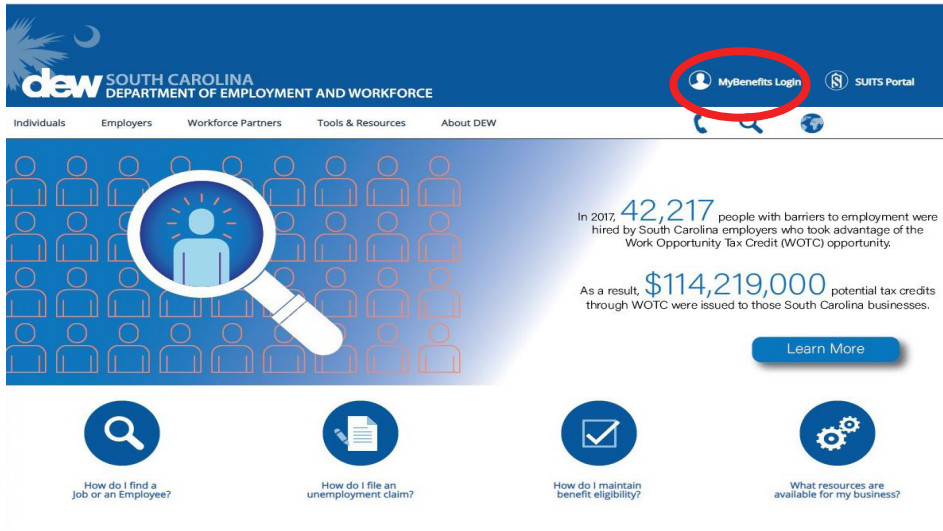
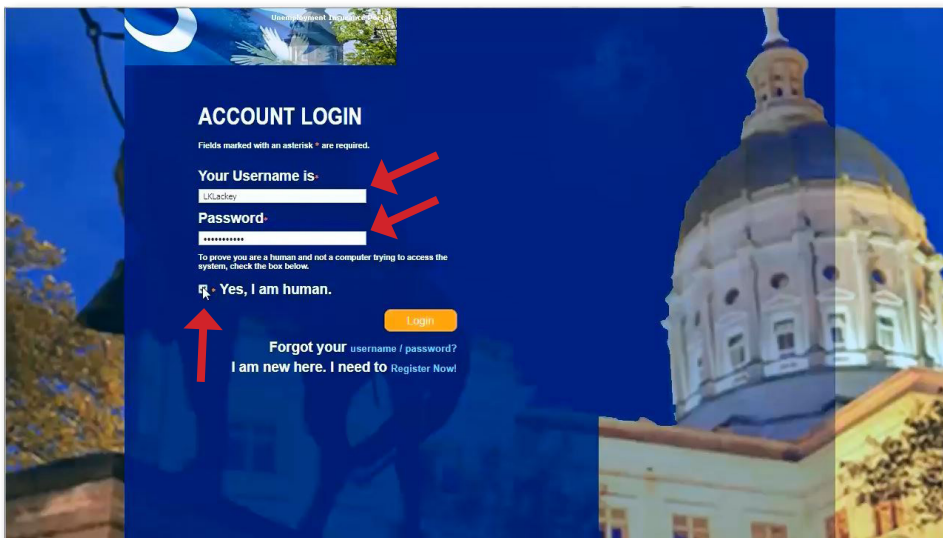




How to Register in Your New MyBenefits Portal Account



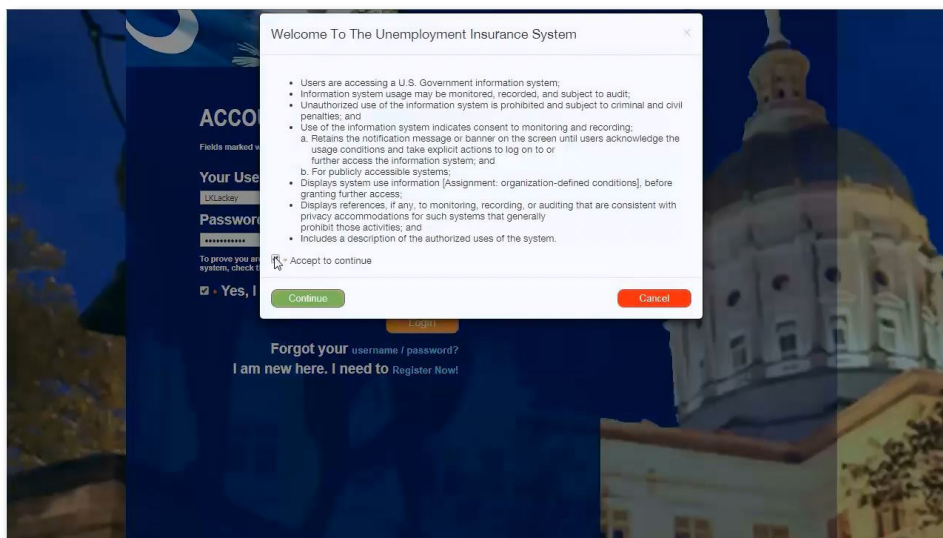
Go to dew.sc.gov to begin your Unemployment Insurance (UI) benefits process. This is the main website for the S.C. Department of Employment and Workforce. On this website you can find information about the UI process as well as tutorials and guides to help you navigate through the Claimant Self-Service (CSS) portal. From any screen on this site you can click the “MyBenefits Login” on the top right side of the screen to go directly to the CSS portal.



You will complete your online registration after you have created a customer self service account. This involves confirming or entering personal data, address, contact and demographic information.

Enter your username and password that you set up in the system and click “Yes, I am human.” Then, click the Login button.

Please note that your username and password from the old system will not work. You must create an account in the new system before you can register.



The system will display a message about using the new portal. Please read the information and then click the check box to accept the terms of use. This will make the “Continue” button active to click to the next page.

If you click “Cancel,” you will be returned to the account login page.



CLAIMANT REGISTRATION: PERSONAL INFORMATION

deW SOUTH CAROLINA
DEPARTMENT OF EMPLOYMENT AND WORKFORCE

LINDA K LACKEY CLAIMANT ID: 10002071

Personal Information Address Information Contact Information Demographics Info

ADVISEMENT: Please do not use your Internet browser "Back" buttons. In the event you need to return to a previous page, please utilize the navigation buttons or the menu links above.

Please provide your Personal information

Fields marked with an asterisk * are required.

* Date of Birth: 03/22/1971

* First Name: LINDA

Middle Initial: K

* Last Name: LACKEY

Suffix:

Other Last Name Used (1): Note: Only list other last names used in the last 18 months.

Other Last Name Used (2):

Other Last Name Used (3):

Other SSN Used: (999-99-9999)

* Gender: Female

Mother's Maiden Name: Hester

You will be directed to the Personal Information tab. Please remember that all fields marked with an asterisk (*) must be completed in order to proceed.

Also note that if you need to go back to a previous screen, DO NOT use your browser's back button. Instead, use the tabs at the top.

CLAIMANT REGISTRATION: CONTACT

deW SOUTH CAROLINA
DEPARTMENT OF EMPLOYMENT AND WORKFORCE

LINDA K LACKEY CLAIMANT ID: 10002071

Personal Information Address Information **Contact Information** Demographics Info

ADVISEMENT: Please do not use your Internet browser "Back" buttons. In the event you need to return to a previous page, please utilize the navigation buttons or the menu links above.

Please provide your Contact information

Fields marked with an asterisk * are required.

Primary Phone: 803-111-2222 (xxx-xxx-xxxx) Ext.

Alternate Phone: (xxx-xxx-xxxx) Ext.

Cell Phone: (xxx-xxx-xxxx)

Fax Number: (xxx-xxx-xxxx)

E-mail Address: LKLackey@yahoo.com (xxx@yyy.zzz)

Reenter E-mail Address: LKLackey@yahoo.com (xxx@yyy.zzz)

* Preferred Contact Method:

Complete the Personal Information, Address Information and Contact Information screens.

At the bottom of the Contact screen, you will be prompted to identify your preferred method of contact.

CLAIMANT REGISTRATION: CONTACT

deW SOUTH CAROLINA
DEPARTMENT OF EMPLOYMENT AND WORKFORCE

LINDA K LACKEY CLAIMANT ID: 10002071

Personal Information Address Information **Contact Information** Demographics Info

ADVISEMENT: Please do not use your Internet browser "Back" buttons. In the event you need to return to a previous page, please utilize the navigation buttons or the menu links above.

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Primary Phone: 803-111-2222 (xxx-xxx-xxxx) Ext.

Alternate Phone: (xxx-xxx-xxxx) Ext.

Cell Phone: (xxx-xxx-xxxx)

Fax Number: (xxx-xxx-xxxx)

E-mail Address: LKLackey@yahoo.com (xxx@yyy.zzz)

Reenter E-mail Address: LKLackey@yahoo.com (xxx@yyy.zzz)

* Preferred Contact Method: E-mail

When you make your selection, you will be notified that communication from DEW will be posted to the My Documents section of the Claimant Homepage and that you will be notified via the method of your choosing. In order to avoid delay or denial of your unemployment benefits, please make sure your information is up to date.



CLAIMANT REGISTRATION: DEMOGRAPHICS

dew SOUTH CAROLINA
DEPARTMENT OF EMPLOYMENT AND WORKFORCE

LINDA K LACEY CLAIMANT ID: 10002071

Personal Information Address Information Contact Information **Demographics Info**

ADVICE: Please do not use your Internet browser "Back" buttons. In the event you need to return to a previous page, please utilize the navigation buttons or the menu links above.

Please provide your Demographic information
Fields marked with an asterisk * are required.

* U.S. Citizen : ☐ Yes ☐ No

Alien Registration Number :

* Preferred Language : English Note: If Other, please enter Preferred Language

* Do you need an interpreter ? ☐ Yes ☐ No This service is supplied at no cost to you

* Education Level :

The following are used for statistical purposes only and your response is voluntary. If you do not wish to respond, select "Choose not to answer" from the choices given.

* Ethnicity :

Race : (Select all that apply)

☐ American Indian/Alaska Native
☐ Asian
☐ Black/African American
☐ Native Hawaiian Or Pacific Islander
☐ White
☐ Choose Not To Answer

* Disabled : ☐ Yes ☐ No ☐ Choose not to answer

* Veteran : ☐ Yes ☐ No ☐ Choose not to answer

Last, you will be asked to complete your demographic information. If you need an interpreter, please click that box on the screen so that DEW can provide you with an interpreter at no cost to you.

CLAIMANT REGISTRATION: DEMOGRAPHICS

dew SOUTH CAROLINA
DEPARTMENT OF EMPLOYMENT AND WORKFORCE

LINDA K LACEY CLAIMANT ID: 10002071

Personal Information Address Information Contact Information **Demographics Info**

ADVICE: Please do not use your Internet browser "Back" buttons. In the event you need to return to a previous page, please utilize the navigation buttons or the menu links above.

Please provide your Demographic information
Fields marked with an asterisk * are required.

* U.S. Citizen : ☐ Yes ☐ No

Alien Registration Number :

* Preferred Language : English Note: If Other, please enter Preferred Language

* Do you need an interpreter ? ☐ Yes ☐ No Note: This service is supplied at no cost to you

* Education Level :

The following are used for statistical purposes only and your response is voluntary. If you do not wish to respond, select "Choose not to answer" from the choices given.

* Ethnicity :

Race : (Select all that apply)

☐ American Indian/Alaska Native
☐ Asian
☐ Black/African American
☐ Native Hawaiian Or Pacific Islander
☐ White
☐ Choose Not To Answer

* Disabled : ☐ Yes ☐ No ☐ Choose not to answer

* Veteran : ☐ Yes ☐ No ☐ Choose not to answer

You are also asked to indicate if you are disabled and/or a veteran.

While you are not obligated to answer these questions, there are services available to jobseekers who fit these qualifications.

CUSTOMER MENU

dew SOUTH CAROLINA
DEPARTMENT OF EMPLOYMENT AND WORKFORCE

LINDA K LACEY CLAIMANT ID: 10002071

Customer Menu Claimant Homepage Change Personal Info Change Security Prof Confirmation History Debit Card Website Determination History Appeal Information My Documents

ADVICE: Please do not use your Internet browser "Back" buttons. In the event you need to return to a previous page, please utilize the navigation buttons or the menu links above.

123 MAIN STREET, COLUMBIA SC 29201-2920 LKLacey@yahoo.com

Welcome to the South Carolina Department of Employment and Workforce Claimant Self Service website.
Click on the title to choose the services you wish to use from the following options.

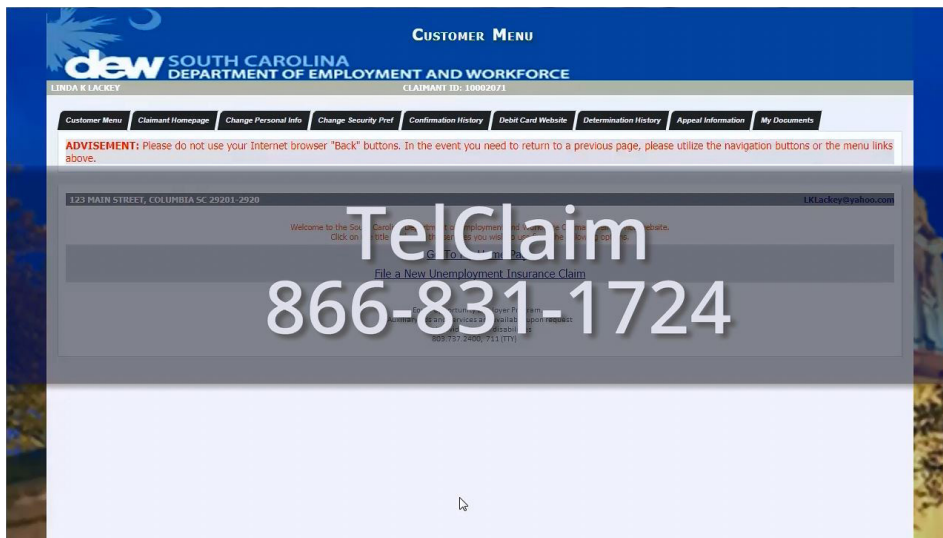
[Go To My Home Page](#)

[File a New Unemployment Insurance Claim](#)

Equal Opportunity Employer Program.
Auxiliary aids and services are available upon request.
For individuals with disabilities
803.737.2400, 711 (TTY)

Once the registration information is complete, you will be directed to the Customer Menu screen. You will notice that your name, claimant ID and address are all displayed. There are several tabs at the top of the screen which will help you navigate through the site.

You have now completed your registration and are ready to use the new system.



If you have any challenges while creating your account and need assistance, please call TelClaim at **1-866-831-1724**.

