

## STATEMENT IN SUPPORT OF MST-RELATED CLAIM

# MST Stressor Statement

*Patterned after VA Form 21-0781a. For claims based on Military Sexual Trauma. The standard of proof is different from regular PTSD claims.*

**READ THIS BEFORE YOU BEGIN**

You don't have to write it all at once. Take breaks. Come back to this.

You don't have to describe what happened in detail. The VA only needs enough to identify the type of incident and timeframe.

Under 38 CFR § 3.304(f)(5), the VA accepts "markers" instead of eyewitness corroboration — things like transfer requests, performance changes, depression, substance use, requesting pregnancy tests, leaving the military early.

If reading or writing about this becomes too much, stop and contact the Veterans Crisis Line (988, press 1) or a Vet Center. You don't have to do this alone.

Veteran name

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Last 4 SSN

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Branch / Era of service

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Claim # (if known)

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**If a C&P exam is scheduled, would you like to request:**

- Same-gender examiner
- Tele-health exam (video, not in-person)
- Vet Center referral instead of VA Medical Center

INCIDENT INFORMATION

# What happened — only what you can share

Approximate date(s) (month/year — best estimate)

Location (base, post, deployment area)

Your unit assignment at the time

**Type of incident (check all that apply):**

- Sexual assault
- Sexual harassment
- Repeated unwanted sexual contact
- Threats of sexual violence
- Other (describe in notes below if comfortable)

**Brief description (optional — include only what you can share):**

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**Was the incident reported at the time?**

- Yes — to whom and when: \_\_\_\_\_
- No (this is the most common — it does NOT weaken your claim)

## MARKERS — § 3.304(f)(5)

**Behavioral markers**

*These behavior changes are accepted by the VA as evidence of an MST event when other corroboration isn't available. Check any that apply to you and add details where helpful.*

- Requested transfer or change of duty station around this time
- Sudden drop in performance evaluations or promotion delays
- Increased use of alcohol or drugs
- Episodes of depression, panic attacks, or anxiety after the incident
- Behavior changes noted by family, friends, or fellow service members
- Visited mental health, chaplain, or medical for vague complaints
- Requested pregnancy or STD tests around this time
- Tested positive for an STD
- Unexplained physical injuries (bruises, etc.) around this time
- Started a relationship, marriage, or pregnancy unusually quickly
- Sought separation from service earlier than planned
- Wrote letters or kept a journal about the event
- Confided in a family member, friend, or fellow service member at the time

**Names of people who knew about behavior changes at the time (if any — optional):**

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ONGOING IMPACT

## How the event affects you today

Mental health symptoms you experience (PTSD, depression, anxiety, etc.):

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Impact on relationships, work, and daily life:

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Treatment received (therapy, medication, Vet Center, etc.):

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**FREE, CONFIDENTIAL MST SUPPORT**

VA MST Coordinator: every VA Medical Center has one. Call your VA and ask for them.

Vet Centers (separate from VA Medical Centers) — readjustment counseling, no records shared with VA hospital.

DAV, VFW, American Legion — accredited VSOs trained on MST claims under 38 CFR § 14.629.

Veterans Crisis Line: 988, press 1, or text 838255.

**DECLARATION**

I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct to the best of my knowledge.

Signature

Date

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