



Hamilton

- 250 Main St. East, Hamilton, ON L8N 1H6
- 1550 Upper James Unit 14A, Hamilton, ON L9B 2L6
- 350 King St. East, Unit 110, Hamilton, ON L8N 3Y3

SECONDARY SCHOOL LIAISON SHEET

SCHOOL PERSONNEL ARE REQUESTED TO MAKE A COPY OF THIS FORM FOR THEIR RECORDS

Section 1.0 Directions

- 1.1 No information can be exchanged unless **Section 2.0** below has been completed.
- 1.2 The student is expected to take this sheet to the Guidance Counsellor, Social Worker or Principal at his/her school at registration time and leave it for completion of section 3.0 below.
- 1.3 When this sheet is completed, (Social Worker, guidance Counsellor or Principal's signature included), the Guidance Counsellor will return the sheet to the student. The student will return the completed sheet to the Ontario Works Case Manager.
- 1.4 Follow-up of Student Progress - Students will voluntarily provide copies of their progress reports (which contain both academic and attendance information) to their Ontario Works Case Manager when requested.
- 1.5 School personnel may contact Ontario Works Case Manager as they find appropriate (i.e. student not attending school, school suspension, etc.)
- 1.6 School personnel are requested to make a copy of the completed form for their records.

Section 2.0 Consent to Exchange Information

For the school year:

I, _____ Date of birth: _____ agree to the exchange of information between the Board of Education and Ontario Works City of Hamilton.

Signature of Student: _____ Date _____

Ontario Works Case Manager _____ Date: _____

Ontario Works Case Manager's Phone #:(905) 546-4800 ext.:

I fully understand the nature and purpose of this consent and give my consent and authorization voluntarily. This consent is valid for a period not exceeding 12 months unless revoked sooner in writing.

Section 3.0 Registration

Registration Date: September term:
February term:
Other:

The above named is presently registered and attending as a student at:

Secondary School Telephone Number:

School Signature: _____ Date: _____

Note: A two-week assessment period may be expected in order to confirm registration and satisfactory attendance

***Si vous désirez traduire ce document en français
s'il vous plaît contacter extension 3151, Soutien d'affaires.***

Notice with Respect to the Collection of Personal Information
(Freedom of Information and Protection of Privacy Act)
(Municipal Freedom of Information and Protection of Privacy Act)

This information is collected under the legal authority of the Family Benefits Act, R.S.O.1990.c. F.2, the Ontario Disability Support Program Act, 197 or the Ontario Works Act, 1997, for the purpose of administering the Ontario Government social assistance programs. For more information contact your nearest Municipal or Ministry of Community and Social Services office.