

Last Name	First Name	Case I.D.
Address		Telephone Number ()
Postal Code		

Please read:

- This request must be completed and returned to the office within 30 (thirty) calendar days of receiving this form. All decisions can be reviewed internally. An internal review is an efficient and informal review of a decision to ensure that it is consistent with the legislation, regulations and policy directives.

When you request an internal review:

- Someone other than the person who made the decision to vary, suspend or cancel your assistance or to deny your application will review the facts of your case and will either confirm or change the decision.
- You **MAY** receive a call from the person who is reviewing your case.
- You should provide the office with any additional information you have that could help in the review of the decision.
- We must complete the review within (ten) 10 days of receiving your written request for the review.
- You will be informed, in writing, of the internal review decision
- Please attach a copy of the original decision letter.

You may withdraw your request for an internal review. However, if you withdraw your request, you lose your right to appeal the decision to the Social Benefits Tribunal.

I, _____, wish to have a review of the eligibility decision made on _____
for the following reason(s): Yr. Mo. Day

If you need more space, please use another sheet of paper

Signature

Date

- Please return to:**
- 10 Peel Centre Dr., Suite B PO Box 2700, STN B Brampton ON L6T 0E6
 - 7120 Hurontario Street, PO Box 3600, RPO Streetsville, Mississauga ON, L5M 0T3

For Office Use Only			
Review Decision:			
<input type="checkbox"/> Upheld	<input type="checkbox"/> Reversed	Date	Supervisor
<input type="checkbox"/> Varied	<input type="checkbox"/> Withdrawn		