



Dear:

On \_\_\_\_\_, you met with ministry staff to review your eligibility for assistance and ensure that you continue to meet the criteria for the Persons with Persistent Multiple Barriers (PPMB) category. At that appointment, you were provided a medical report form for your doctor to complete and you were told to return the completed form by \_\_\_\_\_.

**Ministry records indicate you did not return the completed medical report form. Without this report, the ministry can not determine that you meet the criteria for the PPMB category, as set out in Section 2 of the Employment and Assistance Regulation. Therefore, you no longer qualify for the PPMB category and the higher rate of assistance and supplements associated with this category.**

You will continue to receive the higher rate of assistance and general health supplements for three months to allow time for you to plan for reduced assistance. The reduction will take effect on the cheque issued at the end of \_\_\_\_\_.

You may request a reconsideration of this decision. You have 20 business days from receipt of this letter to submit a completed Request for Reconsideration form. This form may be obtained by contacting your Employment and Assistance Centre.

To assist clients towards sustainable employment, independence and self-reliance, the ministry has introduced the Employment Plan. As you now have employment obligations, ministry staff will set up an appointment to assist you in developing your plan.

If you have any questions or require additional information, please contact your Employment and Assistance Centre at \_\_\_\_\_, or toll-free through Enquiry BC at 1 800 663-7867.

Sincerely,

Employment and Assistance Worker

EIA3071(05/07/05)