

Consent for exchange of information

I,, give consent for the Families and Friends of Missing Persons Unit (FFMPU), Department of Justice to exchange information, on my behalf, with the following services (please tick):

- ☐ NSW Police Force (local area command and Missing Persons Unit)
- ☐ Search Agencies – such as Salvation Army Family Tracing service
- ☐ NSW State Coroners Office
- ☐ My general practitioner (medical doctor)
- ☐ Other (*please specify*)

I give this consent on the basis that the information provided to the FFMPU will only be shared regarding matters in relation to the missing person.

I am aware and agree that any information provided to the FFMPU, in relation concerns for the safety and wellbeing of the missing person, will be provided to the police or appropriate agency for further investigation.

If there are concerns for my wellbeing I consent to information being exchanged to assist the FFMPU in supporting me as a client of the service.

.....
(signature of client)

..... / /
(date)

.....
(signature of FFMPU counsellor)

..... / /
(date)