

Logan Zero Consent Form

The Zero Communities in Queensland refers to the collective of organisations partnering together for the purpose of understanding the needs and preferences of individuals, families and youth experiencing homelessness, and supporting and enabling people experiencing homelessness to obtain stable housing, healthcare and community services. For a detailed list of members and supporters of the collective refer to the 'Logan Zero Partners' section accessible [here](https://loganzero.org.au/). [https://loganzero.org.au/]. Logan Zero refers to the Logan focussed operations of Advance to Zero.

I acknowledge that members of the Zero Communities in Queensland propose to collect personal information (including sensitive information) to provide support services to me. These services include making efforts to better understand my needs to access housing services, and to attempt to provide support to access the housing, health and support services that will meet these needs.

By signing this form, I consent to:

- my personal information being listed on a 'Know By-Name List' of people experience homelessness in our community; and
- my de-identified information being used for advocacy, and to inform government and non-government agencies, research partners, and the community about the needs and experiences of people experiencing homelessness and required changes to the current housing and homelessness system.

I understand that:

- Providing my information to be used in Logan Zero is optional, and I will still receive support services if I choose not to do so.
- Individual organisation providing me support services will also require me to sign their consent form.
- my personal information will be handled in accordance with the Logan Zero privacy policy, which I can access in person by requesting a copy or which I can access online at <https://loganzero.org.au/resources/>;
- my personal information will be stored on an electronic database operated by CSnet; and
- I can request to access, correct, update, or remove my personal information by sending a request to LoganZero@yfs.org.au

Print Name of

Person:

Date:/...../.....

Signature of

Person:

☐ Verbal consent Provided