

Constituent Information Request



Complete the form and email to
or mail to address below.

Note that Standard Delivery on responses is within 30 days.

All information provided regarding the Constituent will be maintained and used
According to the A Dignified Home Children and Youth Services Privacy Policy.

Section 1: Constituent Information

First Name

Date of Birth

(For identification only)

Last Name

Phone

Email Address

Do you reside outside of the U.S.?

No Yes

Mailing Address

Is this request being made on behalf
of another individual? (See #4 below)

No-Myself

Yes - Another Adult

Yes - A Minor Child

Section 2: Information Required

Check all boxes that apply to the information you are requesting and applicable time period.

Demographic Information

A Dignified Home Services/Assistance Received

Contact Preference

From

Direct Marketing Purposes *(Preceding year. CA residents only)*

To

Donation History

Other (please be specific)

From

To

Volunteer Participation

From

To

Is this request being made in connection with a legal matter?

No

Yes

Are you including a subpoena with your request form?

No

Yes

Section 3: Delivery of Requested Information

How would you like to receive the information request?

Encrypted Email

Postal Mail

Do you need to expedite processing for a reasonable fee? Expedited delivery may be acomodated, and a reasonable fee may be charged to expedite processing.

No, use Standard Processing (within 30 days)

Yes, use Expedited Processing Date Needed

Section 4: Certifications

- | | | |
|--|-----|----|
| 1. I am the individual to whom the requested information applies, or the parent or legal Guardian of a minor. Or the legal guardian of a legally incompetent adult, or the legal Representative of the individual to whom the requested information applies. | Yes | No |
| 2. I request that the information identified above be sent via encrypted email to my Email address listed above. I understand that the A Dignified Home Children and Youth Services is releasing this information at my request and with my consent and is not Responsible for any subsequent disclosure or use of this information that I or any third party may make or for any intended or unintended consequences of such use or disclosure. | Yes | No |
| 3. I give permission for the for the A Dignified Home to contact me at the phone number and/or Email address provided above, if there are questions regarding this request. | Yes | No |

Parent/Guardian/Legal Representative Certification MUST be completed to request information on behalf of another individual

4. I certify that I am the Parent Legal Guardian Power of Attorney Legal Representative of the constituent identified above (the "Constituent"). In such capacity, I have reviewed and confirmed the accuracy of the Constituent Information provided above and consent to A Dignified Home' use of personal information about the Constituent as necessary to process this request. I understand that all information regarding the Constituent will be maintained and used in accordance with A Dignified Home' Privacy Statement.

Requestor Name

Relationship to Constituent

Section 5: Sign and Submit Form

Signature

Date

Or email the completed form to: info@adignifiedhome.org

OR Print and mail to: Attention: Constituent Information Request
A Dignified Home Youth and Children Services
2 Embarcadero Center, 8th Floor
San Francisco, CA 94111

FOR A Dignified Home USE ONLY. This request form is being completed by A Dignified Home Staff:

Date of Constituent Request Was identify of constituent verified? Yes No

Name and title of A Dignified Home Staff
Submitting request