

Release of Confidential Information

All information collected by the Society of St. Vincent De Paul (SVDP) staff, volunteers, and/or interns regarding clients or potential clients is strictly confidential. SVDP is committed to protecting the privacy of all clients as completely as possible. However, in some cases, it is necessary or desirable for us to either receive and/or share information with others. The purpose of obtaining and/or sharing this information is to ensure clients receive the assistance needed.

_____, hereby authorizes
(Name of client)

THE SOCIETY OF ST. VINCENT DE PAUL to access and release any information or records that are relevant for the purpose of providing assistance for my needs for twelve months from the date of this authorization.

If you wish to limit this release to specific information, please specify the information that may be released.

Client Name _____

Social Security Number _____

Client Signature _____ Date _____

Witness Signature _____ Date _____