



Labour and Advanced Education
Travail et Éducation postsecondaire

**CLAIMANT REFERRAL
SECTION 25 OF THE EI ACT- COMMUNITY COORDINATOR**

The purpose of this form is to document:

- Your referral to the employment activity described in Part B below for the purposes of Section 25 of the Employment Insurance (EI) Act, and
- Your agreement to be referred to the employment activity

PART A- CLAIMANT INFORMATION:

SURNAME		GIVEN NAMES AND INITIALS		S.I.N.	
PERMANENT RESIDENCE- ADDRESS			TEMPORARY RESIDENCE -ADDRESS		
CITY	PROVINCE	CITY	PROVINCE		
POSTAL CODE	TELEPHONE	POSTAL CODE	TELEPHONE		

PART B- DESCRIPTION OF EMPLOYMENT ACTIVITY:

COMMUNITY COORDINATOR'S NAME	CC AGREEMENT NO.	AREA CODE & TELEPHONE NO.
RETURN TO WORK ACTION PLAN- Attached	Community Coordinator's intent to support the claimant to an employment activity, including the date that the client requested assistance from the CC.- Attached	
SELF- EMPLOYMENT- COMMUNITY COORDINATOR		SKILLS DEVELOPMENT- COMMUNITY COORDINATOR
Name of Institute _____		Course Name _____
START OF INTERVENTION Year Month Day	END DATE OF INTERVENTION Year Month Day	

PART C- CERTIFICATION AND AGREEMENT

I certify that I have read and understand the information on the reverse side of this form explaining the conditions of my entitlement to receive EI benefits while I am participating in the employment activity described above in Part B if I am referred to the activity by Employment Nova Scotia. I agree to be referred by Employment Nova Scotia to the employment activity.

CLAIMANT'S SIGNATURE	DATE YEAR MONTH DAY
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OFFICIAL USE

SYSTEM INPUT DATE YY MM DD	START DATE OF SECTION 25 REFERRAL YY MM DD	END DATE OF SECTION 25 REFERRAL YY MM DD	
AMENDMENTS ONLY	START DATE YY MM DD	END DATE YY MM DD	REASON CODE
GROSS WEEKLY EI BENEFIT RATE	EI BENEFIT PERIOD END DATE YYYY MM DD		
PARTICIPANT'S SIGNATURE		DATE YYYY MM DD	
For the purposes of Section 25 of the EI Act the participant is hereby referred to the training activity described above in Part B of this form.	APPROVED	NOT APPROVED	
SIGNATURE FOR EMPLOYMENT NOVA SCOTIA	YYYY MM DD		

General Information and Conditions for Section 25 Referral to Employment Activity

General information

If you are a claimant and wish to participate in an employment activity under an Employment Benefit, YOU MUST be referred to the employment activity by Employment Nova Scotia in order to maintain your eligibility to continue receiving EI benefits during your benefit period while participating in the employment activity. Under Section 25 of the *Employment Insurance (EI) Act* and the EI Regulations, a claimant is considered unemployed, capable of and available for work and, therefore, eligible to receive EI benefits, when the claimant is:

- a. Attending a course or program of instruction or training at the claimant's expense, to which Employment Nova Scotia has referred the claimant; or
- b. Participating in an employment activity under the Self-Employment and Skills Development Employment Benefits to which Employment Nova Scotia has referred the claimant.

You will maintain your eligibility to receive EI benefits while you participate in the employment activity in accordance with your Return-To-Work Action Plan, but only to the end of your EI benefit period. If your entitlement to EI benefits has not expired at the end of your intervention, you may continue to receive such EI benefits under the same conditions that prevailed before you were referred under Section 25.

Conditions

You must carry out the employment activity described in your Return to Work Action Plan. The provisions of the EI Act stipulate that you may be disqualified from receiving EI benefits if:

- a. Employment Nova Scotia, with your agreement, referred you to a course or program of instruction or training or any other employment activity for which assistance has been provided under employment benefits; and
- b. Employment Nova Scotia has terminated the referral because:
 - a. Without good cause, you have not attended or participated in the course, program or employment activity or
 - b. Without good cause, you have withdrawn from the course, program or employment activity, or
 - c. The organization providing the course, program or employment activity has expelled you from it.

Privacy/ Access to Information

I have been informed that information on this form is collected under the authority of the Employment Insurance Act, and the Nova Scotia Freedom of Information & Protection of Privacy Act and is to be used for the administration of the employment benefit or support measure to which you have applied. Under the provisions of the Nova Scotia Freedom of Information and Protection of Privacy Act individuals have the right to protection of and access to their personal information. To obtain access to, or to request correction of your personal information collected and used by NS Labour & Advanced Education please contact the Department's Information Access & Privacy Manager by email LAEaccess@gov.ns.ca or phone (902) 424-8472. The personal information collected will only be used and disclosed in keeping with the access and privacy provisions of the Nova Scotia Freedom of Information and Protection of Privacy Act and the Nova Scotia Personal Information International Disclosure Protection Act. Personal information provided may be shared with Revenue Canada in keeping with the data-sharing provisions of the Labour Market Development Agreement.

While the completion of this form is optional, failure to do so may result in non-referral under Section 25.