

Profile of Household Occupants- HIF B (Data Sharing Agency)



Agency Name: _____

Date: ____/____/____
YYYY Month DD

FEED NOVA SCOTIA Code: _____

MAIN CLIENT INFORMATION

Last First Middle

Date of Birth: ____/____/____
YYYY Month DD

FAMILY/HOUSEHOLD MEMBER INFORMATION #1

Last First Middle

Date of Birth: ____/____/____
YYYY Month DD

Gender: Undisclosed Male Female Transgender

SELF-IDENTIFIES AS

- Undisclosed Person with Disability First Nations Metis Inuit Post-Secondary Student
 In Canada 10 years or Less (yy/mm)_____ Visible Minority _____ Not Applicable

RELATIONSHIP TO MAIN CLIENT

- Undisclosed Spouse Parent Sibling Child Friend Grandparent Grandchild
 Other Relative Boyfriend/Girlfriend Common-Law Partner

FAMILY/HOUSEHOLD MEMBER INFORMATION #2

Last First Middle

Date of Birth: ____/____/____
YYYY Month DD

Gender: Undisclosed Male Female Transgender

SELF-IDENTIFIES AS

- Undisclosed Person with Disability First Nations Metis Inuit Post-Secondary Student
 In Canada 10 years or Less (yy/mm)_____ Visible Minority _____ Not Applicable

RELATIONSHIP TO MAIN CLIENT

- Undisclosed Spouse Parent Sibling Child Friend Grandparent Grandchild
 Other Relative Boyfriend/Girlfriend Common-Law Partner

FAMILY/HOUSEHOLD MEMBER INFORMATION #3

Last First Middle

Date of Birth: ____/____/____
YYYY Month DD

Gender: Undisclosed Male Female Transgender

SELF-IDENTIFIES AS

- Undisclosed Person with Disability First Nations Metis Inuit Post-Secondary Student
 In Canada 10 years or Less (yy/mm)_____ Visible Minority _____ Not Applicable

RELATIONSHIP TO MAIN CLIENT

- Undisclosed Spouse Parent Sibling Child Friend Grandparent Grandchild
 Other Relative Boyfriend/Girlfriend Common-Law Partner

