yes'. A note at the bottom of the main content area reads: 'After submitting this response, please wait for the confirmation number.' The footer of the page contains the text: 'Copyright © 2008 - 2014, National Association of State Workforce Agencies. All Rights Reserved.' and the page number '20'.

6 Amending a Submitted Response

After you submit a response, it remains on the SIDES E-Response website for 35 days from the date of the request; during that period you can correct the response or add additional information. **However, any changes made to the response after the due date for submission to the requesting state agency may or may not be used in determining the individual's eligibility for unemployment benefits depending on state policy.**

To amend a response, log-in to E-Response using the appropriate PIN (either a permanent PIN issued by the state to which the response was submitted or a one-time PIN linked to the request for which the response was submitted.) Identify the case on the SEPARATION INFORMATION REQUESTS page and click [Create Amendment]. You will then see the same series of screens that were presented when you created your submitted response. Make whatever changes are needed on those screens. Before submitting the Amended Response, you will be asked to explain why you are amending your previous submission and what has changed. See sample AMENDED RESPONSE page below.

[Users Guide](#)

[Help with E-Response](#)

* indicates a Required Field

Enter all applicable information using the space provided.

Note: The **Back**, **Submit** and **Go** buttons will act as an implicit Save. If you do not want your data saved, please press Cancel before selecting **Back**, **Submit** or **Go**.

Response for: SSN: 560-34-8475 Claim Number: 012345678901234567 Name: Smith, John T., Jr.
Request Date: 04/10/2017 Date Due: 04/29/2017 Claim Effective Date: 04/19/2015

Amended Response

Amended Response Number

1

* Why is the response being amended and what changed?



< Back

Cancel

Save

Main Menu

Next >

Go to Page Amended Response

Rest of Page Intentionally Blank