



Consent to disclosure of identifying information

Personal details.

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Other:
Family name	
Given name	
Date of birth	
Address	
Home telephone	
Work telephone	
Email	

Please tick relevant box(es):

Consent to disclosure of identifying information by disclosure.

I consent to the disclosure of information that might identify or tend to identify me as a person who has made an appropriate disclosure of public interest information under the *Public Interest Disclosure Act 2003* (PID Act).

Consent to disclosure of identifying information by person in respect of whom a public interest disclosure has been made (subject).

I consent to the disclosure of information that might identify or tend to identify me as a person in respect of whom a disclosure of public interest information has been made under the *Public Interest Disclosure Act 2003* (PID Act).

Limitation on consent (optional).

This consent only applies to disclosures made to the following persons	<input type="checkbox"/>

This consent only applies to the following information	<input type="checkbox"/>

Signed: _____ Date: _____