The purpose of this form is to authorize the Minister of Human Services to include your name and business contact information on a capacity assessor designation list that will be made publicly available. By signing, you understand that Human Services has no further control over how this information is, or will be, used once it is made publicly available.

1. **Contact Information** (please do not provide your home address or home contact information)
   - Name: _________________________________________________________________________
   - Professional Accreditation: _________________________________________________________
   - Business/Employer Name: _________________________________________________________
   - Business Address: _________________________________________________________________
   - Business Phone Number: ____________________________________________________________
   - Business Email: ___________________________________________________________________

2. **Details of Authorization**
   For further clarity, but not limiting the generality of the FOIP Disclaimer below, I understand that my name and contact information shall be maintained on the publicly available capacity assessor list for so long as I am a capacity assessor pursuant to the *Adult Guardianship and Trusteeship Act*. My contact information will be maintained by the Office of the Public Guardian and may be used or disclosed by the Office of the Public Trustee or the Office of the Public Guardian as necessary now or in the future for purposes including but not limited to the administration of the *Adult Guardianship and Trusteeship Act*.

3. **Authorizing consent for your name to appear on the Roster**
   - Signature ___________________________ Date ___________________________
   - Signature of witness ___________________________ Date ___________________________

FOIP Disclaimer: The information collected on this form is collected under authority of section 33 (a) and (c) of the FOIP Act in accordance with section 7(a) of Ab Reg. 219/2009. The information will be used and disclosed for the purposes of fulfilling the Minister’s obligations under the AGTA regulations for maintaining a registry of Capacity Assessors and making the information in the Registry publicly available and for other administrative purposes related to the administration and operation of the AGTA and associated regulations. If you have any questions about the collection of your information you may contact: Office of the Public Guardian, Provincial Office, 3rd Floor, 10405 Jasper Avenue, Edmonton, Alberta T5J 4R7 or by telephone at 1-877-427-4525.