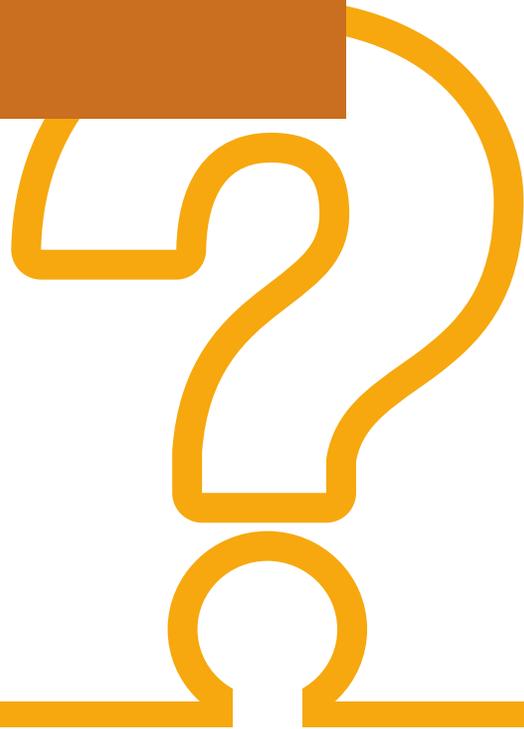


G U I D E

Claim for  
Death Benefits





## Your claim kit includes

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### THERE ARE THREE WAYS TO SUBMIT A DOCUMENT:

» **Through the Document Submission online service:** [saaq.gouv.qc.ca](http://saaq.gouv.qc.ca)

» **By fax:** 1 866 289-7952

» **By mail: Société de l'assurance automobile du Québec**

Case postale 2500, succursale Terminus  
Québec (Québec) G1K 8A2

***Keep the original or a copy for your files.***



# 1

## COMPENSATION PAID BY THE SAAQ

The various death benefits paid by the SAAQ are the following:

- A** Death benefit
- B** Lump-sum indemnity to cover funeral expenses
- C** Lump-sum indemnity for a diminished quality of life
- D** Availability allowance and reimbursement of accident-related expenses

These benefits are paid as a lump sum and are neither liable to seizure nor taxable.

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**Please note: Though “estate” is the more common term, “succession” is used throughout this guide, as it is the term used in Québec legislation.**

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## **A** Death Benefit

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### **IF THE DECEASED PERSON HAD A SPOUSE**

The spouse of the deceased is entitled to a lump-sum indemnity. The amount of the indemnity varies according to the age and gross annual income of the deceased. The indemnity will never be less than the minimum amount provided for under the *Automobile Insurance Act*.

The indemnity may be paid in one lump sum or, if so requested in writing by the beneficiary, spread over a period of five, ten, fifteen or twenty years at an interest rate determined by the SAAQ.

For information on the amounts payable, see the *Table of Death Benefits*.

### **IF THE DECEASED PERSON HAD DEPENDANTS**

If the deceased has left behind dependants other than his/her spouse, they will receive a lump-sum indemnity established in accordance with their age at the time of the accident victim's death.

If the deceased was the head of a single-parent family, his/her children and other dependants are entitled, in addition to their own indemnity, to the indemnity that would have been paid to a spouse.

The indemnity may be paid in one lump sum or, if so requested in writing by the beneficiary, spread over a period of five, ten, fifteen or twenty years, at an interest rate determined by the SAAQ.

If any of the accident victim's dependants were disabled at the time of the accident victim's death, they are entitled to an additional indemnity.

For information on the amounts payable, see the *Table of Death Benefits*.

### **IF THE DECEASED PERSON HAD NO SPOUSE OR DEPENDANTS**

If the deceased had no spouse or dependants, the SAAQ will pay a lump-sum indemnity to:

- » the deceased's parents, or to the individuals standing *in loco parentis* (acting as parents) of the deceased, if the deceased was a minor (under the age of 18) at the time of death;
- » the deceased's succession, if the deceased was of full age at the time of death.

For information on the amounts payable, see the *Table of Death Benefits*.

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## **B** Lump-Sum Indemnity to Cover Funeral Expenses

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Whenever an accident victim dies as a result of a traffic accident, the SAAQ automatically pays the succession a lump-sum indemnity to cover funeral expenses. Please note that **receipts are not required**.

For information on the amounts payable, see the *Table of Death Benefits*.

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## **C** Lump-Sum Indemnity for a Diminished Quality of Life

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An indemnity may be awarded to compensate for pain, mental suffering and loss of enjoyment of life for the period that preceded the death of the accident victim.

- » If the accident victim died more than 24 hours after the accident, the succession may be entitled to a lump-sum indemnity that varies according to the severity of the accident victim's injuries.
- » No indemnity is awarded when the accident victim died within 24 hours of the accident.

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## **D** Availability Allowance and Reimbursement of Accident-Related Expenses

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An availability allowance is awarded to individuals whose presence at the accident victim's hospital bedside was requested by a physician. Travel and lodging expenses related to their presence at the hospital are also reimbursable. Reimbursement of these expenses is carried out in accordance with the conditions prescribed by regulation.



# 2

## COMPLETING THE **CLAIM** **FOR DEATH** **BENEFITS** FORM

### 1 Accident Victim

#### **QUÉBEC DRIVER'S LICENCE NUMBER, SOCIAL INSURANCE NUMBER AND HEALTH INSURANCE NUMBER**

If the accident victim was a minor, it is important to enclose his/her birth certificate. A birth certificate is issued by the Directeur de l'état civil and must include the names of the father and mother. For more information, contact the Directeur de l'état civil or visit its website.

Provide the Social Insurance Number, Health Insurance Number and Québec driver's licence number of the deceased, if that person had one. In the case of a minor who did not yet have a Social Insurance Number, provide the Health Insurance Number only.

It is important to provide this information in order to avoid unnecessary delays in processing the claim.

#### **PRESENT LAST NAME IF DIFFERENT FROM LAST NAME AT BIRTH**

Write the last name the deceased was using at the time of death if it is different from the one that person had at birth. For example, if the deceased was married and used her husband's last name, write that last name.

#### **CIVIL STATUS AT THE TIME OF THE ACCIDENT**

Check the box(es) that describe the civil status of the deceased at the time of the accident. For example, if, at the time of the accident, the accident victim was divorced and had begun living in a de facto union, check both boxes that apply.

## 3 Accident

### DATE AND TIME OF ACCIDENT

Indicate the date and time of the accident as specifically as possible.

### LICENCE PLATE NUMBER OF THE VEHICLE THE ACCIDENT VICTIM WAS IN

If the accident victim was the driver or a passenger, provide the licence plate number of the vehicle the accident victim was in. If the accident occurred while the accident victim was a passenger aboard a bus and you do not know what the licence plate number was, leave this space blank.

### PROVINCE, STATE OR COUNTRY IN WHICH THE VEHICLE THE ACCIDENT VICTIM WAS IN WAS REGISTERED

If you have written the licence plate number of the vehicle **the accident victim was in**, indicate the province, state or country that issued the licence plate.

### LOCATION OF ACCIDENT

Indicate the municipality in which the accident occurred.

If the deceased was not a Québec resident but was covered by either of the two situations described below, you can file a claim for death benefits with the SAAQ:

- » The accident victim was a person from outside Québec who was involved in a traffic accident in Québec, and the motor vehicle the accident victim was in at the time of the accident (as the driver or as a passenger) was registered in Québec. Regardless of whether or not the accident victim owned the vehicle he/she was in at the time of the accident, he/she is entitled to the same compensation as Quebecers.
- » The accident victim was a person from outside Québec who was involved in a traffic accident in Québec and, at the time of the accident, that person was either a passenger in, or the driver of, a motor vehicle that was not registered in Québec, or a pedestrian or a cyclist. If this situation applies to the accident victim, benefits will be awarded in inverse proportion to that person's share of liability, unless his/her province of residence has entered into an agreement with the SAAQ.

### IF OUTSIDE QUÉBEC, INDICATE THE PROVINCE, STATE OR COUNTRY

If a Québec resident died in an accident that occurred outside Québec, the same benefits are payable as if the accident had occurred in Québec. If this is the case, a claim can be filed with the SAAQ.

If, as a result of the accident, medical expenses were incurred outside Québec (hospitalization costs, professional fees, etc.), follow the steps outlined below.

#### » If the expenses have not yet been paid

Send all supporting documents to the SAAQ. Only originals will be accepted.

#### » If the expenses have already been paid

Contact the Régie de l'assurance maladie du Québec (RAMQ) to obtain a copy of the form entitled *Application for Reimbursement – Healthcare Services Covered Outside Québec*. You can also download a copy from the RAMQ website.

The duly completed form must be accompanied by the appropriate supporting documents. Please note that the RAMQ requires the originals.

The RAMQ will reimburse the expenses incurred in accordance with the provisions of the *Hospital Insurance Act* and the *Health Insurance Act*. The supporting documents will be automatically transferred by the RAMQ to the SAAQ, which will then reimburse any remaining amount that qualifies for reimbursement under the *Automobile Insurance Act*.

### Liability

If the deceased was at fault for the accident and a person from outside Québec decides to file a lawsuit against the succession, the deceased's private third-party liability insurance will cover the succession for this.

If it is a person from outside Québec who is deemed to be at fault for the accident, you may, where legal recourse is allowed in the jurisdiction where the accident took place, initiate court proceedings against that person. However, before doing so, you must notify the SAAQ, as it has a right of priority that it may decide to exercise.

For further information on this topic, contact the compensation officer who will be assigned to the file as soon as the SAAQ receives the claim for death benefits.

## **WAS A VEHICLE REGISTERED OUTSIDE QUÉBEC INVOLVED IN THE ACCIDENT?**

If you know of a vehicle registered outside Québec that was involved in the accident, you must report it.

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### **4 Give a Brief Account of the Facts Relating to the Accident**

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Give a brief description of the facts relating to the accident, even if a police report was filed.

Use a separate sheet if need be. Make sure to indicate the claim number or, if unavailable, the deceased's Health Insurance Number, at the top of that sheet.

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### **5 Was an Accident Report Drawn up by a Police Officer?**

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- » If a police report was filed following an accident in Québec, it will be forwarded to the SAAQ by the police force present at the accident. If you know the report number, please provide it.
- » If the accident occurred outside Québec and you already have the report, please enclose a copy with the *Claim for Death Benefits* form.

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### **6 Did the Accident Occur...**

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#### ***in the context of work***

If the traffic accident took place while the accident victim was at work, do not fill out this form. The claim should be addressed to the Commission des normes, de l'équité, de la santé et de la sécurité du travail du Québec (CNESST) or to the appropriate body in your province, territory or country that is responsible for compensating victims of work-related accidents.

An accident is considered to have taken place in the context of work if:

- » the accident took place on the employer's property during business hours;
- » the accident victim was travelling during business hours paid for by the employer;
- » the accident victim was carrying out orders or running an errand for the employer;
- » the accident victim was travelling in a vehicle owned by the employer;
- » the accident victim was using a means of transportation provided by the employer;
- » the employer paid for the travel expenses.

If you have already applied for compensation from the CNESST and were turned down, you may file a claim for death benefits with the SAAQ, in which case you must include with your claim the letter of refusal from the CNESST.

#### ***while someone was carrying out a criminal act***

If injury resulting in death was intentionally caused by the driver of a motor vehicle, the deceased is considered to have been a victim of a criminal act and the family of the accident victim can decide to seek compensation under either the *Crime Victims Compensation Act* or the *Automobile Insurance Act*.

### ***while assisting a person in distress***

If the accident victim died of injuries sustained in a traffic accident while assisting a person in distress, the accident victim is deemed to have been engaged in an act of good citizenship and the family of the accident victim may therefore seek compensation under either the *Act to promote good citizenship* or the *Automobile Insurance Act*.

In both of the above cases, compensation is paid under only one Act. If you would like to know which Act would be more advantageous, you can file a claim for compensation or benefits with both the CNESST, which applies the *Crime Victims Compensation Act* and the *Act to promote good citizenship*, and the SAAQ, which applies the *Automobile Insurance Act*. However, only one of these bodies will pay compensation or benefits.

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## **7 Injuries**

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### **PLEASE DESCRIBE, IN YOUR OWN WORDS, THE INJURIES THE ACCIDENT VICTIM SUSTAINED THAT LED TO HIS OR HER DEATH AS A RESULT OF THE ACCIDENT**

This description can include objects that struck the accident victim, the parts of the body that were injured, as well as the type of injuries sustained (cuts, scratches, fractures, etc.).

#### **IMPORTANT:**

Remember to enclose a document from a physician or coroner in which the cause or causes of death are described. Medical information dated shortly after the accident is important for the processing of a claim for death benefits.

Should this document be unavailable, the compensation officer will discuss the matter with you when he/she begins processing the claim.

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## **10 Availability Allowance and Reimbursement of Expenses**

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If the accident victim was hospitalized after the accident and survived for some time, an availability allowance may be paid to the person whose presence was required for medical reasons.

To claim this allowance, you must specify the dates of the visits and the number of hours spent with the accident victim during each visit. You can report this information on a separate sheet of paper and enclose it with your claim.

Travel and lodging expenses related to these visits are also reimbursable. Reimbursement of these expenses is carried out in accordance with the conditions prescribed by regulation.

For information on the amount of the availability allowance to which you may be entitled, see the *Table of Death Benefits*.

If you have receipts or invoices for these expenses (i.e. meals, hotel, parking, transportation), please include them with the claim.

For information on the amounts that can be reimbursed, contact the SAAQ's call centre at 1 888 810-2525.

#### **IMPORTANT:**

Do not forget to write the claim number or, if unavailable, the accident victim's Health Insurance Number, on every receipt or invoice sent to the SAAQ.

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## 11 Accident Victim's Spouse

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A spouse is defined as:

- » a person who, on the date of the accident victim's death, was married to or in a civil union with the accident victim and was living with him/her;
- » a person who, on the date of the accident victim's death, was living in a de facto union with the accident victim and had been publicly represented as that person's spouse for at least three years;
- » a person who, on the date of the accident victim's death, was living in a de facto union with the accident victim and had been publicly represented as that person's spouse for at least one year, provided:
  - a child had been born or was to be born of their union,
  - they had adopted a child together,
  - one of them had adopted one or more of the other's children.

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**IMPORTANT:**

Remember to enclose the marriage certificate, where applicable. If the spouse is disabled and the accident victim was under 45 years of age, also enclose a medical report attesting to the spouse's disability.

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## 13 Accident Victim's Former Spouse

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A former spouse is defined as:

- » a person who was legally separated or divorced from the accident victim and who, at the time of the accident victim's death, was entitled to receive spousal support (excluding child support) from the accident victim by virtue of a judgment or agreement.

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**IMPORTANT:**

Remember to enclose a copy of the official documents (divorce judgment and agreement). If the former spouse is disabled, also enclose a medical report attesting to the former spouse's disability.

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## 15 Dependants

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A dependant is defined as:

- » a minor child (under 18 years of age) of the accident victim, regardless of whether that child was adopted or is the accident victim's biological child, and any other minor to whom the accident victim stood in loco parentis (acted as a parent) at the time of death;
- » a child of full age of the accident victim, a person of full age to whom the accident victim stood in loco parentis (acted as a parent), and any other person related to the accident victim by blood or adoption if, at the time of his/her death, the accident victim was providing for more than 50% of that person's basic needs and maintenance costs. Proof may be required.

List the names and contact information of:

- » all children under 18 years of age who were dependants of the accident victim at the time of his/her death;
- » all of the accident victim's children who were 18 years of age or older and who, at the time of the accident victim's death, were dependants of the accident victim and attending an educational institution full time;
- » all disabled individuals who were dependants of the accident victim at the time of his/her death;
- » any other person, if the accident victim was providing for more than 50% of that person's needs.

*NOTE: If the accident victim had more than six dependants, please provide the same information about each additional dependant on a separate sheet and attach it to the form. Be sure to indicate the claim number or, if unavailable, the accident victim's Health Insurance Number, at the top of the page.*

**IMPORTANT:**

Remember to enclose the following:

- » the **birth certificate issued by the Directeur de l'état civil** for each dependant, showing the names of the mother and father;
- » **Schedule 4D – Attestation of School Attendance**, for each dependant who is a student and 18 years of age or older;
- » a **medical report** for each disabled dependant, attesting to that person's disability.

## 16 Accident Victim's Parents

**YOU MUST COMPLETE THIS SECTION ONLY IF THE DECEASED WAS A MINOR (UNDER 18 YEARS OF AGE) AND DID NOT HAVE A SPOUSE OR ANY DEPENDANTS.**

The SAAQ will pay a lump-sum indemnity to the accident victim's biological or adoptive parents or to the individuals standing *in loco parentis*.

*NOTE: A person standing in loco parentis is a person who takes the place of a biological parent and assumes that parent's responsibilities, both financial and emotional.*

Provide either the full address of the accident victim's parents, or the address to which mail for the succession should be sent. Be sure to include the postal code and any post office box number (where applicable). All correspondence and benefits will be sent to the address provided.

Remember to include the death certificate of any deceased parent.

In order to take into account new realities (reconstituted families, same-sex parents), more than two individuals may be entered as parents. As well, "father" and "mother" have been replaced by "parent."

**PLEASE NOTE:** *This section is not to be filled out if the accident victim was of full age and had no spouse or dependants at the time of death. In this case, the SAAQ pays a lump sum to the succession.*

## 17 Signature of the Claim for Death Benefits

It is essential that the claim form be signed by the person who filled it out. Check the box that describes in what capacity you are acting. By signing the *Claim for Death Benefits* form, you are also declaring that the information provided in the appended forms, where applicable, is accurate.

**NOTE:** *Since January 1, 1994, under the Civil Code of Québec, the father and mother of a minor are automatically that person's tutors, without any other formality. If you are signing the claim form as the accident victim's dative tutor appointed by a court order or by any other legally binding document, you must enclose with the form the court order or document in question. Be sure to provide your telephone number and full address because all correspondence will be sent to that address. The Public Curator is responsible for supervision of the administration of tutorships and curatorships. As such, the Public Curator is authorized to examine the payment of sums to tutors and curators, in compliance with section 12 of the Public Curator Act.*

**If your form is not signed, it will be returned to you, which may result in unnecessary delays in processing your claim.**

## 18 Direct Deposit

The SAAQ can deposit any death benefits to which you are entitled directly into your bank account (in Canada only).

### IMPORTANT:

- » If you are requesting deposit into a joint account, check "No" when answering the question "Are you the sole holder of the account?"
- » If the beneficiary is a minor, the SAAQ must deposit indemnities in an account held in the beneficiary's name. Parents are responsible for opening an account in the child's name.
- » If direct deposit is not possible, payment is made by cheque.

Remember to enclose a cheque marked "VOID".

Example:

001

VOTRE NOM  
123, RUE PRINCIPALE OUEST  
VOTRE VILLE (PROVINCE) A2B 3C4

DATE

PAYEZ À \_\_\_\_\_ \$  
L'ORDRE DE \_\_\_\_\_ /100 DOLLARS

VOTRE INSTITUTION FINANCIÈRE  
345, RUE PRINCIPALE OUEST  
VOTRE VILLE (PROVINCE) A2B 3C4

POUR \_\_\_\_\_

⑈ 00 1 ⑈    ⑈ 2 3 4 5 ⑈ ⑈ 6 7 8 ⑈    ⑈ 2 3 ⑈ ⑈ 4 5 6 ⑈ ⑈ 7 ⑈

N° de cheque  
Pas toujours présent  
sur le chèque  
(Ne pas inscrire)

N° de la  
succursale  
(5 chiffres)

N° de  
l'institution  
financière  
(3 chiffres)

N° de compte  
(maximum de 12 chiffres)



# 3

## COMPLETING THE APPENDICES

You must fill out the appendices if:

- » the accident victim had a spouse or a former spouse at the time of the accident;
- » the accident victim had dependants at the time of the accident;
- » the accident victim survived for more than seven days after the accident.

### **A** Employment – Training

#### **EMPLOYMENT**

If the accident victim was employed as a salaried worker at the time of the accident, you must answer all the questions. Your answers will help determine the amount of the lump-sum indemnity that the spouse or dependants may be entitled to receive.

#### **IMPORTANT:**

Remember to enclose ***Schedule 2 – Attestation of Income by the Employer***, which must be completed by the employer of the deceased.

If the deceased person was self-employed, you must provide the following for each of the three previous years:

- » the deceased's Québec or federal income tax return (the Québec income tax return is preferred for Québec residents) and notice of assessment; AND
- » either the deceased's statement of income and expenses or one of the two following forms: TP-80-V, *Business or Professional Income and Expenses*, or T2125, *Statement of Business or Professional Activities* (form TP-80-V is preferred for Québec residents); OR
- » if the deceased was not resident in Canada, any official document attesting to his/her income. This type of document is generally required by the fiscal authority of the country or territory concerned (equivalent to Revenu Québec or the Canada Revenue Agency).

*NOTE: Remember to indicate the claim number or, if unavailable, the deceased's Health Insurance Number, at the top of each separate sheet you submit with the claim.*

## **B** At the Time of the Accident

### **Was the accident victim receiving Employment Insurance benefits or an employment-assistance allowance?**

Indicate whether the accident victim was receiving Employment Insurance benefits or an employment-assistance allowance at the time of the accident. This information will be used to calculate the amount of any lump-sum indemnity to which the spouse or dependants may be entitled.

- » If the accident victim was receiving Employment Insurance benefits at the time of the accident, have the accident victim's local Service Canada Centre complete **Schedule 3 – Confirmation of Employment Insurance Benefits Lost/Confirmation of an Employment-Assistance Allowance Lost**.
- » If, at the time of the accident, the accident victim was receiving an employment-assistance allowance that is part of active measures by Emploi-Québec, have the accident victim's local employment centre (CLE) complete **Schedule 3 – Confirmation of Employment Insurance Benefits Lost/Confirmation of an Employment-Assistance Allowance Lost**.

#### **IMPORTANT:**

It is possible to lose both Employment Insurance benefits and an employment-assistance allowance, in which case the form must be completed by both these centres.

### **AT THE TIME OF THE ACCIDENT, HAD AN EMPLOYER GUARANTEED THE ACCIDENT VICTIM EMPLOYMENT?**

If an employer had offered the accident victim a job that he/she would have held had the accident not occurred, provide the name and telephone number of that employer.

#### **IMPORTANT:**

You must contact the SAAQ at 1 888 810-2525 to request a **Confirmation of Hiring** form.

**C****Employment History – Qualifications – Disability****AT THE TIME OF THE ACCIDENT, WAS THE ACCIDENT VICTIM UNABLE TO WORK FOR A REASON OTHER THAN THE ACCIDENT?**

At the time of the accident, the accident victim may have already been unable to work either temporarily or permanently for medical reasons (for example, as a result of a work-related accident or because he/she had been granted sick leave).

**DESCRIBE THE ACCIDENT VICTIM'S ILLNESS OR DISABILITY PRIOR TO THE ACCIDENT**

Describe any illness or disability that the accident victim had before the accident and that prevented him/her from being able to work. Provide the name of the hospital or medical clinic where the accident victim was being treated, as well as the name of the physician who had been treating him/her for the health issue(s) in question.

**E****If the Accident Victim had not Held Full-Time Employment for Over a Year When the Accident Occurred****EDUCATION**

Circle only the accident victim's last completed year of schooling. Indicate the diploma or degree received for the highest level of schooling he/she had completed.

**IN THE FIVE YEARS BEFORE THE ACCIDENT, WERE THERE PERIODS WHEN:*****The accident victim's main occupation was taking care of a child under 6 years of age without pay?***

If the accident victim was looking after someone else's child, please provide, in addition to the information requested, the child's name, date of birth and the reason for taking care of the child. Write this information on a separate sheet of paper and attach it to the form. Remember to indicate the claim number or, if unavailable, the accident victim's Health Insurance Number, at the top of the page.

***The accident victim was unable to hold a job due to illness, an accident, etc.?***

If you answer "Yes" to this question, please indicate the period(s) during which the accident victim was unable to work and explain why (type of illness, disability or accident).

**PROFESSIONAL QUALIFICATIONS**

A certificate of qualification is the basic document a worker must have in order to practice a trade. For this qualification to be taken into consideration, the certificate must have been valid at the time of the accident. The same applies to any professional corporations of which the accident victim was a member. The accident victim must have been a member in good standing of such a corporation on the day the accident took place.

**EMPLOYMENT HISTORY**

It is important to report all the jobs the accident victim held in the five years preceding the accident, beginning with the most recent one. This information will help the SAAQ determine an employment that the accident victim could have held, as well as the amount of any income replacement indemnity to which the accident victim would have been entitled.

If the accident victim had not worked in the five years preceding the accident, please list the last three jobs that person held and provide the dates they began and ended.

*NOTE: If you do not have enough space, use a separate sheet of paper and attach it to the Claim for Death Benefits form. Remember to indicate the claim number or, if unavailable, the accident victim's Health Insurance Number, at the top of the page.*



# 4

## COMPLETING THE OTHER FORMS

### **SCHEDULE 2** Attestation of Income by the Employer

This form must be completed by the accident victim's employer if the accident victim was employed as a salaried worker and had dependants (see the definition of a dependant on page 13).

**Schedule 2 – Attestation of Income by the Employer** must be sent to the SAAQ within six days after the SAAQ asks that it be completed.

**IMPORTANT:**

Remember to complete the first part of the form, entitled **Accident Victim**.

## SCHEDULE 3

### Confirmation of Employment Insurance Benefits Lost/ Confirmation of an Employment-Assistance Allowance Lost

This form must be completed by:

- » the accident victim's local Service Canada Centre if the accident victim had been receiving Employment Insurance benefits and had any dependants;
- » the accident victim's local employment centre (CLE) if the accident victim had been receiving an employment-assistance allowance and had any dependants.

*NOTE: It is possible to lose both Employment Insurance benefits and an employment-assistance allowance due to an accident, in which case the form must be completed by both these centres.*

#### IMPORTANT:

Remember to complete the first part of the form, entitled **Accident Victim**.

## SCHEDULE 4

### Attestation of School Attendance

This form must be completed by the educational institution in the following cases:

- » If the **accident victim was** 16 years of age or older and was a student or officially admitted to a program of study at the time of the accident, the form must be completed for the accident victim.
- » If any of the **accident victim's children** were 18 years of age or older and were enrolled as students at the time of the accident, the form must be completed for those children.

If additional forms are necessary, you may use a photocopy.

#### IMPORTANT:

Remember to complete the first part of the form entitled **Student**.



