T4 AUTHORIZATION FORM

The purpose of this form is to authorize [Organization Name] to send your T4 tax form to you for the tax year 20XX via email. Please accurately complete the following information and provide your signature to indicate your consent.

**Employee Information:**

| Full Name: | |
| --- | --- |
| Title: | |
| Department/Employee ID Number: | |
| Email Address: | |
| Phone Number: | |

**Authorization:**I, the undersigned, hereby authorize my employer, [Organization Name], to email my T4 tax form for the tax year 20XX. I understand that by providing this authorization, I am opting to receive my T4 electronically via the email I have provided.

I understand that by opting to receive my T4 electronically, I will not receive paper copies unless specifically requested. I acknowledge that it is my responsibility to ensure that the email address provided is accurate and up to date.

Employee Name (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_