



Last Name	First Name	Relation to applicant	Date of birth dd/mm/yyyy	Gender M or F	Status in Canada Citizen, Permanent resident or Refugee

## **COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION**

Your personal information is collected under the authority of Donwood programs and used to determine your eligibility for rental housing and any tenancy which may eventually result from this application. Your personal information is protected by *The Freedom of Information and Protection of Privacy Act* and, if applicable, *The Personal Health Information Act* (PHIA).

If you have any questions about the collection of personal information, please contact Access and Privacy Coordinator.

### **CONSENT TO DISCLOSE AND SHARE INFORMATION**

I /we consent to sharing any personal information or personal health information with other agencies for the purpose of ensuring eligibility for a housing program determining my/our housing needs.

I /we authorize any person, agency or organization to release or exchange information for that purpose. I understand this consent includes requests pertaining to my marital status, employment, income, assets and liabilities, medical condition, family status, benefits received under other programs or any other relevant personal information. I understand this includes Donwood conducting a personal investigation including past and present landlord reference checks, income verification and utility checks.

I/we consent to Donwood sharing any personal information or personal health information with the appropriate housing program once housing is available.

A copy or facsimile of this signed Consent to Disclose has the same effect as the original and is sufficient to authorize the disclosure or exchange of information.

### **DECLARATION**

I/we understand that this application is not an agreement on the part of Donwood to provide me with housing. I acknowledge that, once submitted, this application becomes the property of Donwood.

I/we certify that the information given in this statement is true, correct, and complete in every respect. It fully discloses my income from all sources. If something is incorrect or not true, I understand that Donwood may cancel my application or take any other measures deemed appropriate.

### **SIGNATURES**

_____ Applicant Name <i>(please print)</i>	_____ Applicant Signature	_____ Date
_____ Co- Applicant Name <i>(please print)</i>	_____ Co- Applicant Name <i>(please print)</i>	_____ Date
For those Applicants signing this application with "X", a witness must be sign below:		
_____ Witness Name <i>(please print)</i>	_____ Witness Signature	_____ Date

Applications for Donwood Manor EPH are retained on file for 2 years from the date of the application. Should you remain interested, an application form needs to be re-submitted with the current Notice of Assessment from the previous tax year. The original application date will be honored with respect to waiting list placement. If an update is not received, your file will be shredded.