

DISABILITY BENEFITS: APPLICATION CHECKLIST

Your completed application for disability benefits must contain the following:

- A completed and signed **Application for Disability Benefits**.
- If applicable, your signed **Consent for Veterans Affairs Canada to Collect Personal Information from Third Parties**.
 - Please read and sign one copy of this form, and return it with your application, if we need to obtain:
 - medical information from your doctor or other health care provider;
 - information regarding any workers' compensation, or compensation from another source, for the same disability; and/or
 - service health records from the Royal Canadian Mounted Police.

You do not need to sign this consent form for us to obtain your service health records from the Canadian Armed Forces.

- **Medical information** to support your application (including a current diagnosis of your condition):
 - If you are still serving, we will get this information from your service health records. If the information we need is not in your records, we will contact you.
 - If you are released, you must have your doctor or health care professional complete and sign the relevant medical questionnaire(s).
 - Please do not have a medical questionnaire completed until you have been provided with specific instructions regarding the questionnaire(s) required.
- **Service Information** – If you are currently serving with the Canadian Armed Forces, include a copy of your Member Personnel Record Resume (MPRR).
- If this is your first application to Veterans Affairs Canada, we will need a "**Proof of Identity**" such as a copy of your driver's license.