

# Disaster Unemployment Assistance (DUA)

**Robert T. Stafford Disaster Relief and  
Emergency Assistance Act**

LOUISIANA WORKFORCE COMMISSION

(See Instructions on Reverse Side)

## Weekly Request for Assistance

FEMA DR

This Section is Completed by Job Center Staff		
Week Ending Date (xx/xx/xxxx)	Name (First, Middle, Last)	SSN (xxx-xx-xxxx)

### This Section is Completed by the Applicant

For the week claimed above, answer the following questions:

1. Did you work for anyone, earn wages, or were you self-employed during the week?  YES  NO
  - a. Did you work full-time or perform full customary services?  YES  NO
  - b. Enter the gross wages you earned, or if self-employed, enter all gross income received, during the week:
 

\$
----
2. Did you refuse to accept work or a job referral?  YES  NO
3. Did you receive or apply for Workers' Compensation?  YES  NO
4. Did you receive or apply for private income protection for loss of wages due to illness or disability?  YES  NO
5. Did you receive a supplemental unemployment benefit pursuant to a collective bargaining agreement?  YES  NO
6. Did you receive a retirement pension, ir excluding social security, not previously reported to this agency?  YES  NO
7. Did you attend school or a training program, not previously reported to this agency?  YES  NO
8. Other than for reasons that were the direct result of this disaster, were you able and available to work each day of the week?  YES  NO
9. Are you still unemployed as the direct result of this disaster?  YES  NO

Go to  
Question  
2

**Note: If you are required to make an active search for work, record your weekly work search in your UI Benefits Rights Handbook (LDOL 310).**

**I hereby certify that these statements are true and correct. And for the above week I am not claiming or receiving from any other state any benefits related to my unemployment. I understand that the Law provides penalties for false statements.**

Signature	Date
-----------	------

## INSTRUCTIONS FOR COMPLETING FORM DUA 28

You are claiming benefits on a weekly basis. The week begins on Sunday and ends on Saturday. You should complete and mail your "DUA Weekly Request for Assistance" immediately after the week has ended, but not before the week ending date. After each week ending date, you will have 14 calendar days to claim your benefits. Failure to file your weekly claim in a timely manner may result in a denial of benefits.

You must answer all questions as they pertained to you for the week being claimed. Failure to properly complete this form may result in a delay or denial of payment of benefits.

Additional forms may be obtained from our website at [www.laworks.net](http://www.laworks.net). Mail completed forms to:

LOUISIANA WORKFORCE COMMISSION  
U.I. ADMINISTRATION  
DUA UNIT  
P.O. BOX 94094  
BATON ROUGE, LA. 70804-9094