



**CONSENT FOR COLLECTION, USE AND DISCLOSURE OF
PERSONAL INFORMATION**

I – Applicant’s Details (as in NRIC/other identification document)	
Applicant’s Name:	ID no.: _____ <input type="checkbox"/> NRIC <input type="checkbox"/> Special Pass <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Foreign Passport Number <input type="checkbox"/> FIN * Select corresponding ID type
<input type="checkbox"/> Main Applicant under the Scheme <input type="checkbox"/> Family Member of the Main Applicant (please tick one)	
<i>All references in this form to the term ‘Applicant’ shall be intended to refer to the Main Applicant under the Scheme or to the family member of the Main Applicant, as the case may be.</i>	

Please complete this section if you are applying on behalf of the Applicant:

II – My Details (as in NRIC/other identification document)	
My Name(s):	My NRIC/Passport Number(s):
I am signing this form on behalf of the Applicant as (please tick): <input type="checkbox"/> I am the parent/legal guardian of the Applicant, who is under 21 years of age. <ul style="list-style-type: none"> • Please provide a copy of your NRIC / passport and the Applicant’s birth certificate / NRIC. • Please note that the consent will expire once the Applicant reaches 21 years of age. <input type="checkbox"/> I am the Donee(s) acting under a Lasting Power of Attorney granted by the Applicant; or the Deputy(s) appointed by the Court under the Mental Capacity Act (Cap. 177A) to act on behalf of the Applicant. <ul style="list-style-type: none"> • Please provide a copy of your NRIC / passport(s). • Please provide a copy of the Registered Lasting Power of Attorney / Order of Court. • Please check whether you may act singly or jointly with other donee(s)/deputy(s). 	
<i>Note: In the following form, “me” and “my” refer to the Applicant.</i>	

1. I¹ understand that the Singapore Public Agencies and Participating Organisations require my Personal Information for the following operational and analytical purposes:
 - (a) to verify my and my Family’s identity and relationship for the Services or Scheme;
 - (b) to determine my and my Family’s eligibility for the Services or Scheme;
 - (c) to provide me and my Family with the Services or Scheme; and
 - (d) for data analysis, evaluation and policy-making, for the Services or Scheme.

2. I consent and agree that the Singapore Public Agencies and Participating Organisations may collect, use and disclose my Personal Information for the purposes stated in Paragraph 1 and any other purpose permitted by law. I also consent and agree to the disclosure of my Personal Information to law enforcement officers. I understand that if there are any discrepancies in the Personal Information collected, such discrepancies may be reflected to the relevant Singapore Public Agencies, so that they may take the necessary steps to rectify any inaccurate records relating to me.

3. My consent remains valid until I withdraw it in writing. I accept that it will take up to 10 working days from the date of receipt before the withdrawal of consent takes place.

4. I have read and understood this consent form fully, including the attached Terms of Consent. I declare that the information that I have provided is accurate as at the time I sign this form.

¹ If you are signing this form on behalf of the Applicant, “I” and “my” refer to the Applicant instead.

OMNIBUS CONSENT FORM

Note: Please read the attached Terms of Consent before signing this form.

My Signature / Thumbprint	Date	Signature of Witness	Date
Interpreter (if applicable) Name: NRIC No.:		Name: NRIC No. / Official Stamp:	

Terms of Consent

Note: If you are signing this form on behalf of the Applicant, in the following Terms of Consent, “I” and “me” means “the Applicant” and “my” means “the Applicant’s”.

- I. I understand and agree that these terms used in the consent form have the following definitions:
- a) **“Personal Information”** includes the following but is not limited to:
 - i) Demographic information (e.g. bio-data comprising name, NRIC/FIN number, address, date of birth, gender, nationality, ethnicity, family/household structure and relationships);
 - ii) Financial and social assistance data (e.g. financial and social assistance history, income supplements, assessments for eligibility/suitability and details of services by the Singapore Public Agencies and Participating Organisations comprising social services, community agencies; and social worker case reports);
 - iii) Medical and Health information (e.g. medical reports, functional assessment reports, healthcare bills and assistance, means-tests results on subsidy rates, medical condition, diagnosis and history);
 - iv) Housing information (e.g. electricity, gas and water utilities, details for home ownership, rental housing, open market HDB rental, details on ownership of private property);
 - v) Employment and training information (e.g. current and past employment details, last drawn salary, training subsidies, business ownership);
 - vi) Education information (e.g. schooling records, pre-school enrolment, bursaries, tuition)
 - vii) Financial data (e.g. source of income, maintenance information, insurance coverage, bank account details such as balance, transactions, number of savings and current accounts);
 - viii) my income information (e.g. last drawn salary);
 - ix) information relating to and derived from my CPF Account(s) and CPF contributions (e.g. CPF Account(s) balance, CPF contribution details, CPF lumpsum withdrawal details, CPF monthly pay-outs,);
 - x) information relating to my participation in any scheme administered by the CPF Board (e.g. Dependent Protection Scheme, Silver Support Scheme, CPF Investment Scheme, CPF amount used for housing); and
 - xi) Other information (e.g. immigration records, criminal offences, credit reports, and other information provided by me for the evaluation and administration of social services and public assistance schemes).
 - b) **“Family”** refers to anyone related to me by blood, marriage (including step-children and in-laws) or legal adoption, whether or not they live together with me.
 - c) **“Services or Scheme”** refer to services or programmes provided by any Singapore Public Agency or Participating Organisation, including new services or programmes that may be added from time to time, to support and render assistance to individuals and/or households, including:
 - i) healthcare, mental health, social development and support, family development and support, early childhood development, aged care, childcare, education, employment, housing, social assistance, pro-active outreach to assess eligibility, case assessment, case coordination and counselling services and schemes;
 - ii) any form of financial assistance such as subsidies, grants, waivers, exemptions, tax reliefs, vouchers or bursaries; and
 - iii) schemes administered by the Central Provident Fund Board.
 - d) **“Singapore Public Agencies”** includes, (a) the Government, including any ministry, department, agency, or organ of State, (b) any tribunal appointed under any written law, and (c) any statutory body, but excludes a Town Council established under section 4 of the Town Councils Act (Cap. 329A).

OMNIBUS CONSENT FORM

- e) **“Participating Organisation”** refer to any organisation which has been authorised by a Singapore Public Agency to provide the Services or Scheme.

II. This consent shall be governed by and construed in accordance with the laws of the Republic of Singapore.

More Information

For more information, please contact: MSF_SS_Data@msf.gov.sg

The list of Singapore Public Agencies and Participating Organisations can be found at www.msf.gov.sg/datamanagement