

## Step 1

This step will verify the applicant's eligibility for assistance with identity certification.

### Eligible Applicants

Eligibility for the Identity Certification Form is limited to applicants who are: 1) residents of Alberta, 2) 18 years or older, 3) currently or recently homeless, and 4) who have resided in Alberta for at least 90 days.

A resident of Alberta is a person who: is lawfully entitled to be or to remain in Canada; and makes his or her home in, and is ordinarily present in Alberta.

For the purpose of the Identity Certification Form someone is considered recently homeless if he or she was homeless at some time within the past six months.

### Eligibility Test

Is the applicant a resident of Alberta?  Yes  No

Is the applicant 18 years or older?  Yes  No

Is the applicant currently or recently homeless?  Yes  No

Has the applicant resided in Alberta for at least 90 days?  Yes  No

If the applicant responded yes to all four questions, he or she is eligible for use of the Identity Certification Form.

## Step 2

This step will ensure you have authorization to collect the applicant's personal information and to use it for the purpose of helping them obtain personal identification.

For the Applicant: By signing this form, I hereby authorize the Minister of Housing and Urban Affairs to collect this information under Section 34(1)(a)(i) of the *FOIP Act* for the purpose of carrying out a program, activity or policy under his administration.

The personal information collected in this form will be collected, used, disclosed, and protected according to the provisions in Schedule B of the Certifying Agency Agreement between this agency and the Minister of Housing and Urban Affairs. For more information on this, please contact Homeless Cross-Ministry Initiatives, Housing and Urban Affairs at (780) 422-0122.

APPLICANT'S SIGNATURE: X \_\_\_\_\_

DATE: \_\_\_\_\_

WITNESS' SIGNATURE: X \_\_\_\_\_

DATE: \_\_\_\_\_

It is required the applicant sign the FOIP clause.

It is required the signed FOIP clause is retained in the agency's records.

Certifier's Name: \_\_\_\_\_

Certifier's Agency: \_\_\_\_\_

## Step 5

This step will capture the identity verification work completed by the Certifier.

**The following summary is to be completed by the Certifier before signing off on the Identity Certification Form.**

**The certifying agency must keep a copy of this form for their records.** This form may be audited for program purposes, as per the conditions outlined in the 'Certifying Agency Agreement'. The Certifying Agency may be called upon to prove that proper due diligence was undertaken in the event of an investigation through Alberta Registries or law enforcement. The Certifier may be subpoenaed to attend court.

## Identity Verification Summary

### Application Information

This identity verification summary is for: \_\_\_\_\_ (Applicant Name)

Date completed: \_\_\_\_\_ (dd / mm / yyyy)

### Identity Verification Summary

- I have verified the applicant's full legal name;
- I have verified the applicant's date of birth; and
- I have verified the applicant's legal entitlement to be in Canada.

### Sources of Verification

I have used the following support documents to verify the applicant's identity (check all that apply).

### Primary Documents and Legal Entitlement to be in Canada

<input type="checkbox"/> Birth certificate Jurisdiction that issued the birth certificate: _____ Birth Certificate #: _____	<input type="checkbox"/> Passport Jurisdiction that issued the passport: _____ Passport #: _____	<input type="checkbox"/> Canadian Indian Status Card Indian Status Card #: _____
<input type="checkbox"/> Operators' License or Identification Card	<input type="checkbox"/> Immigration, Naturalization or Permanent Resident Card	<input type="checkbox"/> New Métis Nation Card

Jurisdiction that issued the Operator's License or Identification Card : _____		
<input type="checkbox"/> Canadian Citizenship card	<input type="checkbox"/> Employment or Student Authorization (Federal government issued).	<input type="checkbox"/> Record of Landing
<b>Secondary Documents</b>		
<input type="checkbox"/> Bank account statements	<input type="checkbox"/> Utility, telephone, gas or cable TV bill in applicant's name	<input type="checkbox"/> Insurance documents (life, auto, residential, etc.)
<input type="checkbox"/> Marriage certificate	<input type="checkbox"/> Proof of government income assistance (AISH or Income Support)	<input type="checkbox"/> Refugee travel documentation
<input type="checkbox"/> Cancelled cheque with imprinted name and address	<input type="checkbox"/> Income tax receipts	<input type="checkbox"/> Bankcard or credit card with the applicant's name
<input type="checkbox"/> Health Care Card  1) <input type="checkbox"/> Health Care Card if it contains the applicant's full name and birth date  2) <input type="checkbox"/> Health Care Card if it contains a photo, the applicant's full name and birth date  OR Health Care Card #:  _____	<input type="checkbox"/> Student authorization	<input type="checkbox"/> Property tax bill or receipt, land title or mortgage documents
<input type="checkbox"/> Social Insurance Number Card  OR SIN Card #:  _____	<input type="checkbox"/> Correctional Service Canada ID card	<input type="checkbox"/> Other - _____ - _____ - _____

**I have completed the following sources to fact-check the applicant's identity.**

<input type="checkbox"/> School Records Name of school: _____	<input type="checkbox"/> Aboriginal Affiliation Name of authority figure: _____	<input type="checkbox"/> Other Social Services Agency Name of employee: _____
<input type="checkbox"/> AISH in Alberta Office where file is kept: _____	<input type="checkbox"/> Probation Officer Name of probation officer: _____	<input type="checkbox"/> Formal Guardianship in Alberta (Office of the Public Guardian) Name of guardian: _____
<input type="checkbox"/> Formal Trusteeship in Alberta (Office of the Public Trustee) Name of trustee: _____	<input type="checkbox"/> Children and Youth Services in Alberta Name of employee: _____	<input type="checkbox"/> Housing Management Body Name of employee: _____

<b>Other Steps Taken</b>
<p>I have also taken the following, not previously covered, steps to verify applicant's identity and legal entitlement to be in Canada.</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

## Step 6

Complete the Identity Certification Form.