

NON-CUSTODIAL PARENT EMPLOYMENT PROGRAM (NCPEP)

RELEASE OF CONFIDENTIAL INFORMATION

Client Name (Print): _____ SSN (last 4 only): *** - ** - _____

I hereby give permission for Gulf Coast Jewish Family & Community Services: Non-Custodial Parent Employment Program (NCPEP) to obtain and/or disclose my past, present, and future information or records that may be needed for eligibility determination, monitoring and follow-up purposes. This information may include, but shall not be limited to: school records, grade records, attendance records, employment information, medical records, public assistance records, employment information and vocational rehabilitation assessment or evaluation tools. A photocopy/facsimile of this signed consent form may be used to obtain/release information authorized by signature on this form.

I understand I that I may revoke this authorization in writing at any time except to the extent that action has already been taken in reliance on it, and in any event this authorization expires automatically in one year, or as follows: (Date, event or condition of expiration if less than one year): _____

Type of release: Written Verbal Electronic Fax

It is also my understanding that any information obtained by the above organization will be held in strict confidence.

I hereby release Gulf Coast Jewish Family & Community Services from liability which may arise as a result of information disclosed under this authorization, should it be presumed that such information is later used to my detriment.

Client Signature

Date

NCPEP Staff Signature

Date

Worker Rights under Federal Law

Americans with Disabilities Act (ADA)	Ask for a Disability Navigator – located in the CareerSource Pinellas centers. The ADA information line: 800-514-0301 (voice) or 800-514-0383 (TDD)
Fair Labor Standards Act (FLSA)	General Information: (202) 606-1800 TTY: (202) 606-2582
Civil Rights Laws	Local Contact to assist you to access governmental agency(s) for assistance: Alice Cobb (813) 397-2033 State Contact: Veronica Owens, EEOC (850) 921-3205
Equal Pay Act	Local Contact to assist you to access governmental agency(s) for assistance: Alice Cobb (813) 397-2033 State Contact: Veronica Owens, EEOC (850) 921-3205

***PRIVACY ACT STATEMENT:** Pursuant to 42 U.S.C. 1320b-7 (a) (1) (Social Security Act) and 7 C.F.R. 273.6, disclosure of your social security number is **mandatory**. Social security numbers will be used by the Agency for program administration including verification purposes, distinguishing one individual from another, and for tracking and reporting purposes.