Department of Social Supports and Well-Being

Application for Client File Information
from Social Supports and Well-Being

1. To avoid delays, please complete all sections of this application. Please note important instructions below.

Name:

Date of Birth: (YYYY-MM-DD)

Aliases: (includes name changes, maiden name)

Address:

City/Town:

Province:

Postal Code:

Telephone Number:

Place of Residence for period of time records are requested:

Name of Spouse:

Children(s) Name(s):

Birth Parent Name:

Date of Birth: (YYYY-MM-DD)

Birth Parent Name:

Date of Birth: (YYYY-MM-DD)

Have you received disclosure of your file previously? ☐ Yes ☐ No

Have you been or are you presently employed with SSWB? ☐ Yes ☐ No

2. Please provide a brief narrative of the Information requested (i.e. specific documents, certain dates or complete file). If you require more space, please attach additional information on a separate sheet.

Form No. 51_08_07_64_354_2016_01 (Revised: November 23, 2026)

3. Who is entitled to apply for access to a record?

Per Section 92 of the *Children, Youth and Families Act*

(1) A person over 12 years of age has the right to and shall, on request, be given information relating to himself or herself.
(2) A person over 12 years of age who is, or has been, in the care or custody of a manager has the right to and shall, on request, be given information relating to himself or herself including.
(a) information relating to his or her birth family that the minister determines is appropriate to release;
(b) the reasons why he or she was removed from his or her parent and information relation to the continuation of a court order relating to him or her; and
(c) the identity of a former foster parent, family-based caregiver or the name of a former residential placement.
(3) A person who has custody of a child has the right to and shall, on request, be given information about himself or herself and the child.
(4) A person who has custody of a child has the tight to and shall, on request, be given information about himself or herself and the child, but only for the period of time that the person has custody.
(5) Where information excepted from disclosure under section 93 can reasonably be severed, a person who is otherwise permitted to received information under this section shall be given the remainder of the information.

4. Required Identification:

A copy of the applicant's original birth certificate must be included

Is the birth certificate included? ☐ Yes ☐ No

One piece of photo identification is required prior to any physical copies of records being released.

Have you included photo ID with your application? ☐ Yes ☐ No

If no, you must provide at time of file release.

Applicant's Signature:

Date: (YYYY-MM-DD)

Routing Information:

Please forward completed form to:

Manager of Information Services
Department of Social Supports and Well-Being
P.O. Box 8700
St. John's, NL A1B 4J6 Canada
Telephone: 709-729-1027

For Internal Use Only:

Received By:

Date Received: (YYYY-MM-DD)

You must notify the Manager of Information Services if your contact information changes

Privacy Notice:
The Department of Social Supports and Well-Being collects personal information relating to children, youth and families, under the authority of the *Children Youth and Families Act.* This information may be collected for provision of services and/or the operations of the Department. If you have any questions about the collection or use of this information, please contact the Information Management Division of the Department of Social Supports and Well-Being, Provincial Office at Department of Social Supports and Well-Being, P.O. Box 8700 St. John's, NL A1B 4J6.