



CONSENT TO SHARE WAGE & EMPLOYMENT INFORMATION

In accordance with the Minnesota State Statute on Data Privacy, M.S. § 268.19, Subd.(1b), I agree that the Minnesota Department of Employment and Economic Development (DEED) may release information on my wages and employment contained on the state's Wage Detail files to Ramsey County Workforce Solutions.

I understand that this is private information and my decision to refuse to provide consent to share this information will not have an effect on my participation in the program.

I understand that Ramsey County Workforce Solutions will use this information ONLY for the following two purposes:

1. Auditing Dislocated Worker Program/WIOA Adult or Ramsey County Workforce Solutions and/or
2. Learning how well the Dislocated Worker Program/WIOA Adult is helping people like me.

I understand that Minnesota state law does not allow Ramsey County Workforce Solutions to use this information for any other purpose.

This information may not be shared by Ramsey County Workforce Solutions without my consent.

This consent goes into effect today. This approval expires after one year from the time I leave Dislocated Worker Program/WIOA Adult.

I may cancel this consent in writing at any time.

- Yes, I agree to the sharing of wage and employment information.
- No, I do not agree to the sharing of wage and employment information.

Participant's Name (Print or Type)

Date

Participant's Signature

Participant's Social Security Number

Revised 1/11/16