

Claimant Report - Exposure to Atomic Radiation

This form is in connection with your claim for pension and medical treatment and the information you supply will assist in deciding eligibility for benefits under the Veterans' Entitlements Act 1986 and/or Military Rehabilitation and Compensation Act 2004. In the event of an appeal against a decision, this information may be provided to the Veterans' Review Board, Administrative Appeals Tribunal or Federal Court.

Veteran's Details

Surname	Given Names	DVA File Number

Report Detail

The Repatriation Medical Authority defines atomic radiation as "ionising radiation excluding:

- (i) natural background radiation;
- (ii) therapeutic radiation; and
- (iii) radiation from diagnostic procedures."
- 1. **During service**, was there exposure to atomic radiation?
 - **No** *Please sign the form and return it to the Department*
 - **Yes -** Please provide details, being as specific as possible:
 - (a) When did the exposure to atomic radiation occur?

 - (b) How long did the exposure last? (ie how many minutes, hours, days or weeks)

- (c) Where did the exposure to atomic radiation occur?
- (d) What were the circumstances that resulted in exposure to atomic radiation?

- 2. Was there exposure to atomic radiation outside of service?
 - **No** *Please sign the form and return it to the Department*
 - **Yes** Please provide details, being as specific as possible:
 - (a) When did the exposure to atomic radiation occur?

(b) How long did the exposure last? (ie how many minutes, hours, days or weeks)

(c) Where did the exposure to atomic radiation occur?

(d) What were the circumstances that resulted in exposure to atomic radiation?

Claimant's Signature

You are reminded that:

- The Declaration you signed on the claim form also covers the information you supply on this form.
- There are penalties for knowingly making false or misleading statements.