



Worker's Authorization for Release of Personal Information



WorkSafeBC has the legislative right to access personal medical and employment records in order to process your claim. By completing this form, you authorize WorkSafeBC to access your personal information relevant to injury/disease and pertaining to examination, treatment, history, and employment, including records of physicians, qualified practitioners, medical insurers, hospitals, and any employer.

Worker's information

Worker's last name	First name	Middle initial	WorkSafeBC claim number
Address line 1			
Address line 2			
City	Province	Postal code	
Phone number (include area code)	Alternate contact number (include area code)		
Date of birth (yyyy-mm-dd)			

Please read carefully

I authorize WorkSafeBC and the Workers' Compensation Appeal Tribunal to view or obtain a copy of records pertaining to my examination, treatment, history, and employment from any source whatsoever, including records of physicians, qualified practitioners, medical insurers, hospitals, and any employer. I understand the information is collected, used, and disclosed under the authority of the *Workers Compensation Act* and the *Freedom of Information and Protection of Privacy Act*. I acknowledge that WorkSafeBC may obtain and disclose information from my claim to my employer for the purpose of appeal, or may disclose such information to others in accordance with the law, including the *Workers Compensation Act* and the *Freedom of Information and Protection of Privacy Act*.

This consent shall be and remain in effect for two years unless otherwise specified or revoked in writing prior to that date.

Worker's signature	Date signed (yyyy-mm-dd)	Personal health number (BC Services Card/CareCard)
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Claims Call Centre

Phone 604.231.8888
Toll-free 1.888.967.5377
M-F, 8:00 a.m. to 6:00 p.m.

Fax

604.233.9777
Toll-free 1.888.922.8807

Mail

WorkSafeBC
PO Box 4700 Stn Terminal
Vancouver BC V6B 1J1

WorkSafeBC collects information on this form for the purposes of administering and enforcing the *Workers Compensation Act*. That Act, along with the *Freedom of Information and Protection of Privacy Act*, constitutes the authority to collect such information. To learn more about the collection of personal information, contact WorkSafeBC's freedom of information coordinator at PO Box 2310 Stn Terminal, Vancouver BC, V6B 3W5, or call 604.279.8171.