

Citation: *A. K. v. Canada Employment Insurance Commission*, 2015 SSTGDEI 47

Date: March 12, 2015

File number: GE-14-3308 and GE-14-3309

GENERAL DIVISION – Employment Insurance Section

Between:

A. K.

Appellant

and

Canada Employment Insurance Commission

Respondent

Decision by: Alyssa Yufe, Member, General Division – Employment Insurance Section

Heard by Teleconference on December 2, 2014, Montreal, Quebec

REASONS AND DECISION

PERSONS IN ATTENDANCE

The Appellant attended the telephone hearing on December 2, 2014 by way of telephone conference.

No one else was in attendance.

DECISION

Qualifying Conditions: Hours

[1] The Member of the Social Security Tribunal, General Division, Employment Insurance Section (the “Tribunal”) finds that the Appellant did not have a sufficient number of hours to qualify for benefits in her qualifying period, pursuant to section 7 of the Act. The appeal is, accordingly, dismissed.

Antedate

[2] The Member of the Social Security Tribunal, General Division, Employment Insurance Section (the “Tribunal”) finds that the Appellant has not proven that she had good cause for the entire period of the delay. The appeal is, accordingly, dismissed.

INTRODUCTION

[3] The Appellant filed an initial claim for benefits on March 6, 2014 (Exhibit GD3-13).

[4] The Canada Employment Insurance Commission (the “Commission”) decided on April 10, 2014, that it was unable to pay the Appellant benefits because the Appellant was a new entrant/reentrant and required 910 hours of insurable employment in her qualifying period (between March 3, 2013 and March 1, 2014) to qualify for benefits and she only had 428 hours of insurable employment (GD3-19, File 2).

[5] The Commission decided on July 9, 2014 that the Appellant's claim could not start on November 10, 2013 because she did not prove that between November 10, 2013 and March 5, 2014, she had good cause for the delay (GD3-19).

[6] The Appellant filed Request for Reconsiderations with the Commission. The Commission decided on June 12, 2014 that the Appellant was not a re-entrant or new entrant and that she only required 595 hours of insurable employment (GD3-32, **File GE-14-3308 ("File 1")**). The Commission decided on August 21, 2014 to maintain its original decision with respect to the antedate issue (GD3-33, **File GE-14-3309 ("File 2")**).

[7] The Appellant filed a Notice of Appeal with the Tribunal on August 27, 2014 (GD-2).

[8] On September 19, 2014, the Tribunal decided to join the appeal of the qualifying condition decision based on hours File 1, with the appeal of the antedate decision in File 2 (GD5). The Tribunal also decided by way of interlocutory decision that the appeals were not late and it allowed them to proceed (GD6).

(All references herein will be to File 1, unless otherwise specified that they are to File 2).

FORM OF HEARING

[9] The hearing was heard via teleconference for the reasons indicated in the Notice of Hearing dated September 24, 2014.

ISSUES

Qualifying Conditions, Hours

[10] Whether or not the Appellant had a sufficient number of hours in his/his qualifying period in order to qualify for regular benefits pursuant to section 7 of the *Employment Insurance Act* S.C. 1996, c. 23 (the "Act").

Antedate Request

[11] Whether or not the Appellant’s initial claim for benefits for employment insurance benefits can be antedated pursuant to subsection 10(4) of the *Employment Insurance Act*, S.C. 1996, c. 23 (the “Act”)?

THE LAW

Qualifying Conditions:

[12] Subsection 7(2) of the Act stipulates that in order to qualify for employment insurance benefits, an insured person must (a) have experienced an interruption of earnings from employment, and (b) must also have acquired, in his/her qualifying period, at least the number of hours of insurable employment set out in the table within that subsection, in relation to the regional rate of unemployment where the person normally resides.

[13] The table in paragraph 7(2)(b) provides as follows:

TABLE	
Regional Rate of Unemployment	Required Number of Hours of Insurable Employment in Qualifying Period
6% and under	700
more than 6% but not more than 7%	665
more than 7% but not more than 8%	630
more than 8% but not more than 9%	595
more than 9% but not more than 10%	560
more than 10% but not more than 11%	525
more than 11% but not more than 12%	490
more than 12% but not more than 13%	455
more than 13%	420

Additional Considerations: New Entrant/Re-entrant

[14] According to subsection 7(4)(a) of the Act, an insured person is a new entrant or a re-entrant to the labour force if, in the last 52 weeks before their qualifying period, the person has had fewer than 490 hours of insurable employment.

[15] Subsection 7(3) provides that an insured person who is a new entrant or a re-entrant to the labour force qualifies for benefits if the person (a) has had an interruption of earnings from employment; and (b) has had 910 or more hours of insurable employment in their qualifying period.

[16] Pursuant to section 8(1) of the Act, the qualifying period of an insured person is the shorter of: (a) the 52-week period immediately before the beginning of a benefit period under subsection 10(1); and, (b) the period that begins on the first day of an immediately preceding benefit period and ends with the end of the week before the beginning of a benefit period under subsection 10(1).

Antedate Request:

[17] **Subsection 10(4) of the Act provides as follows:**

10 (4). An initial claim for benefits made after the day when the claimant was first qualified to make the claim shall be regarded as having been made on an earlier day if the claimant shows that the claimant qualified to receive benefits on the earlier day and that there was good cause for the delay throughout the period beginning on the earlier day and ending on the day when the initial claim was made.

Claim Procedure:

[18] Sections 48, 49 and 50 of the Act and section 90 of the *Employment Insurance Regulations*, SOR /96-332 (the “Regulations”), provide regarding claim procedure:

48. (1) No benefit period shall be established for a person unless the person makes an initial claim for benefits in accordance with section 50 and the regulations and proves that the person is qualified to receive benefits.

(2) No benefit period shall be established unless the claimant supplies information in the form and manner directed by the Commission, giving the claimant’s employment circumstances and the circumstances pertaining to any interruption of earnings, and such other information as the Commission may require.

(3) On receiving an initial claim for benefits, the Commission shall decide whether the claimant is qualified to receive benefits and notify the claimant of its decision.

49. (1) A person is not entitled to receive benefits for a week of unemployment until the person makes a claim for benefits for that week in accordance with section 50 and the regulations and proves that

(a) the person meets the requirements for receiving benefits; and

(b) no circumstances or conditions exist that have the effect of disentitling or disqualifying the person from receiving benefits.

[...]

50. (1) A claimant who fails to fulfil or comply with a condition or requirement under this section is not entitled to receive benefits for as long as the condition or requirement is not fulfilled or complied with.

(2) A claim for benefits shall be made in the manner directed at the office of the Commission that serves the area in which the claimant resides, or at such other place as is prescribed or directed by the Commission.

(3) A claim for benefits shall be made by completing a form supplied or approved by the Commission, in the manner set out in instructions of the Commission.

(4) A claim for benefits for a week of unemployment in a benefit period shall be made within the prescribed time. [...]

[19] Sections 90 and 91 of the Regulations provide:

90. Where any information is provided to the Commission in electronic or other form for the purposes of the Act or the regulations made under the Act, it shall be provided in a form and manner approved by the Commission.

91. (1) A claimant who makes an initial claim for benefits, or a claim for benefits for a week of unemployment, by telephone or other electronic means, and provides the information required by section 50 of the Act, is deemed

(a) to have expressed an intention to make a claim for benefits and to have made such a claim for the purposes of section 48, 49 or 152.1 of the Act, as the case may be; and

(b) to have supplied the information recorded on the dated printout from the Commission's computerized benefit pay system as responses to the questions posed by the interactive response system by telephone or other electronic means.

(2) A claimant who provides their Social Insurance Number and the following information by telephone or other electronic means is deemed to have signed their respective claim for benefit:

(a) in the case of an initial claim for benefits, their date of birth and, if the initial claim is made by electronic means, the maiden name of the claimant's mother; and

(b) in the case of a claim for benefits for a week of unemployment, their personal identification number.

(3) A claim for benefits that is made by the means referred to in subsection (1) is deemed to have been made on the day that the information is received and recorded by the Commission's computerized benefit pay system.

(4) For greater certainty, sections 38 and 135 of the Act apply to a declaration made by electronic means.

(5) The acts and omissions specified in subsections 38(1) and 135(1) of the Act are deemed to include the acts and omissions of a person who knowingly attempts to interfere with the operation of the electronic systems used in the administration of the Act, and the penalty provided for by subsection 38(2) of the Act and the punishment provided for by subsection 135(3) of the Act are deemed to include the right to refuse access to those electronic systems to such a person.

EVIDENCE

Appellant Evidence:

[20] The Appellant filed an initial claim for benefits on March 6, 2014 (Exhibit GD3- 13). The Appellant worked at the employers: “SS” and her last day of work was March 8, 2013 and then November 8, 2013 when she quit. Marc-Andre of the Commission assisted her in completing her application (Application for Benefits, GD3-2 to GD3-14).

[21] There are medical/blood test results for the Appellant dated August 5, 2013 or May 8, 2013 from synlab Suisse SA (GD2-26).

[22] There is a letter from the Appellant dated December 2, 2009 to the AMT FUR WIRTSCHAFT wherein she asked to be reconsidered for a job opportunity (GD2-29 to 30).

[23] There appears to be a job offer to the Appellant from AMT FUR WIRTSCHAFT dated December 9, 2009 and a related completed form (GD2-27 and 28).

[24] The Appellant submitted a handwritten request for an antedate on June 25, 2014 and stated that she applied for benefits in December 2013. She stopped working in November 2013. She went to Europe for a job. She did not get her visa. She believes that she has enough hours of insurable employment (GD2).

[25] By letter dated July 9, 2014, “VF” advised the Commission that the Appellant gave her work statements and relevant documents for her application for benefits and that she mailed the documents to the Commission during the first week of December 2013 (GD2-18).

[26] The Appellant drew a time line, which showed that she worked from December 2012 to March 2013 for 413 insurable hours at “SS” and for 333 hours at F for a total of 768 hours during her qualifying period and another 392 hours at “SS” from March 2013 to March 2014 (GD2-20).

[27] The Appellant drew another time line, which showed that between November 2011 and November 2012, she accumulated 333 insurable hours at F and that she had 413 and 392 between November 2012 and November 2013 (GD2-20).

[28] In the request for reconsideration and Notice of Appeal, the Appellant advised that she has enough insurable hours. She was told that she would receive benefits and after waiting 6 months, she was told again that she did not qualify. She would like her claim antedated to November 8, 2013, which was the date that she stopped working. She applied for benefits in December 2013 and mailed in her records of employment from “FDN” and “SS”. In March 2014, she was told that her original application could not be found. She left for Europe on November 15, 2013 to work in a hotel in Switzerland. She was supposed to start working for her new job in December and when she applied for her work visa, she was told to wait until February. She found out that the “Swiss were refusing work visas” and applied for her benefits in December 2013. She returned home on March 1, 2014 (Request for Reconsideration, May 5, 2014, GD3-24 and Notice of Appeal, GD2).

[29] The Appellant attached pay statements from “SS” dated March 13, 2013 and November and December 2012 (GD2-8 to 9).

[30] There are additional pay statements from “FDN” for September and October 2012 (GD3-20 to 21). There is also a T4 form from 2012, which shows employment income of \$4,007.02 from F and \$580.00 from SS (GD3-22). On a pay statement from FDN at GD3-25, in a handwritten note, the Appellant appears to allude to harassment and comments, which were made to her (GD3-25).

[31] There is another pay statement from March 9, 2013 at GD2-8 (File 2).

Commissions Conversations with the Appellant

[32] The Appellant advised that she was in Europe from November 10, 2013 to March 2014. The Commission instructed her to complete an antedate request (Commission notes, June 25, 2014, GD3-15).

[33] The Appellant explained that she got a job offer before she quit her last job. She went to Europe for the job and it did not work out. She came back on March 2, 2014 and tried to find a job in Canada. Her friend sent her papers in while she was outside of Canada. She would like an antedate to November 8, 2013 (Commission notes, July 7, 2014, GD3-17).

[34] The Appellant quit her job in November 2013 because she wanted to go live and work in Switzerland. She has a lot of health issues. She wanted to live in the mountain an fresh air. She did not apply to employment insurance at that time because she wanted to go work in Switzerland. In September 2013, she spoke with someone at the Alpina Hotel in Sargans. The Employer told her that the season starts on December 15, 2013. She was sure to find a job there because she speaks German and English fluently. Unfortunately, Switzerland immigration established a new law and did not accept her request. The Commission agent explained to the Appellant that it was not sufficient that her friend sent in her Record of Employment, she had to establish a claim. The Commission noted that the Appellant had also requested an antedate in 2006 so she knew of the maximum delay to file for benefits. In 2006, she was sick and was not able to come back to Canada. She did not file this time because she planned to go live in Europe, work there, and not come back (August 15, 2014, Commission notes, GD3-32).

Commission Evidence:

[35] On April 15, 2014, the Commission sent the Appellant a notice that she should attend a job search activity at the Commission office on May 8, 2014 (GD2-25).

[36] According to the information at GD3-17, the unemployment rate for the economic region of Montreal was 8.1 percent between February 9, 2014 and March 8, 2014. This shows that with 595 hours, the Appellant would have been entitled to between 18 and 42 weeks of benefits (GD3-17).

[37] According to the information at GD3-27 of File 2, the unemployment rate for the economic region of Montreal was 8.4 percent between November 10, 2013 and December 7, 2013. This shows that with 595 hours, the Appellant would have been entitled to between 18 and 42 weeks of benefits (GD3-27, File 2).

[38] According to the information at GD3-28, File 2, the unemployment rate for the economic region of Montreal was 8.1 percent between December 8, 2013 and January 11, 2014. This shows that with 595 hours, the Appellant would have been entitled to between 18 and 42 weeks of benefits (GD3-28, File 2).

[39] The Appellant was informed that she was considered to have had 428 hours, where she needed 595 (Commission notes, June 12, 2014, GD3-31).

[40] The computer screen print out at GD3-18, shows that the Appellant's benefit period commenced on March 2, 2014 (GD3-18).

Evidence From Employers

[41] According to the record of employment ("ROE 1") dated March 11, 2013, the Appellant worked at the employer "**SS**" from December 15, 2012 to March 9, 2013 and accumulated 435 insurable hours. The reason for issuing the ROE was "M" (GD3-15 and 27).

[42] According to the record of employment ("ROE 2") dated November 13, 2013, the Appellant worked at the employer "**SS**" from August 23, 2013 to November 9, 2013, and accumulated 392 insurable hours (ROE). The reason for issuing the ROE was "E" for (GD3- 16 and 26).

[43] The Commission contacted the Employer FDN and asked for the ROES for 2012 (GD3-29, File 2). The Employer advised that the Appellant worked for 333.40 hours in 2012 and that her gross income was \$4,007.02. Her vacation pay was \$154.12 and she had holiday pay for Thanksgiving of \$73.80. The Employer does not recall the reason for the termination of the employment (Commission notes, June 11, 2014, GD3-30).

[44] According to the record of employment ("ROE 3") dated June 11, 2014, the Appellant worked at the employer "**FDN**" from September 14, 2012 to November 9, 2012 and accumulated 333.40 insurable hours (ROE). The reason for issuing the ROE was "E" (GD3-34).

[45] According to the record of employment ("ROE 4") dated June 23, 2014, the Appellant worked at the employer "**Canada Inc.**" from June 16, 2014 to June 17, 2014 and accumulated 13.85 insurable hours (ROE). The reason for issuing the ROE is not blank or not legible. (GD2-24, GD3-26).

Testimony at the hearing:

[46] The Appellant testified under solemn affirmation.

[47] The Appellant explained that she left Canada in November 2013 to attempt to obtain employment in Europe due to her health issues. It was only after she arrived in Europe that she understood that she would have difficulty securing employment because there were challenges to obtaining her work visa.

[48] In December 2013 she was in Switzerland and she mailed all of the records of employment, which she had in her possession to her friend.

[49] When the Tribunal inquired as to why she did not go on-line to complete an application or why she did not mail the documents and her application to the Commission itself, she advised that she did not have the Commission's address and that she also did not have Internet access.

[50] The Appellant confirmed that she and her friend only mailed her ROEs to the Commission and that neither she nor her friend mailed in any application or any other document to the Commission prior to March 2014.

[51] The Appellant also related the challenges, which she having securing employment and her unfortunate and negative experiences in attempting certain jobs despite her positive attitude and continuing efforts.

SUBMISSIONS

[52] The Appellant submitted that her claim should be antedated and that she had sufficient hours for the following reasons:

- a) The calculation of her hours is wrong and she is not a new entrant or re-entrant and she should have sufficient hours (GD3, GD2, and testimony);
- b) She has been struggling to find stable employment and has been unable to secure any (testimony);
- c) She has health issues (testimony); and,

- d) She would have mailed her application to the Commission office but she did not have the address and she did not have access to the Internet (testimony)

[53] The Respondent submitted as follows:

Qualifying Conditions: Insurable Hours

- a) Subsection 7(3) of the Act provides that in order to qualify for employment insurance benefits, an insured person who is a new entrant/reentrant must (a) have experienced an interruption of earnings from employment, and (b) must also have acquired, in his/her qualifying period, at least 910 hours of insurable employment (GD4-3);
- b) Following the Appellant's request for reconsideration, the Commission modified its decision regarding the required number of hours. Instead of 910 hours, the Appellant requires 595 hours and accumulated only 428 hours which was insufficient to establish a claim for benefits (GD4-2);
- c) The Commission also determined that the Appellant was not a new entrant or reentrant because she had at least 490 hours of labour force attachment in the 52 weeks preceding her qualifying period (GD4-3);
- d) Subsection 7(2) of the Act stipulates that in order to qualify for benefits, an insured person must have a) experienced an interruption of earnings and b) must have acquired, in his or her qualifying period, at least the number of hours of insurable employment set out in the table within that subsection, in relation to the regional rate of unemployment where the person normally resides (GD4-3);
- e) In this case, the claimant's qualifying period was established from March 3, 2013 to March 1, 2014, pursuant to paragraph 8(1)(a) of the Act (GD4-3);
- f) Accordingly, on the basis of subsection 7(2) of the Act, the minimum requirement for the claimant to qualify for benefits was 595 hours based on the rate of unemployment of 8.1% in the region where she resided. The Appellant accumulated only 428 hours (GD4-3);

- g) The requirements under section 7 of the Act do not allow any discrepancy and provide no discretion (*Levesque* 2001 FCA 304) (GD4-3);
- h) The Canada Revenue Agency (“CRA”) has exclusive jurisdiction to determine the number of hours an insured person has had in insurable employment pursuant to section 122 of the Act (*Didiodato* 2002 FCA 345)(GD4-4);

Antedate (File 2)

- i) Even if the Commission would have received the information by mail, the Appellant also needed to apply for benefits by filing an application (GD4-2);
- j) Further verification reveals that no documentation was ever received from the Appellant before her application on March 6, 2014 (GD4-1);
- k) The Appellant failed to show that she qualified to receive EI benefits on the earlier day because she failed to show good cause throughout the entire period of the delay (GD4-1);
- l) Claimants who wish to qualify for an earlier period must first qualify at the earlier date and then must demonstrate that they had *good cause* for the entire period of the delay. In other words, claimants who qualify for and wish to receive employment insurance benefits on an earlier date must demonstrate that they acted as any reasonable person in the same situation would have done to satisfy themselves as to their rights and obligations under the Act (GD4-2);
- m) The ROE provided by the Appellant at GD3-[34] is not within the reference period and cannot be included in the calculation (GD4-3);
- n) The calculation revealed that the Appellant would have had only 827 hours of insurable employment if her claim had been filed on December 1, 2013 and December 8, 2013, where she needed 910 hours (*Simard* 2001 FCA 270) (GD4- 3);
- o) The Appellant “did not act like a reasonable person in her situation would have done to verify her rights and obligations under the Act”. Specifically, she did not expect to

need benefits because she had planned a stay in Europe and work there (GD4-3); and,

- p) Ignorance of the law, even if coupled with good faith is not sufficient to establish good cause. The correct legal test is whether the claimant acted as a reasonable person in his situation would have done to satisfy herself as to her rights and responsibilities (*Kaler* 2011 FCA 266) (GD4-3).

ANALYSIS

Antedate

[54] Pursuant to subsection 10(4) of the Act and the jurisprudence, to succeed in the request for antedate, the Appellant must show that she qualified to receive benefits on the

[55] “Good cause” is not defined in the Act. Resort must, therefore, be had to the jurisprudence.

[56] According to the jurisprudence, to prove good cause, the Appellant must demonstrate that s/he did what a reasonable and prudent person in her/his position would have done in similar circumstances to obtain information regarding her/his rights and the procedure to be followed in seeking benefits (*Mauchel* 2012 FCA 202; *Bradford* 2012 FCA 120; *Innes* 2010 FCA 341; *Albrecht* A-172-85, [1985] 1 F.C. 710 (C.A)).

[57] The jurisprudence has also held that unless there are exceptional circumstances, a claimant must prove that reasonably prompt steps were taken to understand his/her entitlement to benefits under the Act (*Kaler* 2011 FCA 266; *Innes* 2010 FCA 341; *Somwaru* 2010 FCA 336; *Trinh* 2010 FCA 335; *Mehdinasab* 2009 FCA 282).

[58] Following its review of the evidence in the docket and the submissions of the parties, the Tribunal finds that the Appellant has not demonstrated that she had good cause for the delay because she waited until March 2014 to file an application for benefits and this did not demonstrate what a reasonable and prudent person in her position would have done. This is the case, notwithstanding that the Appellant may have forwarded her ROES to her friend from Switzerland and instructed her friend send them into the Commission office via regular mail

(GD2-18). Mailing in ROEs is not sufficient to amount to “making a claim” for benefits as that term is understood in accordance with the Act and section 10(4). While this gesture may have demonstrated the Appellant’s good faith and intention to secure her rights, it did not amount to a proper filing of the application or making of the claim. It cannot even be said that the Appellant acted out of ignorance because given the Appellant’s circumstances and that she had made claims in the recent past, including one in 2006, which involved a request for an antedate, she ought to have known what was expected of her (GD3- 32, File 2).

[59] For greater certainty, when section 10(4) of the Act is read together with section 48 and 50(2) of the Act and section 90 of the *Employment Insurance Regulations*, SOR /96- 332 (the “Regulations”), it is clear that the Appellant was required to file a claim for benefits on-line or at a Commission office. This is also very clear from the Commission website. If the Appellant was going to rely on a friend or a proxy, at the very least, her friend would have had to have commenced filing an application and would have had to have provided the required information.

[60] Although the Tribunal has a great deal of sympathy for the Appellant and her circumstances, especially because of the challenges, which she is facing in securing employment, the Tribunal is mindful of the policy reasons regarding the strict nature of test for antedate (*Rodger* 2013 FCA 222). In this regard, the Tribunal refers to the following *dicta* of Justice Létourneau in *Brace* 2008 FCA 118 who referred to the Federal Court’s decision in *Beaudin*, 2005 FCA 123, and stated as follows:

It is worth noting that subsection 10(4) of the Act is not the product of a mere legislative whim. It contains a policy, in the form of a requirement, which is instrumental in the sound and efficient administration of the Act. On the one hand, this policy helps "to assure the proper administration and the efficient processing of various claims" and "to enable the Commission to review constantly the continuing eligibility of a claimant to whom benefits are being paid [...] Antedating the claim for benefits may adversely affect the integrity of the system, in that it gives a claimant a retroactive and unconditional award of benefits, without any possibility of verifying the eligibility criteria during the period of retroactivity.”

Qualifying Conditions:

[61] The Tribunal finds the Appellant did not have a sufficient number of hours of insurable employment during her qualifying period (March 3, 2013 to March 1, 2014) to qualify for benefits pursuant to section 7 of the Act.

[62] The Tribunal agrees with the Commission's decision on reconsideration that the Appellant was not a new entrant or re-entrant because she had at least 490 hours of labour force attachment in the 52 weeks preceding her qualifying period (GD3-30).

[63] The Tribunal finds that the regional rate of unemployment for the economic region of Montreal was 8.1% between February 9, 2014 and March 8, 2014, in accordance with GD3-17. According to the table in paragraph 7(2)(b) of the Act, the Appellant was required to have had 595 insurable hours of employment in her qualifying period to qualify. The Appellant's qualifying period was from March 3, 2013 to March 1, 2014 pursuant to paragraph 8(1)(a) of the Act. The Tribunal finds that the Appellant only had 428 hours accumulated. The Appellant does not appear to dispute the number of hours that the Commission has calculated in her qualifying period. She has only appeared to have argued that she was not a new entrant or reentrant and that her claim should be antedated.

[64] The Tribunal finds the circumstances sympathetic and the efforts, which the Appellant has made to secure employment noteworthy. The Tribunal, does not, however, have any discretion to remedy the deficit in hours. This is because the law is clear that neither the Commission nor the Tribunal or Court has authority to exempt a claimant from the qualifying provisions of the Act (insurable hours), no matter how sympathetic or unusual the circumstances (*Levesque* 2001 FCA 304; *Pannu* A-147-03; *Knee* 2011 FCA 301).

CONCLUSION

[65] For the foregoing reasons, the appeals with respect to the issue of antedate and qualifying conditions (hours) are dismissed.

Alyssa Yufe
Member, General Division - Employment Insurance Section