

CONSENT TO RELEASE INFORMATION

The personal information requested on this form is collected under the authority of and will be used for the purpose of administering the *Employment and Assistance Act* and the *Employment and Assistance for Persons with Disabilities Act*. The collection, use and disclosure of personal information is subject to the provisions of the *Freedom of Information and Protection of Privacy Act*. Any questions about this information should be directed to your local Employment and Assistance Centre.

APPLICANT/RECIPIENT
ADDRESS

**CONSENT TO RELEASE
OF INFORMATION BY
FAMILY JUSTICE COUNSELLOR
TO
FAMILY MAINTENANCE WORKER
Family Law Act, section 11**

I, _____ am aware that the Family Law Act and the policies governing Family Justice Counsellors provide that a Counsellor cannot tell anyone, even in Court, anything told by me in confidence to the Counsellor unless I consent to the Counsellor revealing that information. The exceptions to this are if there is information received by a Family Justice Counsellor concerning a child in need of protection, or concerning a criminal or other federal law matter.

Understanding this, I hereby consent to the release by a Family Justice Counsellor of any relevant information concerning the matters of guardianship, parenting arrangements or contact with a child as requested from time to time by a Family Maintenance Worker, in so far as it relates to obtaining support for me and any dependent children in my care.

Date: _____ Signed: _____
(YYYY / MMM / DD)

Witnessed: _____

Please Note:

A Court application for support was filed on _____
Date (YYYY MM DD)

A Court application for support has not been filed yet

Family Maintenance Worker: _____

Address: _____

Phone: _____