

Sharing information about you

This form was written by Possability.



This form is to ask you if we can tell the Centre for Positive Behaviour Support **information** about you. Things like

- your name
- your date of birth
- your NDIS plan number
- your phone number, email address
- your Working Together Agreement and Service Schedule
- your support plans.

We are being careful to keep information about you safe. We are



- following the law
- protecting your privacy.



We will only tell them things about you if you say we can.

It is your choice.



Do you say yes or no?



You say **yes** we **can** tell them things about you.

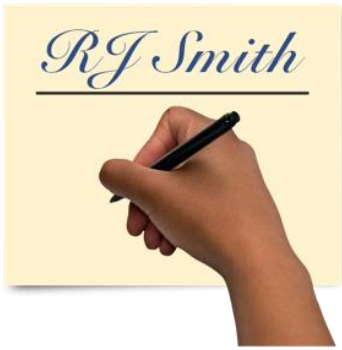
You sign the form.



You say **no** we can **not** tell them things about you.

You do **not** sign the form.

It is OK to say **no**.



Please sign your name if you said yes

It means we **can** tell the Centre for Positive Behaviour Support things about you.



Name:

Signature:



Date:



Representative (if required):

Name:

Signature:



Date:

Ways you can talk to us



Phone 1300 067 067



Email info@possability.com.au

Possability

This form was written by Possability.
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