

Information Sharing – Client Consent

Section 1: Consent to Share

I, (name) _____ born on (DOB) _____ of

House Number _____ Street Name _____ Suburb _____

give my written consent for the length of my tenancy for Housing Tasmania to:

- share relevant information about me to the types of support organisations and / or individuals that I have chosen;
- obtain relevant information about me to Housing Tasmania from the chosen Support Organisations, for the purpose of meeting my housing and support needs;

- | | | |
|--|---|--|
| <input type="checkbox"/> Financial assistance | <input type="checkbox"/> Alcohol & drug services | <input type="checkbox"/> Disability services |
| <input type="checkbox"/> Hospitals / Community Health Services | <input type="checkbox"/> Family violence or sexual assault services | <input type="checkbox"/> Your GP or other medical specialist |
| <input type="checkbox"/> Budgetary advice | <input type="checkbox"/> Child, family or parenting services | <input type="checkbox"/> Alternative accommodation provider |
| <input type="checkbox"/> Practical assistance | <input type="checkbox"/> Mental health services | <input type="checkbox"/> Public Trustees |

Dept. of Veterans Affairs – Income confirmation - DVA Client Reference Number: _____

Other, as specified: _____

Section 2: Do Not Consent to Share

By completing this section, there are some organisations / individuals that I **do not want** my information shared with.

Section 3: Nominated Person

By completing this section, I am giving consent for any conversation to take place about my tenancy including my rental account with:

Name _____ Phone number _____

Relationship to Tenant Spouse De facto Partner

Other (please detail) _____

Section 4: Signature Declaration and Authorisation

I understand that the disclosure of information will only be used, given and received to what is relevant to maintaining my tenancy with Housing Tasmania.

I understand that I can change my mind at any time and revoke or vary consent to share my information. *All personal information about me is kept in accordance with the Personal Information Protection Act 2004.*

Signature: _____ Date _____