

RELEASE OF INFORMATION
APPLICANT

In accordance with section 34(1)(k) (i) and (ii) of the Freedom of Information and Protection of Privacy Act, I/We _____ give Calgary Housing Company staff permission to exchange pertinent personal information with the agency support workers or other people I have listed below.

I understand that Calgary Housing Company staff and the below named person or agency will only be exchanging personal information necessary to assist me in obtaining independent living within a Calgary Housing Company unit.

This release of information in effect from _____ to _____.(Maximum of 1 year)

List of Agencies or People that Calgary Housing Company can contact:

Agency Name	Person to contact	Phone Number
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Agency Name	Person to contact	Phone Number
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Agency Name	Person to contact	Phone Number
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Date: _____

Printed Name: _____

Signature of applicants:

Signature of applicants:

Witness:

NOTICE

This communication is intended ONLY for the use of Calgary Housing Company and may contain information that is confidential or legally privileged. If you are not the intended recipient named above or a person responsible for delivering messages or communication to the intended recipient, YOU ARE HEREBY NOTIFIED that any use, distribution, or copying of this communication or any of the information contained in it is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and then destroy or delete this communication, or return it to us by mail if requested by us. Thank you for your attention and co-operation.