

# PERSONAL INFORMATION DISCLOSURE & REQUEST - PERMISSION FORM

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## TENANT / RESIDENT DETAILS

Name:

Address:

Phone / Mobile:

Evolve Housing has told me that:

- they may need to provide or request information about me (including sensitive information), my circumstances or my tenancy to, or from, a third party (someone outside Evolve), to help me access and receive any assistance I might need or may be eligible for; and
- for them to do this, I will need to give my permission.

I understand that Evolve Housing will:

- protect my personal information;
- only provide my personal information to (or request it from) a third party when it is reasonably deemed necessary by Evolve Housing (or required by law), and only when relevant in connection with my tenancy or where required for me to obtain the service or support I need; and
- upon request, give me a copy of Evolve Housing's Privacy Policy.

I understand that I can:

- withdraw my permission at any time, by providing written notice to Evolve Housing; and
- choose to restrict some personal information from being shared with a third party.

## DECLARATION

I \_\_\_\_\_ (print full name)

give permission to Evolve Housing to release my personal information to, and request and obtain information about me from, the following third party/ies: **(tick the relevant boxes and write the names of the people or organisations we can share your information with next to each ticked box)**

<input type="checkbox"/> my Service Provider:	<input type="checkbox"/> my parents / spouse / relatives (specify who):
<input type="checkbox"/> my Advocate:	<input type="checkbox"/> another organisation:
<input type="checkbox"/> my doctor:	<input type="checkbox"/> government department:
<input type="checkbox"/> my friend:	<input type="checkbox"/> other (specify who):

I specifically do not want Evolve Housing to share my personal information with (or request information about me from): ***(tick the relevant boxes and write the names of the people or organisations we cannot share your information with next to each ticked box)***

- ☐ there is no one that I specifically do not want Evolve Housing to share information with, but unless they are listed above, Evolve Housing must obtain my permission before sharing information about me to any other third party.
- ☐ my friend (specify who):
- ☐ my family member (specify who):
- ☐ other (please list below):

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I understand I can choose what information gets shared. I choose to share my information:

- ☐ without any restrictions;

**OR**

- ☐ with the following restriction/s *(provide details)*:

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I understand that I can withdraw my consent to share information at any time by contacting Evolve Housing by:

- emailing Evolve Housing at: [myevolve@evolvehousing.com.au](mailto:myevolve@evolvehousing.com.au)
- writing to Evolve Housing at 9-13 Argyle Street, Parramatta NSW 2150.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print name: \_\_\_\_\_

Evolve Housing is committed to respecting and protecting the privacy and rights of individuals in relation to their personal information. Our Privacy Policy outlines how we collect, use, store and disclose information in accordance with the Australian Privacy Principles under the Privacy Act 1988 (Cth). Please refer to our Privacy Policy on the Evolve Housing website if you would like more detailed information. You may also request a copy of the Privacy Policy from any Evolve Housing employee.