

BC BUS PASS PROGRAM CONSENT TO DISCLOSURE OF INFORMATION

Note: The personal information included in this document is for illustrative purposes only.

This document can be used as an example of how to fill out the BC BUS PASS PROGRAM CONSENT TO DISCLOSURE OF INFORMATION.

If the CONSENT TO DISCLOSURE OF INFORMATION form is **not** filled out correctly, it cannot be used by the BC Bus Pass Program.

If you have additional questions about how to fill out the CONSENT TO DISCLOSURE FORM, please contact the BC Bus Pass Program at 1-866-866-0800.



SR#:

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*. You have the right to revoke this consent at any time. Questions regarding the collection, use, and disclosure of personal information can be directed to an Employment and Assistance Worker of The British Columbia Bus Pass Program by email: visit www.gov.bc.ca/buspassprogram, by phone: 1-866-866-0800, or by mail: PO Box 9985, Strn Prov Govt, Victoria BC V8W 9R6.

Step 1: Who is the Bus Pass Client?

I, JANE S DOE born on 1949-MAY-02 living at 908 TINKERBELL STREET, VICTORIA,
First Name Middle Name(s) Last Name Date of Birth (YYYY-MM-DD) Address of Client City/Town

V8S 1L8, consent to the disclosure inside Canada to JENNIFER SMITH,
Postal Code Name of Individual to receive information

of any personal information currently in the custody or under the control of the Ministry of Social Development and Poverty Reduction that is relevant to my eligibility for the BC Bus Pass Program, for the purpose of JENNIFER SMITH assisting or supporting me in obtaining or renewing a BC Bus Pass.
Name of Individual to receive information

The client giving consent fills in this section.

The 'name of individual to receive information' is the same person as the third party in Step 2.

NOTE: If the Client is incapable of signing this Consent form, proof of legal authority (for example, a copy of the court order naming you as Committee) is required by our program and replaces the need for this form.

Step 2: Who is the Third Party?

This information may be disclosed to:

<u>JENNIFER</u> <small>Contact First Name</small>	<u>W</u> <small>Contact Middle Name(s) (Optional)</small>	<u>SMITH</u> <small>Contact Last Name</small>
<u>IMMIGRANT SUPPORT SERVICES</u> <small>Agency Name (if applicable)</small>	<u>250-555-1234</u> <small>Telephone Number</small>	<u>250-555-4321</u> <small>Fax Number (Optional)</small>
<u>jennifer.smith@email.ca</u> <small>Email Address</small>	<input checked="" type="radio"/> Telephone or <input type="radio"/> Email <small>Preferred Method of Communication (Circle one)</small>	
<u>1234 MEADOW STREET</u> <small>Address</small>	<u>VICTORIA</u> <small>City/Town</small>	<u>V8V 4C2</u> <small>Postal Code</small>

The third party is the individual that consent is being provided to.

Please provide as much information about the third party as possible.

Step 3: How long is the consent valid?

This consent is effective on the date it is signed and will remain valid until I request that it be cancelled.

Step 4: Sign and date the consent

Signatures from the client and a witness are required:

<u>Jane Doe</u> <small>Signature of Person Giving Consent</small>	<u>2020-APR-01</u> <small>Date Signed (YYYY-MM-DD)</small>
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The client must sign and date the consent for it to be valid. If the client is not able sign themselves, please contact the BC Bus Pass Program for more information.

The Witness (over 18) must not be the person to whom disclosure is being authorized or a family member:

<u>PBlack</u> <small>Witnessed by</small>	<input checked="" type="radio"/> Yes or <input type="radio"/> No <small>Over 18 years old? (Circle one)</small>	<u>friend</u> <small>Relationship to Person Giving Consent</small>	<u>2020-APR-01</u> <small>Date Signed (YYYY-MM-DD)</small>
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The witness CANNOT be the third party or a family member of the client. The witness must be over 18 years old.

If the BC Bus Pass Program Consent is not completed in full, it will be rendered invalid and returned to the sender.