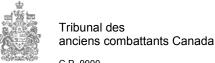
Veterans Review and Appeal Board Canada

P.O. Box 9900 Charlottetown, PE C1A 8V7



Charlottetown (Î.-P.-É.)

C1A 8V7

Consent and Waiver for Teleconference Hearing or in Absentia Hearing

	Protected when completed
HO File No.	Decision No.
Applicant - Family name	Given name(s)
Representative name	Date of hearing (yyyy-mm-dd)
I am unable to attend my review hearing in pers	son because
This is my authorization for my hearing to proce by teleconference in my absence (in absentia hearing)	eed (check as applicable):
and Appeal Board. I also understand that if expenses would be covered, as set out in the I hereby waive my personal appearance.	y to appear in person before the Veterans Review I did appear in person, my reasonable travel ne applicable government regulations and policy.
Teleconference Review Hearings	Manager and the state of the st
testimony under oath or sworn affirmation.	ttending a hearing by teleconference and providing usual practice of attending the hearing and providing
the entire hearing. At the hearing, I agree to sv	sentative and I will be connected by telephone during wear an oath or make a solemn affirmation that the be the truth, the whole truth, and nothing but the truth.
In Absentia Review Hearings I authorize my representative to appear at the h	nearing on my behalf and to present my claim to the
Appeal Board Act and the Privacy Act. The purpose Review and Appeal Board (VRAB) program. When	s collected under the authority of the <i>Veterans Review and</i> e for collecting this information is to administer the Veterans you provide this information it is strictly voluntary and does not the form properly may result in an administrative
Once completed and signed, the personal information	on collected on this form is for internal Veterans Affairs use

only and is protected from unauthorized disclosure under the Privacy Act. You have the right to access the information and to request changes or add notations, to your personal information.

The personal information collected by VRAB is described in the Personal Information Banks VRAB PPU 080 and/or PPU 095 in the federal Info Source publications.

For further information about your right of access, please contact the VRAB Access to Information and Privacy Coordinator's Office, PO Box 9900, Charlottetown, PE, C1A 8V7.

Signature of applicant	Date (yyyy-mm-dd)	Telephone No.

This form shall be signed by the Applicant and provided to the Veterans Review and Appeal Board as soon as possible prior to the hearing. The Applicant, and/or his or her representative, shall make every effort to provide the form to the Board no later than one (1) business day prior to the scheduled date of the hearing.

