

ACKNOWLEDGEMENT AND REQUEST

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.

FM NUMBER

FM

In the maintenance action against:

RESPONDENT/PAYOR/OTHER PARENT:

I have been advised by my Family Maintenance Worker that because of the potential for violence, it is Ministry policy not to proceed with maintenance action on my behalf at this time.

In spite of this, and being fully aware of the potential risks involved, I am requesting the Family Maintenance Program to proceed with maintenance action on my behalf.

ADDITIONAL COMMENTS/REQUEST

CLIENT SIGNATURE

DATE (YYYY MMM DD)

CLIENT NAME (PLEASE PRINT)

WITNESSED:

SIGNATURE

NAME (PLEASE PRINT)