



E-Share Form

(Ce document est aussi disponible en français)

Instructions

The Workplace Safety and Insurance Appeals Tribunal (WSIAT) can send appeal information to you using a cloud-based, secure file-sharing program.

By receiving information this way, you will receive your documents faster, letting us help you more quickly. Appeal information may include confidential information such as your medical information.

By filling out this form, you understand and agree that

- the WSIAT will send appeal information to the email address(es) you provide on Page 2.
- there are risks with electronic communication; risks may include, but are not limited to, emails being misdirected or received by an unintended recipient, intercepted, altered or forwarded without detection, or introducing viruses into computer systems.
- you are responsible for meeting the deadlines given in the information sent to you by the WSIAT. This means you need to open and read the information when you receive it.
- you will store the information securely.
- you will securely destroy the information when you no longer need it.

For more information about E-Share and instructions, please visit the [E-Share page](#) on our website.

Call us if you have questions about this form. Our Call Centre is open Monday to Friday 8:30 a.m. to 5:00 p.m.

Call Centre	416-314-8800
Toll-free in Ontario	1-888-618-8846
TTY	Call 711 for Relay Services

1. Name and Role	
First Name	
Last Name	
Organization name (if applicable)	
I am	<input type="checkbox"/> the worker. <input type="checkbox"/> the worker representative. <input type="checkbox"/> the employer. <input type="checkbox"/> the employer representative. <input type="checkbox"/> other – please explain _____

2. Where E-Share files will be sent	
Primary email address	
Secondary email address (optional)	
3. Signature	
Signature (If filing electronically, type your first and last names.)	Date (dd/mm/yyyy)
<hr/> <input type="checkbox"/> When you file electronically, typing your name and dating this form represents your signature. Check the box to confirm you understand and agree to this.	
4. How to send us this form	
Fill out, sign, and send us a copy of this form by E-file or mail.	
E-File	www.wsiat.ca under the E-File tab
Mail	Workplace Safety and Insurance Appeals Tribunal 500 – 505 University Avenue Toronto ON M5G 2P2

Accessibility

The WSIAT is committed to providing an environment that is inclusive and accessible to all people. If you need an accommodation, please write to us with the details of your request.

Collection, Use and Disclosure of Personal Information

Information on this form is collected for the proceedings of the Workplace Safety and Insurance Appeals Tribunal (WSIAT). All information is collected in line with the *Workplace Safety and Insurance Act, 1997*. It may be included in the WSIAT file and shared with parties of record of the appeal. This information may only be used for workplace safety and insurance purposes. Questions about the collection of information should be directed to the Freedom of Information and Privacy Coordinator at the WSIAT by calling 416-314-8800 or 1-888-618-8846 (toll-free), or 711 for Relay Services (TTY).