



## Annex F: Lost security clearance

(Paragraph 21 i) of the [Agreement<sup>1</sup>](#))

### Definition

Claims with respect to the consequences of a loss of security clearance as a result of pay issues directly attributable, in whole or in part, to the employee's Phoenix pay issues.

The term "in whole or in part" means that Phoenix was the sole direct cause or it was one of the direct and significant causes.

The threshold of \$1,500 **applies** to these claims.

### Supporting documentation

Please only include information and documents that are relevant to your claim. The following must be submitted with this claim form, as applicable:

- documented evidence of loss of security clearance due to Phoenix pay issues. This can include security screening and briefing documents.
- documentation to demonstrate the consequences of the loss of security clearance. This documentation can include emails, records of discussions from human resources and/or managers and/or security officers conducting the security clearance evaluation, and any other stakeholder from the date(s) of pay issues to the date of loss of security clearance.

### Privacy notice statement

The personal information requested in this form is collected under the authority of the *Financial Administration Act*. The information submitted via this form will be combined with pay information in a database of pay information held within the Treasury Board of Canada Secretariat (TBS) in order to:

- determine eligibility
- assess your payment amount in accordance with the Damages Agreement

Refusal to provide the requested personal information will result in TBS not being able to process the claim. The information you provide will be validated against a database of pay information held within TBS in order to:

- confirm eligibility
- calculate recommended payments based on claim information

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<sup>1</sup> Agreement of the Damages Caused by the Phoenix Pay System, <https://www.canada.ca/en/treasury-board-secretariat/topics/pay/phoenix-pay-system/damages-caused-phoenix-pay-system.html>

If your claim is accepted and a payment is issued to you, your Social Insurance Number (SIN) will be obtained from the Public Services and Procurement Canada (PSPC) database of pay information in order to issue you a T4 and/or RL-1 tax slip and will be shared with Canada Revenue Agency and/or Revenu Québec for income tax purposes. The Personal information you provide is being collected by the TBS Claims Office and may be shared with PSPC and the last federal organization of employment for that organization to issue payment. Personal information will be protected, used and disclosed in accordance with the *Privacy Act* and as described in Personal Information Bank TBS PCE 742 (Claims and Compensation for damages related to the Phoenix Pay System) and in Personal Information Bank PSU 931 (Accounts Payable). Your information may also be used or disclosed for financial reporting and program evaluation. Under the *Privacy Act*, individuals have a right to access and correct their personal information. If you wish to avail yourself of these rights or require clarification about this privacy notice statement, please contact the TBS Access to Information and Privacy Coordinator by email at [atip.aiprp@tbs-sct.gc.ca](mailto:atip.aiprp@tbs-sct.gc.ca). If you are not satisfied with the response to your privacy concern, you may wish to communicate with the Office of the Privacy Commissioner by telephone at 1-800-282-1376 or by email at [info@priv.gc.ca](mailto:info@priv.gc.ca).

**I certify that I have read this privacy notice statement**

**I consent to the disclosure of my personal information to the entities listed above for the purposes of processing my claim**

**To be completed by the claimant**

If you have an existing claim for Severe Impacts and Other Demonstrable Cases Caused by the Phoenix Pay System, ensure your claim number is added to each annex and each supporting document that you include in this submission.

**Claim number:**

**1. Were you terminated from the public service as a result of the loss of your security clearance?**

Yes                      No

**If no, please complete questions 2 and 3**

**If yes, please provide a chronology of events with dates explaining your loss of security clearance and termination. Please ensure supporting documentation is provided.**

Date (yyyy-mm-dd)	Description of event

**2. Please complete the following table to provide a chronology with dates of events in relation to your pay issues and how they impacted your security clearance. Please ensure supporting documentation is provided.**

From (yyyy-mm-dd)	To (yyyy-mm-dd)	Pay issue	Impact on security clearance

3. Were you placed in an alternate position with a different security level as a result of losing your security clearance?

Yes                      No

If yes, please complete the following table to provide a chronology of events with dates describing the change in your position. Please ensure supporting documentation is provided.

From (yyyy-mm-dd)	To (yyyy-mm-dd)	Group and level of substantive position	Group and level of alternate position	Pay implications of vacating substantive position

4. Did you incur expenses directly associated with the loss of your security clearance (i.e. fees for professional services, financial penalty charges)?

Yes                      No

If yes, please complete the following table. Please ensure supporting documentation is provided.

Date (yyyy-mm-dd)	Amount paid	Description of expense or fee

**Reminder:** Claimants may submit a claim for compensation under more than one category of damages. Please complete all annexes of this form that apply to your situation.