



**Assessing Exposure to the September 11, 2001 Attacks –  
Pentagon or Shanksville, Pennsylvania**

Complete this form if you were present at the Pentagon or Shanksville, PA sites. If you were present at the New York City Disaster Area, please use the version of the form specific to that site.

For the purposes of completing this form, please use the following definitions:

- A **Responder** is a worker or volunteer who provided rescue, recovery, demolition, debris removal, and related support services in the aftermath of the September 11, 2001 attacks on the Pentagon or the Shanksville, Pennsylvania site.
  - A **Non-Responder** is a person who was present at the Pentagon in the aftermath of the September 11, 2001, terrorist attacks as a result of their work, residence, or attendance at school, childcare, or adult daycare.
- If the Claimant was a **Responder** to the Pentagon or Shanksville, Pennsylvania site, complete the form starting on this page.
  - If the Claimant was a **Non-Responder** at the Pentagon, complete the form starting on page 3.

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**Claimant's Name:** \_\_\_\_\_

**VCF Claim Number:** VCF \_\_\_\_\_

**1. Indicate the site where the Claimant was located:**

Pentagon     Shanksville, Pennsylvania    Specify Location: \_\_\_\_\_

**2. Dates of response and recovery service (MM/DD/YYYY):**

Start: \_\_\_\_\_ Finish: \_\_\_\_\_

Comments (optional):

**3. Average hours per day:** \_\_\_\_\_

**4. Estimate of total time engaged in response and recovery work:**

\_\_\_\_ Days    \_\_\_\_ Weeks    \_\_\_\_ Months

Comments (optional):



