

I _____(please enter full name here)

authorise _____(please enter employer here)

to provide the following details (and any future information requested) to the Ministry of Social Development (MSD) for the purposes of applying for a COVID 19 wage subsidy and future subsidies (if relevant):

- First and last name
- Date of Birth
- IRD Number
- Details of number of hours worked per week
- Any other personal details requested by MSD for the purposes of applying for this subsidy

I am aware this information will be used by the MSD to make current and future decisions about my employer's application for the COVID 19 wage subsidy and to audit and review any subsidy that is granted.

I am aware this information may be shared by the MSD with other agencies to the extent required by MSD, its staff and auditors to make decisions about my employer's application and to audit and review any subsidy that is granted.

Signed _____

Date _____