



## 關於如何完成回歸工作補充計劃 (RTWSP) 申請的說明

### 回歸工作補充計劃 (RTWSP)

警告：任何人製造或使用虛假記錄或陳述材料進行索賠，均須承擔高額賠償金以及不少於\$5,500 及不超過\$11,000 的民事罰款加上根據“虛假聲明法”的訴訟費用，政府法規第 12650-12656 部分

在你開始前，請準備如下信息：

- ✓ 您的補充工作轉換憑證 DWC-AD 10133.32 表單，已完成的憑證，包括您的理賠管理員簽署的服務證明
- ✓ 補充工作轉換憑證的服務證明日期 DWC-AD 10133.32 (SJDB) 審核：10/1/2015
- ✓ DWC ADJ 案例號碼
- ✓ 保險公司的索賠號碼
- ✓ 任何以前的 RTWSP 有利於付款信息

### 填寫個人信息

### 5 步驟之 1

\*說明是必填項

1. \*名
2. MI(中間名)
3. \*姓
4. \*出生日期 (月/日/年)
5. \*SSN/ITIN (999-99-9999)
6. \*地址
7. \*城市
8. \*州 (從下拉表中選擇)
9. \*郵政編碼
10. 電子郵箱
11. 電話號碼

The screenshot shows a web form titled "INDIVIDUAL INFORMATION" which is "Step 1 of 5". At the top, there is a progress bar with five steps: "Individual Information", "Injury History", "Upload SJDB", "Certification", and "Review and Submit". The "Individual Information" step is highlighted with an orange arrow. The form contains the following fields:

- \*First Name, MI, \*Last Name
- \*Date of Birth, \*SSN / ITIN
- \*Address
- \*City, \*State (dropdown menu), \*Zip Code
- Email Address, Phone Number

A blue "Continue" button is located at the bottom left. A note at the bottom states: "\* indicates a required field".

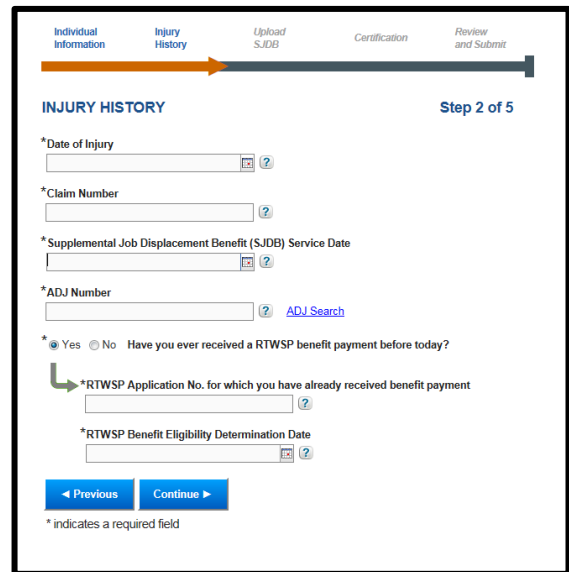
\*\*聯繫信息不是必填項，但如存疑問將有作用

### 填寫受傷歷史

### 5 步驟之 2

\*說明是必填項

1. \*受傷日期
2. \*索賠號碼
3. \*補充工作轉換福利 (SJDB) 服務日期 (月/日/年)
4. \*ADJ 號碼
5. \*之前的 RTWSP 福利付款  
如果是, 完成下述信息
  - a. RTWSP 申請號碼(RTW#####)
  - b. RTWSP 福利資格填寫日期 (月/日/年)



Individual Information Injury History Upload SJDB Certification Review and Submit

**INJURY HISTORY** Step 2 of 5

\*Date of Injury

\*Claim Number

\*Supplemental Job Displacement Benefit (SJDB) Service Date

\*ADJ Number  [ADJ Search](#)

Yes  No Have you ever received a RTWSP benefit payment before today?

\*RTWSP Application No. for which you have already received benefit payment

\*RTWSP Benefit Eligibility Determination Date

[Previous](#) [Continue](#)

\* indicates a required field

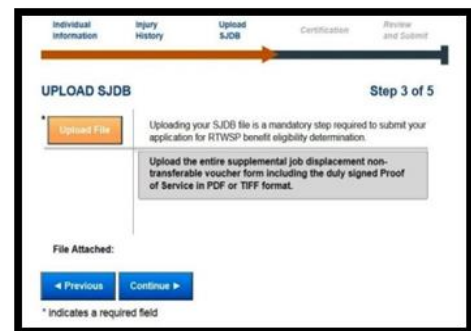
### 上傳 SJDB 憑證

### 5 步驟之 3

\*上傳一份你的 SDJB 憑證副本, 用 PDF 或 TIFF 格式。

- 上傳完成的憑證, 包括您的理賠管理員簽名的服務證明
1. 點擊**上傳文件**按鈕
  2. 點擊**瀏覽**按鈕并找到你的文件副本
  3. 選擇文檔后點擊**開始**按鈕
  4. 確認你的文檔名稱并點擊**增加**按鈕

\*\*你的文件將出現在**添加文檔**旁邊



Individual Information Injury History Upload SJDB Certification Review and Submit

**UPLOAD SJDB** Step 3 of 5

Uploading your SJDB file is a mandatory step required to submit your application for RTWSP benefit eligibility determination.

Upload the entire supplemental job displacement non-transferable voucher form including the duly signed Proof of Service in PDF or TIFF format.

File Attached:

[Previous](#) [Continue](#)

\* indicates a required field



Individual Information Injury History Upload SJDB Certification Review and Submit

**UPLOAD SJDB** Step 3 of 5

Uploading your SJDB file is a mandatory step required to submit your application for RTWSP benefit eligibility determination.

Upload the entire supplemental job displacement non-transferable voucher form including the duly signed Proof of Service in PDF or TIFF format.

File Attached: Voucher.pdf.pdf

[Previous](#) [Continue](#)

\* indicates a required field



# 關於如何完成回歸工作補充計劃 (RTWSP) 申請的說明

## 點擊框進行確認

\*說明是必填項

\*確認居民

選擇下面之一：

- 加利福尼亞州居民，有資格在加利福尼亞州營業，或在加利福尼亞州維持永久營業地。
- 加利福尼亞非居民，向非居民提供的服務付款可能需要繳納國家所得稅扣款。

\*偽證處罰

- 根據加利福尼亞州法律的偽證處罰，我證明（或聲明）上述是真實和正確的。我證明這一點：**\*\*當前日期將出現**

## 審核并提交

查看表單上的信息，可以通過單擊編輯鏈接或部分選項卡進行更正。一旦信息驗證正確，請點擊提交按鈕

## 5 步驟之 4

**CERTIFICATION** Step 4 of 5

\*Residency Certification ?

California Resident  California Nonresident

Qualified to do business in California or maintains a permanent place of business in California. Payments to nonresidents for services may be subject to State income tax withholding.

\*Penalty of Perjury

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

I certify this on: 03/23/2015

[< Previous](#) [Continue >](#)

\* Indicates a required field

## 頁面 5 之 5

**REVIEW AND SUBMIT** Step 5 of 5

**INDIVIDUAL INFORMATION** EDIT INDIVIDUAL INFORMATION

QUESTION ANSWER

Full Name: John A Smith

Date of Birth: 01/01/1900

SSN / ITIN: \*\*\*-\*\*-9999

Address: 1 Main Street, Oakland, CA 99666

Email Address: johnsmith@email.com

Phone Number: (510) 555-5555

**INJURY HISTORY** EDIT INJURY HISTORY

QUESTION ANSWER

Date of Injury: 01/01/2013

Claim Number: WC-123456

SJD B Service Date: 01/01/2014

ADJ Number: ADJ1234567

Have you ever received a RTWSP benefit payment before today? Yes

RTWSP Application No: RTW1000000

RTWSP Benefit Eligibility Determination Date: 06/15/2013

**UPLOAD SJD B** EDIT UPLOAD SJD B

QUESTION ANSWER

File Attached: Voucher.pdf

**CERTIFICATION** EDIT CERTIFICATION

QUESTION ANSWER

Residency Certification: California Resident - Qualified to do business in California or maintains a permanent place of business in California.

Penalty of Perjury Certification: I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct. I certify this on: 03/23/2015

[Submit](#)



## 關於如何完成回歸工作補充計劃 (RTWSP) 申請的說明

### 提交確認頁

一旦您的申請成功提交，您將被分配一個 RTW 號碼。您可以打印出您的申請表的副本，以備記錄。資格確定將在 60 天內完成。

#### Your application was submitted successfully!

Thank you for your interest in the Return to Work Supplement program, your application has been successfully submitted on 03/23/2015; an eligibility determination will be made within the next 60 days and a benefit notice indicating whether or not you qualify for the RTWSP benefit will be mailed to you. To avoid delays in processing your application, please DO NOT submit a second application. Should you have any questions please contact the RTWSP unit at 510-286-0787 or RTWSP@dir.ca.gov.

Below are links to your Application Package. Please print this page and click the links to view and print a copy of the documents for your records.

Your RTWSP Application Number is: RTW1000487.

#### Application Package

- Application PDF
- SJDB Voucher PDF

[Click here to Print this Page](#)

RTW 號碼樣本

收集個人信息的隱私通知：勞資關係部將使用以下收集的個人信息來確定您是否符合“勞動法”第 139.48 條所規定的資格並支付其授權的福利。您的傷病歷史將用於確認您的身份，並確定您的資格。您必須提供您的社會保險號碼 (SSN) 或聯邦稅務識別號碼 (FEIN) 以獲得此利益 (8 C.C.R. § 17306)。您的 SSN 或 FEIN 將用於將您的申請與正確的回歸工作文件相匹配，這些文件必須在資格確定過程中進行審查，並將提交給州管理者辦公室進行付款和會計處理。沒有提供你的名字；地址；或 SSN 或 FEIN 將導致拒絕提供福利。該部門可能會分享這些信息以進行一般執法或研究工作。加利福尼亞的“信息實務法”（民法典第 1798 條及以下各節）規定了該部門對個人信息的收集和使用。該部門的隱私政策，包括隱私官員的聯繫信息，可在 [http://www.dir.ca.gov/od\\_pub/privacy.html](http://www.dir.ca.gov/od_pub/privacy.html)。警惕：你的電腦是否安全？