



Rehabilitation Services and Vocational Assistance – Eligibility and Application Requirements

Effective Date: April 1, 2019

Purpose

This policy identifies the Veteran, survivor and spouse/common-law partner eligibility criteria for the [Rehabilitation Services](#) and [Vocational Assistance](#) program (referred to as ‘the Rehabilitation Program’), and the application process.

Authority

The [Veterans Well-being Act](#) (VWA) and the [Veterans Well-being Regulations](#) (VWR) set out the authority, eligibility and other requirements for the Rehabilitation Program.

Policy

General

1. Making application to the Rehabilitation Program is not intended to be a difficult process. The applicant needs only to submit the minimum amount of information and documentation required to demonstrate how he/she meets the eligibility criteria. The decision maker will use existing and readily accessible information in order to support the application where available.
2. Eligibility decisions should be made promptly to ensure eligible participants receive needed rehabilitation services or vocational assistance in a timely manner. Decision makers must ensure to gather, review and weigh all relevant evidence to render a sound decision.
3. Establishing eligibility to the Rehabilitation Program is the first step in a process. Eligibility decisions must be rendered and recorded in respect of all [health problems](#) for which the Veterans has applied to the program. A waiver of application may be considered where appropriate.
4. For each health problem deemed eligible for the Rehabilitation Program under Section 8 of the VWA, the associated [barriers to re-establishment](#) must be identified. These must be clearly noted and documented identifying how the health problem is preventing or limiting the veteran’s ability to perform their role(s) at home, at work or in their community. Please refer to paragraph 23 for additional requirements on barriers to re-establishment.
5. Any additional health problem(s) that arise while participating in a rehabilitation plan must be individually assessed for eligibility and decisions documented in the Veteran’s file.
6. Eligibility will provide the program participant access to comprehensive, professional assessment of the participant’s rehabilitation or vocational needs to establish the extent of potential improvement (i.e., rehabilitation goal) to be addressed in a rehabilitation or vocational assistance plan. If no potential for improvement is identified in the assessment stage, then a plan will be considered completed and the participant’s eligibility will end (for more details refer to the [Rehabilitation Services and Vocational Assistance Plan: Assessment, Development and Implementation](#) policy).
7. After a rehabilitation or vocational assistance plan is completed or cancelled, a participant can re-apply and may be eligible for the Rehabilitation Program provided he/she meets the eligibility requirements. The review period for the completed or cancelled decision must expire prior to a new eligibility decision being rendered if the application is for the same health problem and the same section of the legislation that pertained to the previous period of program eligibility.
8. Even if the eligibility criteria could be met, Subsection 16(2) of the VWA provides the discretion to refuse to provide rehabilitation or vocational assistance services, in whole or in part, if the services



have already been provided to the applicant or if the refusal is reasonable in the circumstances.

Eligible Groups

9. Four main applicant groups are eligible for rehabilitation services or vocational assistance services:
 - a. Veterans with a mental or physical health problem resulting primarily from service in the Canadian Armed Forces (CAF) that is creating a barrier to re-establishment (rehabilitation need);
 - b. **Veterans** released on medical grounds (Release category 3(a) or 3(b)) with a mental or physical health problem not resulting primarily from service in the Canadian Armed Forces (CAF). VAC will no longer have the authority to render decisions for this eligibility on or after April 1, 2024.
 - c. **Spouses** or **common-law partners** of Veterans who will not benefit from vocational rehabilitation due to a Diminished Earning Capacity (DEC) (for more detail see [Diminished Earnings Capacity policy](#)); and
 - d. **Survivors** of members or Veterans who died on or after April 1, 2006, as a result of a **service-related injury or disease**, or a non-service related injury or disease that was aggravated by service. The determination of a member or Veteran's death being attributable to service must be documented in a VAC disability benefits entitlement decision.
10. For the purposes of this policy, eligibility for Rehabilitation Services and Vocational Assistance may be considered when a Veteran or member is engaged with or transferred to the Supplementary Reserve.

Completing Applications

11. "Application" is a process rather than the submission of a single application form. Submission of the application form is only one stage in the overall process of completing the applicant's claim to eligibility for rehabilitation services and/or vocational assistance.
12. The process of applying for the Rehabilitation Program under Part 2 of the [VWA](#) consists of:
 - a. submission of the VAC-approved rehabilitation and vocational assistance application form, or a letter with the information asked for on the application form, completed and signed by the applicant or his/her legal representative. (The application process is considered to have formally commenced when VAC receives the application form or letter); and
 - b. provision of supporting documentation and information outlined in paragraph 13 of this policy.
13. Section 10 of the [VWR](#) stipulates that an application for the Rehabilitation Program shall be accompanied by the following documentation and information. The information may be provided on the application form or in other documents.
 - a. For a veteran's application:
 - i. medical reports or other records that document the veteran's physical or mental health problem
 - ii. any information or document that indicates the nature of the veteran's service in the Canadian Forces, and
 - iii. any other information or document that indicates the circumstances of the veteran's physical or mental health problem that the veteran considers to be relevant in support of the application;
 - b. For a survivor's application:
 - i. a copy of the member's or veteran's death certificate, and



- ii. medical reports or other records that document the member's or veteran's injury or disease, diagnosis and cause of death;
- c. For all applicants
 - i. a declaration attesting to the truth of the information provided; and
 - ii. at the Minister's request, any other information or documents that are necessary to enable the Minister to assess the applicant's eligibility.
- 14. For a spouse or common-law partner's application, information may be requested that documents the commencement of the marriage or common-law relationship.
- 15. An application is considered completed once the two steps in paragraph 12 have been finalized to the satisfaction of VAC.

Veteran – Consideration of application under VWA Section 8 (health problem resulting primarily from service)

- 16. Veterans may be eligible for the Rehabilitation Program if they have a rehabilitation need (a temporary or permanent physical or mental health problem that is creating a [barrier to re-establishment in civilian life](#) and results primarily from service in the CAF). Veterans with a rehabilitation need are not subject to any time limits to make application after release from the CAF.
- 17. Any Veteran, regardless of their class of service, the component of the CAF in which they served or their category of release as defined by Article 15.01 of the [Queen's Regulations and Orders for the Canadian Forces](#), may obtain eligibility for the Rehabilitation Program under subsection 8(1) of the VWA (rehabilitation need gateway).
- 18. To determine eligibility through the rehabilitation need gateway, the following three facts must be established:
 - a. there is a temporary or permanent physical and/or mental health problem; and
 - b. the health problem creates a barrier to re-establishment in civilian life; and
 - c. the health problem results primarily from service.
- 19. In establishing the requirements in paragraph 18 above, any relevant evidence may be considered, including but not limited to:
 - a. enrollment documents
 - b. medical reports or records that document the Veteran's physical or mental health problem;
 - c. documentation that indicates the nature of the Veteran's service in the CAF;
 - d. documentation provided by the Veteran as to the circumstances of their health problem; and
 - e. research that establishes the prevalence of specific health problems in the military.
- 20. VAC may require a person who applies for the Rehabilitation Program to undergo a medical or other examination or assessment in order to establish eligibility.

Determination of a "Physical or Mental Health Problem"

- 21. There must be documented medical evidence of a health problem; however, a medical diagnosis is not essential. An example includes, but is not limited to, a Veteran who has a documented history of musculoskeletal back pain, but has not been diagnosed with a specific medical condition (e.g. degenerative disc disease, osteoarthritis, etc.).



22. Any medical documentation being submitted in support of a rehabilitation application should be current, particularly where no specific condition has been diagnosed, and should be within the scope of practice for the health professional. (e.g. a physiotherapist would not be providing evidence as to the psychological impairment of the applicant).

Determination of a “Barrier to Re-establishment in Civilian Life”

23. To determine whether a physical or mental health problem(s) creates a barrier to re-establishment, the nature of the health problem(s) must be analyzed to determine how, and to what extent, the health problem limits the Veteran’s performance of their roles in the workplace, home or community. The mere existence of a health problem is not sufficient to determine that a barrier to re-establishment exists, rather, typically, it is the limitations associated with the health problem which create the barrier. It is these limitations which must be the focus when identifying whether or not a barrier exists.
24. When the nature and degree of limitations associated with the health problem are considered in relation to a Veteran’s ability to perform his or her roles at home, at work and in the community, and it is determined that the Veteran is limited in the performance of these roles, then it is reasonable to conclude that a barrier to re-establishment exists.
- For example, if the Veteran has mental health and back problems (health problems established), it is important to determine the existence and degree of any associated symptoms (e.g. anxiety, chronic pain) and how those symptoms limit the Veteran’s functioning (e.g. anxiety leads to difficulty with concentration, pain leads to difficulty with sitting and lifting). If these functional limitations prevent the Veteran from doing activities in relation to their roles at home, work and/or in the community (e.g. perform work, engage in interpersonal relationships) then it can be determined that a barrier to re-establishment exists.
25. The focus of the identification of barriers must be related to the health problem for which the Veteran was medically released or the health problem/s that resulted primarily from service.

Determination of “Resulting Primarily from Service”

26. A health problem is considered “resulting primarily from service” if a favourable disability benefits entitlement decision has already been made for the health problem. This includes favourable decisions when only partial entitlement has been granted, including partial entitlement for a pre-existing health problem that was aggravated by service.
27. In the absence of a favourable disability benefit entitlement decision (e.g. no application, no decision, or an unfavourable decision), the decision maker must determine whether the health problem is resulting primarily from service. In making the determination, the decision maker should weigh all current and relevant evidence and reports relating to:
- a. enrollment documents
 - b. the Veteran’s statements as to how the health problem is related to his/her service;
 - c. medical exam at release;
 - d. references to cause of the health problem included in medical reports;
 - e. nature of the Veteran’s service in the CAF;
 - f. health problems that are more prevalent in military populations as outlined in paragraph 32 of this policy; and
 - g. any other factors that the decision maker considers relevant to the individual application.
28. The health problem may have predisposing or other contributing factors, but if medical reports, records or other relevant documentation do not clearly identify that the health problem was exacerbated by military service, the decision maker is expected to consult the appropriate health professionals for guidance on whether the current state of the health problem was the result of, or was



worsened by, CAF service.

29. If the balance of evidence suggests that the health problem was the result of, or was worsened by, the Veteran's service, and there is no compelling evidence to the contrary, then the health problem may be considered, at least as likely as not, to be "resulting primarily from service". Compelling evidence to the contrary may include, but is not limited to,:
- a. a record (evidence) that the injury/illness occurred pre- or post-release; or
 - b. received an unfavourable Disability Benefit Decision due to no service relationship (please refer to paragraphs 34 and 35 on eligibility with an unfavourable decision); or
 - c. any credible documentation which clearly establishes that the health problem did not result primarily from, or was worsened by, service in the CAF.
30. In complex cases where the decision maker needs clarification regarding the interpretation of medical reports, the decision maker is expected to consult the appropriate area for guidance.

Other Information to Consider

31. VAC has found, based on a review of research, that certain health problems are more prevalent in military populations. This information may be taken into consideration as part of all the other evidence that the decision maker reviews to determine eligibility. Refer to paragraphs 19, 27 and 32 for consideration of all evidence.
32. The health problems, referenced below, have been identified as being more prevalent among military Veterans than in non-Veterans. In the absence of evidence to the contrary, VAC may consider the following health problems to have resulted primarily from service in the CAF:
- a. Musculoskeletal health problems with associated activity limitations, restricted range of motion, strength, and/or pain. The musculoskeletal system consists of the joints, ligaments, muscles, tendons, and structures that support limbs, neck, head and back. Examples of musculoskeletal health problems include but are not limited to: back problems and arthritis;
 - b. Chronic pain disorder. For VAC purposes, "chronic" means that the health problem that the pain is associated with has existed for at least 6 months and the pain persists intermittently or constantly;
 - c. Mental health problems: mood disorders such as depression, mania, dysthymia or bipolar disorder; anxiety disorder such as phobia, obsessive-compulsive disorder, panic disorder or generalized anxiety disorder; post traumatic disorder (PTSD) or adjustment disorder;
 - d. Deployment-related health effects of Gulf War Service (1990-1991) where the Veteran has one or more undiagnosed symptoms from at least two of the following categories:
 - i. fatigue;
 - ii. mood and cognition (symptoms of feeling depressed, difficulty in remembering or concentrating, feeling moody, feeling anxious, trouble in finding words, or difficulty in sleeping);
 - iii. musculoskeletal (symptoms of joint pain, joint stiffness, or muscle pain) lasting for six months or more;
 - e. Hearing loss and tinnitus; and
 - f. Amyotrophic Lateral Sclerosis (also known as ALS).

Consideration of an Unfavourable Disability Benefits Entitlement Decision

33. The eligibility requirements for the Rehabilitation Program are different from those required for



disability benefits entitlement, as is the evidence required to make an eligibility decision. For example, a disability benefit entitlement is payable in respect of a disability resulting from a service-related injury or disease only if the injury or disease is diagnosed and permanent. For eligibility to the Rehabilitation Program however, a health problem must “result primarily from service” and create a “barrier to re-establishment”. The health problem may be temporary or permanent, and a diagnosis is not essential.

34. There may be situations where an application for disability benefits entitlement has been declined in respect of a health problem, but the health problem may still meet the eligibility requirements for the Rehabilitation Program. Example (but not limited to):
- Lack of a diagnosis: If the unfavourable disability benefits entitlement decision is the result of a lack of an established diagnosis, the Veteran may be found eligible for rehabilitation services as a medical diagnosis is not essential.
 - Insufficient evidence of chronicity: If the unfavourable disability benefits entitlement decision states that there is insufficient evidence to determine a permanent health problem, the evidence may be sufficient for a favourable eligibility decision for rehabilitation services.
35. In the case of an unfavorable disability benefits entitlement decision, the evidence and rationale outlined in the decision letter should be carefully considered to determine the reasons for the unfavourable decision. If the reason(s) for the unfavorable disability benefits entitlement decision was something other than lack of a service relationship (e.g. insufficient evidence to determine a permanence of the health problem), then the decision maker should look at all the evidence (as per paragraphs 27 to 30 above) to determine if the health problem may still be considered “resulting primarily from service”.

Veteran – Consideration of application under Section 9 (medical release for health problem not resulting primarily from service – prior to April 1, 2024)

36. Veterans may be eligible for the Rehabilitation Program under Section 9 of the VWA if the physical or mental health problem for which the veteran was released did not result primarily from service and Veterans must normally apply within 120 days of release from the CAF. Under subsection 76(3) of the [VWA](#), it is possible for VAC to extend an application time limit, if the reason(s) for the delay are reasonable.
37. Eligibility decisions MUST be made under Section 8 of the VWA (rehabilitation need) prior to rendering a decision under Section 9 (medical release). Veterans eligible under Section 9 will only have access to medical and psycho-social services from VAC.
38. The following Veterans may be eligible for medical and psycho-social services under the Rehabilitation Program through the medical release gateway:
- Medically released Regular Force Veterans;
 - Medically released Cadet Instructors Cadre, Canadian Rangers, and Supplementary Reserve Force Veterans, who were serving on a period of Class “C” Reserve Service at the time that the physical or mental health problem leading to release manifested itself; and
 - Medically released Veterans of the Primary Reserve who were serving on a period of Class “A,” “B” or “C” Reserve Service at the time that the physical or mental health problem leading to release manifested itself.
 - Primary Reserve Veterans Released on Medical Grounds
 - Medically released Veterans of the Primary Reserve may be eligible for any health problem that may manifest itself at any time (24 hours a day), no matter the cause, during any period of primary reserve service of two or more consecutive days.



- Class “B” reserve service is service of 14 days or more in duration, and Class “C” reserve service is full-time service in a Regular Force position or on an approved operation. Medically released Class “B” and “C” Veterans are therefore deemed to be serving for 24 hours a day for the duration of their service period.
 - Class “A” reserve service is part-time service, typically 4 days per month depending on duties and rank. Class “A” primary reservists are deemed to be serving for 24 hours a day when serving 2 consecutive days or more.
 - Example: A Class “A” reservist is scheduled to work every second Wednesday evening and every third weekend from Friday 5 pm to Sunday 5 pm. If the reservist has a health problem manifest itself on Wednesday evening while on duty, the Veteran may be eligible for that health problem. If the reservist has a health problem manifest itself at any time on Thursday, the day following a Wednesday on duty, the Veteran would not be eligible even if medically released for that health problem. If the reservist has a health problem manifest itself on Saturday night during a weekend duty period, the Veteran may be eligible for that health problem.
39. Medically released Veterans with non-service related illnesses or injuries may be eligible for vocational rehabilitation services through the Canadian Forces (CF) Long Term Disability (LTD) Income Replacement program. Participation in the CF LTD program does not exclude an eligible Veteran from participating in VAC’s Rehabilitation Program. Refer to the [Rehabilitation Services and Vocational Assistance Plan: Assessment, Development and Implementation](#) policy for more information.

Re-enrollment

40. An individual must be a Veteran (not still-serving) to be eligible for the Rehabilitation Program. If a Veteran is participating in an established rehabilitation plan and re-enrolls with CAF, consideration may be given for the Veteran to continue with participation in the Rehabilitation Program. When a Veteran has engaged in full time capacity with the CAF (i.e. Regular Force, Reserve Force Class C and Reserve Force Class B greater than 180 days), it is reasonable to conclude that the Veteran would not meet the eligibility criteria of having a barrier to re-establishment in civilian life given that he/she is re-enrolling in a fulltime career with the CAF.
41. When a Veteran who is participating in the Rehabilitation Program re-enrolls in the Canadian Armed Forces, he or she may continue to be eligible for the program, taking into account the following considerations:
- Will the Veteran be able to actively participate in the program to the extent required to achieve established rehabilitation goals? Regular Force members and Reserve Force members in Class C service are unlikely to be able to participate to the extent required.
 - Does the Veteran’s level of service in the CAF indicate that the Veteran no longer has any rehabilitation needs? The greater the level of service, the more likely the Veteran’s function has been restored, or the Veteran is employable.
42. The only health problems for which he/she can be eligible for the Rehabilitation Program are health problems resulting primarily from his/her previous periods of military service or those health problems not resulting primarily from service as determined under Section 9 of the VWA. He/she cannot be made eligible for any health problem(s) resulting primarily from their current period service. Should a Veteran apply for a health problem that is resulting primarily from a current period of service, the Veteran may be provided with a Rehabilitation Program eligibility decision that is effective the day after the date of release from their current service period.
43. A member serving in the Regular Force must fully release from the Regular Force in order to enroll in the Reserve Force – including the Supplementary Reserve. Without a break in days between Regular and Reserve Force service, they remain a member and would not meet the eligibility criteria for the Rehabilitation Program. However, for the purposes of this policy, eligibility may be considered when a Veteran or member is engaged with or transferred to the Supplementary Reserve.



Change in Release Type for Veterans eligible under VWA Section 9

44. If a Veteran has been made eligible for the Rehabilitation Program under Section 9 of the VWA but the release category was subsequently changed by CAF, and they do not meet the eligibility criteria under Section 8, the Veteran would be eligible to continue to participate in the Rehabilitation Program.
45. If an individual has a change in release type after release that would now render them eligible (i.e. their release type was changed to a medical release) then they could apply for the Rehabilitation Program as a Veteran who released on medical grounds. As per subsection 76(3) of the VWA, the 120 day timeline to apply could be waived in these circumstances where it is considered reasonable that the delay in applying was a result of the time it undertook to have the release type changed.

Ineligible Veterans

46. CAF Veterans whose physical or mental health problem resulted primarily from service in the CAF on or before April 1, 1947, or from service in the Korean War as defined in subsection 3(1) of the [Pension Act](#) are not eligible for rehabilitation services.
47. Pursuant to Subsection 2(5) of the [VWA](#), a Veteran is not eligible for rehabilitation services if his or her physical or mental health problem was caused by a willful self-inflicted injury or improper conduct on the Veteran's part, including willful disobedience of an order and vicious or criminal conduct.

Spouses and Common-law Partners

48. Spouses and common-law partners of CAF Veterans may be eligible for vocational assistance when the following conditions are met:
 - i. the Veteran is approved for the Rehabilitation Program under Section 8 of the VWA; and
 - ii. it has been determined that the Veteran would not benefit from vocational rehabilitation as a result of having a diminished earning capacity (as defined by VAC) that is due to the physical or mental health problem resulting primarily from service in respect of which the Program was approved (refer to Diminished Earning Capacity policy).
49. A Veteran who is determined to meet the criteria for DEC may continue to benefit from vocational rehabilitation as long as the Veteran is working toward any occupational goals in a vocational rehabilitation plan. In this circumstance, the Veteran's spouse/common-law partner cannot be eligible for the Rehabilitation Program until the Veteran's occupational goals have been met or the Veteran ceases to participate in a vocational rehabilitation plan.
50. Where the spouse/common-law partner is determined to be eligible and is accessing vocational services under the Rehabilitation Program, the Veteran no longer has access to funding of vocational rehabilitation services (including retraining) through the Rehabilitation Program until the spouse/common-law partner has completed or ceased to participate in the program.
51. In cases where a Veteran and spouse/common-law partner are living apart, they may be deemed to be continuing to reside together if they are living apart only by reason of:
 - i. injury or disease and/or one or both of them having to reside in a health care facility;
 - ii. circumstances of a temporary nature; or
 - iii. other circumstances not within the control of the Veteran, or spouse/common-law partner.
52. "Circumstances of a temporary nature" can include circumstances where the Veteran and spouse or common-law partner were separated only because of family or work-related responsibilities.
53. "Other circumstances not within the control of the Veteran, spouse, or common-law partner" may include periods of deployment.



54. There is no time limit for spouses/common-law partners of CAF Veterans to apply for the Rehabilitation Program.
55. Spouses/common-law partners determined to be eligible for vocational assistance may also be eligible for rehabilitation services, if these services are necessary for them to benefit from vocational assistance.
56. If the Veteran and the spouse/common-law partner legally separate or divorce after an eligibility decision for the spouse/common-law partner has been made, the spouse/common-law partner continues to be eligible for vocational assistance or rehabilitation services. If a former spouse/common-law partner re-applies later, no eligibility would be granted.
57. In the event that the Veteran dies after an application for vocational assistance for a spouse/common-law partner has been approved, the spouse/common-law partner continues to be eligible for vocational assistance or rehabilitation services. If the Veteran dies before the eligibility decision has been rendered, the spouse/common-law partner must re-apply and satisfy the eligibility as a survivor.

Survivors

58. A survivor is a person who, at the time of the CAF member's or Veteran's death, was a spouse or common-law partner and was residing with the Veteran. The term "survivor"; therefore, excludes surviving separated spouses, surviving former (divorced) spouses, and surviving former common-law partners.
59. Survivors of Members or Veterans will be eligible for vocational assistance when the member or Veteran dies on or after April 1, 2006, as a result of a service-related injury or disease, or a non-service-related injury or disease that was aggravated by service.
60. The determination of a member or Veteran's death being attributable to service must be documented in a VAC disability benefits entitlement decision.
61. There is no time limit for survivors of members or Veterans to apply to the Rehabilitation Program.
62. Survivors determined to be eligible for vocational assistance may also be eligible for rehabilitation services, if these services are necessary for them to benefit from vocational assistance.

Waiver of Application

63. Subsection 78.1 of the [VWA](#) provides that VAC may waive the requirement for an application for the Rehabilitation Program if the decision maker believes, based on information that has been collected or obtained by VAC, that the person may be eligible for the Program, if they were to apply. For more information on waivers, please refer to the Waiver of Requirement for Application
64. Given the degree and depth of information typically required for a rehabilitation application, it is not anticipated that waivers would be appropriate for initial applications from a Veteran. Circumstances where a waiver may be appropriate may include, but are not limited to:
 - a. additional health problem(s) arise while a Veteran is participating in a rehabilitation plan where the decision maker already has the information and believes the person would be eligible for the additional health problem; or
 - b. where a verified spouse, common-law partner or survivor indicates they would like to participate in the Rehabilitation Program and all other requirements are already documented with VAC (eg. DEC determination)

"Effective Date" of Rehabilitation Services or Vocational Assistance

65. For Veterans, survivors, spouses and common-law partners, the "effective date", or date from which



rehabilitation services or vocational assistance services may be provided, is the date it is determined that the applicant meets the eligibility requirements. The effective date is the documented eligibility decision date.

66. A CAF member may apply for the Rehabilitation Program, and VAC may make eligibility decisions prior to release from the CAF. His or her eligibility will not be effective until the day following release.

Involuntary Withdrawal - Incomplete Applications

67. The completion of applications is the responsibility of the applicant. However, VAC staff will work closely and collaboratively with applicants to explain the Rehabilitation Program and help them obtain the necessary information to complete the application process. VAC will make all reasonable attempts to obtain the missing information, including periodic written requests.
68. If VAC deems a written request for further information to be inappropriate given the applicant's circumstances, then other methods, including personal contact, will be used to try to obtain the necessary information.
69. Should the applicant not comply within 6 months from the date of the first written request for information, then the application for the Rehabilitation Program can be withdrawn. Prior to the expiration of the six-month period, VAC will give written notice of the withdrawal that shall detail the missing information in the application, note the previous attempts to obtain the information, indicate the planned withdrawal date, and inform the applicant of the withdrawal's consequences.

Voluntary Withdrawals

70. An applicant may elect to withdraw an application at any time before an eligibility decision is made by VAC. In these instances, VAC will follow up with a written notice confirming the date and manner (e.g., telephone or letter) of the applicant's withdrawal request as well as informing him/her of the consequences of withdrawing the application.

New Application

71. If an individual submits another application after a withdrawal has occurred, whether voluntary or involuntary, the new application will stand on its own and be considered solely on its merits. Any eligibility decisions will be based on the most recent application.

Written Decisions

72. All eligibility decisions must be provided to the applicant in writing and must include the applicant's rights of review.

References

Pension Act

Veterans Well-being Act

Veterans Well-being Regulations

Queen's Regulations and Orders for the Canadian Forces

Establishment of a Common-Law Partnership

Diminished Earning Capacity

Rehabilitation and Vocational Assistance Services – General