

**CONSENT TO COLLECT WAGE AND EMPLOYMENT DATA ON INDIVIDUALS**  
**Minnesota WorkForce Center System**

The Minnesota WorkForce Center System is asking for your consent (permission) to collect data about you from the entities (people, agencies or organizations) identified on this form. We can't collect the data without your consent. This form tells you what data we need the other entities to give to us. It also explains why we need to collect the data and what will happen (consequences) if you give your consent.

You have the right to choose what data we collect. This means you have the right to let us collect all of the data, some of the data or none of the data described on this form. We can collect only the data that you choose.

Minnesota law may give you the right to look at and have copies of the data we are asking the other entity to give us. We encourage you to look at the data before you decide whether to give your consent, because that may help you decide about giving your consent.

If you give your consent for us to collect data about you, we can collect the data up to three years. You have the right to stop your consent (revoke or take back your permission) any time before during this period. If you want to stop your consent, you must write to YOUR CASE MANAGER and clearly say that you want to stop all or part of your consent. We can't stop the collection of data that we already have collected because you gave your consent.

**Important: If you have a question about anything on this form, please talk to YOUR CASE MANAGER before you sign.**

[1] I give my permission for the Department of Employment and Economic Development (DEED) Unemployment Insurance Division (UI) to release data about \_\_\_\_\_ in the way described on this form;  
[NAME OF DATA SUBJECT]

[2] The specific data or type(s) of data that DEED Unemployment Insurance Division may release are wage and employment records;

[3] I agree to let DEED UI release these data to the Workforce Center System for up to three years

[4] I understand that the WorkForce Center System needs to collect the data in order to determine outcomes for workforce development programs;

[5] I understand that, whether or not these data are released to the WorkForce Center System it will not affect my participation in WorkForce Center programs

[6] Signature of data subject \_\_\_\_\_ Date signed \_\_\_\_\_

[7] Signature of parent or guardian \_\_\_\_\_ Date signed \_\_\_\_\_

[8] Signature of person explaining this form \_\_\_\_\_ Date signed \_\_\_\_\_

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