



Income Assistance

Case Number: \_\_\_\_\_

## Form H – Consent for the Release of Information

### Applicant Information

|                         |  |
|-------------------------|--|
| Last Name               | First Name                             |
| Telephone               | Date of Birth (YY/MM/DD)      /      / |
| Current Mailing Address |  |
| Community               | , NT      Postal Code                  |

### Type of Information Requested for Release

All     
  Rent     
  Income Assistance     
  Utilities     
  Income     
  Other

If other, please specify:

### Release Information to

|           |                |
|-----------|----------------|
| Last Name | First Name     |
| Position  | Company/Agency |

### Declaration

I hereby consent to the Department of Education, Culture and Employment, Government of Northwest Territories, to release the information referred to above. No other Company/Agency will be given this information without my further written consent. This form is valid for one year.

|                     |                               |
|---------------------|-------------------------------|
| Applicant Signature | Date (YY/MM/DD)      /      / |
|---------------------|-------------------------------|