HOUSEHOLD INFORMATION FORM – A

feed nova scotia

PRIMARY CLIENT

LAST NAME _____ FIRST NAME _____ MIDDLE NAME _____

DATE OF BIRTH _____ / _____ / _____ ESTIMATED DOB ☐ GENDER: _____
YYYY   MM   DD

CURRENT ADDRESS

STREET _____ UNIT/APARTMENT _____ PROVINCE _____

CITY/TOWN _____ COUNTY/WARD _____ POSTAL CODE _____

HOUSING TYPE

- ☐ BAND-OWNED
- ☐ EMERGENCY SHELTER
- ☐ EVACUEE
- ☐ GROUP/YOUTH HOME
- ☐ OWN HOME
- ☐ PRIVATE RENTAL
- ☐ SOCIAL/PUBLIC HOUSING
- ☐ ROOMING HOUSE
- ☐ UNHOUSED
- ☐ WITH FAMILY/FRIENDS
- ☐ PREFER NOT TO ANSWER
- ☐ OTHER

_____
E-MAIL ADDRESS   PHONE #   PHONE #

_____
HOW DID YOU HEAR ABOUT THE FOOD BANK?   LANGUAGES

RACIAL IDENTITY

- ☐ FILIPINO
- ☐ ARAB
- ☐ BLACK
- ☐ CHINESE
- ☐ INDIGENOUS
- ☐ JAPANESE
- ☐ KOREAN
- ☐ LATIN AMERICAN
- ☐ SOUTH ASIAN
- ☐ SOUTHEAST ASIAN
- ☐ WEST ASIAN
- ☐ WHITE/CAUCASIAN
- ☐ OTHER
- ☐ PREFER NOT TO ANSWER

DO YOU HAVE A DISABILITY?
☐ YES   ☐ NO   ☐ PREFER NOT TO ANSWER

LIVING IN CANADA 10 YEARS OR LESS?
☐ YES, SINCE: _____
☐ NO   ☐ PREFER NOT TO ANSWER

SELF-IDENTIFIES AS

- ☐ 2SLGBTQIA+
- ☐ AFRICAN NOVA SCOTIAN
- ☐ LIVING IN CANADA 1 YEAR OR LESS
- ☐ UNDER 18 POST-SECONDARY STUDENT
- ☐ NONE
- ☐ PREFER NOT TO ANSWER

POST-SECONDARY STUDENT?
☐ YES   ☐ NO   ☐ PREFER NOT TO ANSWER

EDUCATION

- ☐ GRADE 0-8
- ☐ GRADE 9-11
- ☐ GRADE 12
- ☐ POST-SECONDARY (SOME)
- ☐ COLLEGE DIPLOMA
- ☐ UNIVERSITY DEGREE
- ☐ MASTER'S DEGREE
- ☐ PHD
- ☐ PREFER NOT TO ANSWER
- ☐ TRADE CERTIFICATE/PROFESSIONAL ACCREDITATION

HOUSEHOLD INCOME SOURCE(S)

PRIMARY/HIGHEST ① _____
② _____ ③ _____ ④ _____

HOUSEHOLD DIETARY CONSIDERATIONS

① _____
② _____ ③ _____ ④ _____

Informed consent for collection of personal information

1. Your information will be used only by authorized people for authorized purposes. These purposes are related to providing and improving services, record management, research, and advocacy.

2. Any information that could identify you personally such as your name, address, or contact information will never be shared publicly. We use this information for internal record management only.

3. Doing an intake is completely voluntary and if there is any information you don't feel comfortable providing then you don't have to. You will not be denied support based on your decision to not provide information.

4. There is a portion of the intake that is about other people living in your household. For anyone over the age of 18, only provide information about them if you would have their consent to do so.

5. Your information will be entered into the Link2Feed database which is used by Feed Nova Scotia and all its member food banks. When a food bank provides you with food support, they will add information to Link2Feed.

6. Access to your information in Link2Feed is password protected and restricted to authorized Link2Feed users only, which include Feed Nova Scotia staff. Link2Feed users from nearby Feed Nova Scotia food banks may also have access to your information.

7. Your information will be stored on Link2Feed servers in Montreal, QC.

8. Some of your information such as gender, age, and racial identity will be included in data that is shared with Food Banks Canada, but any information that could identify you personally will not be shared.

9. You have a right to review, correct, and update the personal information that is on file for you.

10. If you don't access services again or update your information with a Feed Nova Scotia food bank within seven years your information will be automatically removed from Link2Feed. You can also request to have your information removed from Link2Feed at any time.

11. If you have any questions or concerns, please let a staff or volunteer know. You may also contact Feed Nova Scotia directly by calling 902-457-1900 or emailing clientregistry@feednovascotia.ca

Informed Consent Statement

I agree to have the information I provide recorded, stored, and accessed in the future by this organization. I understand that the information I provide will be entered and stored in the Link2Feed database. I understand who might have access to my personal information and that it will be shared with Feed Nova Scotia and Food Banks Canada for authorized purposes. I understand that I have the right to have any of my personal information reviewed, corrected, updated, or removed. At any time, I have a right to request more information about how my personal information is protected and how it is used. If I provide information about anyone else living in my household who is 18 years or older, I confirm that I do so with their knowledge and permission.

_____

name (print)   signature   date