West Virginia Unemployment Assistance Claim Template ___ **Claimant Information:** - Full Name: - Full Name: ______ - Address: _____ - City, State, Zip: _____ - Phone Number: - Email Address: ___ **Employment Information:** - Previous Employer: - Employer Address: - City, State, Zip: _____ - Phone Number: _____ - Dates of Employment: From _____ To _____ - Job Title: ___ **Claim Details:** - Reason for Unemployment: - Are you able and available for work? (Yes/No): - Have you applied for other benefits? (Yes/No): - If yes, please specify: ___ **Additional Information:** - Are you currently enrolled in any training or coursework? (Yes/No): - If yes, please provide details: _____ ___ **Certification:** I certify that the information provided is true and accurate to the best of my knowledge. - Claimant Signature: _____ - Date: _____ ___ **Submission Instructions:** Please submit this form via [insert submission method, e.g., online portal, email, mail] to the West Virginia Division of Unemployment Compensation. ___ **For Official Use Only:** - Claim Number: _____ - Date Received: ___ **Contact Information:** For assistance or questions, contact the West Virginia Division of Unemployment Compensation at [insert contact information]. ____