



CONSENT FOR RELEASE OF PERSONAL INFORMATION

INSTRUCTIONS: WITH YOUR CONSENT, THE DELINE EMPLOYMENT OFFICER WILL BE PERMITTED TO SHARE THE FOLLOWING PERSONAL INFORMATION WITH POTENTIAL EMPLOYERS AND/OR TRAINING/EDUCATIONAL OPPORTUNITIES.

CONTACT INFO:

LAST NAME:	FIRST NAME:
EMAIL ADDRESS:	JOB FIELD PREFERRED:
PHONE:	ALTERNATE PHONE:

EDUCATION LEVEL:

- HIGH SCHOOL/GED
- POST-SECONDARY
- LESS THAN HIGH SCHOOL
- TRADES CERTIFICATED OR DIPLOMA
- DIPLOMA (COLLEGE)
- UNIVERSITY DEGREE

CERTIFICATES/LICENSES

- FIRST AID
- CPR
- WHMIS
- CHAINSAW SAFETY
- TDG
- H2S ALIVE
- FAC
- HEO
- CLASS __ DRIVER'S LICENSE

ADDITIONAL CERTIFICATES /TRAINING OR EXPERIENCE:

DO YOU HAVE A RESUME: YES NO



Déline Got'ine Government

Our People. Our Future. Our Déline.



CLIENT DECLARATION:

I CONSENT TO THE RELEASE OF THE ABOVE PERSONAL INFORMATION TO NWT EMPLOYERS FOR THE PURPOSE OF POTENTIAL EMPLOYMENT OPPORTUNITIES, FINANCIAL ASSISTANCE AND/OR TRAINING/EDUCATIONAL OPPORTUNITIES

EMPLOYERS, INCLUDING GNWT DEPARTMENTS THAT RECEIVE MY PERSONAL INFORMATION WILL BE BOUND BY THE AGREEMENT TO USE THE PERSONAL INFORMATION PROVIDED TO THEM FOR THE SOLE PURPOSE OF IDENTIFYING AND CONTACTING INDIVIDUALS FOR THE POTENTIAL EMPLOYMENT OPPORTUNITIES, FINANCIAL ASSISTANCE AND/OR TRAINING/EDUCATIONAL OPPORTUNITIES: EMPLOYERS WILL BE REQUIRED TO TREAT MY PERSONAL INFORMATION AS CONFIDENTIAL AND WILL NOT SHARE THAT INFORMATION WITH ANY OTHER PARTY.

I UNDERSTAND THAT THE REFUSAL TO PROVIDE CONSENT WILL NOT RESULT IN ANY ADVERSE DECISIONS ABOUT RIGHTS, BENEFITS OR SERVICES CURRENTLY PROVIDED TO ME BY DELINE GOTINE GOVERNMENT EMPLOYMENT OFFICER. HOWEVER, I MAY NOT RECEIVE CONSIDERATION FOR EMPLOYMENT OPPORTUNITIES AND/OR CERTAIN FINANCIAL ASSISTANCE AND/OR TRAINING/EDUCATIONAL OPPORTUNITIES.

***THIS CONSENT IS VALID UNTIL MARCH 31, 2022**

CLIENT SIGNATURE

DATE: