BRITISH COLUMBIA | Ministry of Education and Child Care

Affordable Child Care Benefit
Consent to Collect CRA Records

The personal information collected on this form is collected under the authority of the *Freedom of Information and Protection of Privacy Act* for the purpose of administering the *Child Care Subsidy Act*. The *Freedom of Information and Protection of Privacy Act* protects the personal information collected from unauthorized use and disclosure. If you have any questions about the collection, use or disclosure of this information, please call the Child Care Service Centre at 1 888 338-6622 or inquire in writing to the address at the end of this form.

This form is required for the applicant and spouse (if applicable) to consent to collect CRA income records for the purpose of assessing eligibility for the Affordable Child Care Benefit.

I hereby consent to the disclosure of information from my income tax records, and other taxpayer information, by the Canada Revenue Agency to an official of the Ministry of Education and Child Care. The information disclosed will be relevant to, and used solely for the purpose of, determining and verifying my eligibility for child care subsidy and for determining the amount of my benefit under the Affordable Child Care Benefit under the *Child Care Subsidy Act*. The information disclosed by the Canada Revenue Agency to the Ministry of Education and Child Care will be protected from unauthorized use or disclosure and will only be used and disclosed in accordance with the *Freedom of Information and Protection of Privacy Act*.

I also permit the Ministry of Education and Child Care to collect information from my income tax records, and other income tax information, from the Canada Revenue Agency, instead of directly from me.

I also consent to the disclosure of my first and last name, birth date and Social Insurance Number by the Ministry of Education and Child Care to the Canada Revenue Agency. This information will be used by the Canada Revenue Agency to identify the taxpayer information to be disclosed to the Ministry of Education and Child Care.

I further permit the Ministry of Education and Child Care to display my income tax information from the Canada Revenue Agency on my assessment letter, and if registered for My Family Services, on the electronic online portal, for the purpose of describing how financial eligibility was calculated.

This consent permits the Canada Revenue Agency to disclose information from my tax records and other taxpayer information from the two most recent taxation years prior to the year of signature of this consent, the year of the signature, and each subsequent consecutive taxation year for which benefit is requested by me or on my behalf. It may be revoked at any time by sending a notice to the Director of the Child Care Service Centre. The statement of consent and any subsequent revocation can be provided in paper or electronic format.

Applicant Full Legal Name	Social Insurance Number
Applicant Signature	Date Signed (yyyy-mmm-dd)

Spouse Full Legal Name	Social Insurance Number
Spouse Signature	Date Signed (yyyy-mmm-dd)

Once completed, please fax or mail to the Child Care Service Centre

Toll Free Fax 1-877-544-0699
Toll Free Phone 1-888-338-6622

Mailing Address
Child Care Service Centre
PO Box 9953 Stn Prov Govt
Victoria BC V8W 9R3