

Accommodation Services Plan Member Statement



Sun Life Assurance Company of Canada (Sun Life) is a member of the Sun Life group of companies.

Your plan sponsor uses Sun Life to help assess employee requests for workplace accommodations due to a new or changing health condition.

- For accommodation assessments, Sun Life engages a service provider. Under this service, the service provider makes recommendations.
- Your plan sponsor will decide whether and how to accommodate you, based on the recommendations and other factors.

Sun Life is committed to keeping your information confidential

To request Accommodation Services:

- Please return this completed form to your plan sponsor. They will send it to Sun Life with their Accommodation Services Plan Sponsor Referral Form.
- Please also complete the Plan member information and authorization (section 1) of the Accommodation Services Attending Physician Statement. Your doctor also has to fill in part of the Accommodation Services Attending Physician Statement. You're responsible for any fees your doctor charges to do so. Please send the Accommodation Services Attending Physician Statement directly to Homewood Health. See Accommodation Services Attending Physician Statement for further instructions.

Last name (please print)		First name (please print)	
Plan sponsor's name			
Member ID		Plan Sponsor's contract number	
Work phone number	Alternate phone number		Preferred language of communication <input type="checkbox"/> English <input type="checkbox"/> French

Your permission

I understand that my plan sponsor has asked Sun Life for help in assessing my accommodation request.

For accommodation assessments, Sun Life engages Homewood Health as its service provider. The reference to Sun Life, Homewood Health and my plan sponsor includes their agents and service providers.

I authorize Sun Life and Homewood Health to collect, use and disclose relevant information about my job and my medical condition needed to assess and administer my accommodation request with:

- health professionals,
- my plan sponsor's occupational health services team, if applicable,
- my plan sponsor (excluding information about my diagnosis and treatment, unless it's already in my plan sponsor's file).

For disputes

I authorize Sun Life, Homewood Health, my plan sponsor and their occupational health services team to collect, use and disclose among them relevant information, including details about my diagnosis and treatment to respond to or resolve:

- a demand or dispute with or against my plan sponsor in which I have threatened to:
 - sue my plan sponsor or
 - file a grievance or other formal complaint before a board, tribunal or court;
- a legal proceeding, which includes a civil proceeding, arbitration or human rights complaint, about my request.

Conditions of consent:

- My consent is valid for the duration of:
 - my accommodation request,
 - any dispute related to this request or my accommodation,
 - for audit purposes, the contract between Sun Life and my plan sponsor.
- I understand that I can withdraw this authorization at any time during my accommodation request. I understand that if I withdraw this authorization:
 - Sun Life and Homewood Health will no longer be able to assess my accommodation request and,
 - Sun Life and Homewood Health will close my file.

In place of my handwritten signature, I have typed my name. Both my typed name and an electronic copy of this form are as valid as an original.

Plan member last name (please print)		First name (please print)	
Signature X		Date (dd-mm-yyyy)	

Respecting your privacy

Respecting your privacy is a priority for the Sun Life group of companies. We keep in confidence personal information about you and the products and services you have with us to provide you with investment, retirement and insurance products and services to help you meet your lifetime financial objectives. To meet these objectives, we collect, use and disclose your personal information for purposes that include: underwriting; administration; claims adjudication; protecting against fraud, errors or misrepresentations; meeting legal, regulatory or contractual requirements; and we may tell you about other related products and services that we believe meet your changing needs. The only people who have access to your personal information are our employees, distribution partners such as advisors, and third-party service providers, along with our reinsurers. We will also provide access to anyone else you authorize. Sometimes, unless we are otherwise prohibited, these people may be in countries outside Canada, so your personal information may be subject to the laws of those countries. You can ask for the information in our files about you and, if necessary, ask us in writing to correct it. To find out more about our privacy practices, visit www.sunlife.ca/privacy.