

Disability Checklist

Name:

Case Number:

<u>Document/Action</u>	<u>Status</u>	<u>Progress Note</u>
Online Application and Income Eligibility Verified		
VA Form 21-22a		
Engagement Agreement		
SF 180		
Authorization To Disclose Protected Health Information		
DD Form 2870 & Copy of Government ID (In-Service Medical Records)		
NA Form 13036 Authorization For Release of Military Medical Patient Records		
Power of Attorney		
Sworn Statements		
Income Statements (Employment, Social Security, ect)		
Marriage Certificate (if applicable)		
Birth Certificates for Dependents (if applicable)		
Previous VA Correspondence		