



Carleton
UNIVERSITY

Canada's Capital University

Third Party Release of Information Form

Name

Student Number

Pursuant to Section 39 (1)(a) of the Freedom of Information and Protection of Privacy Act,
I _____, authorize Carleton University to contract the
persons or organizations listed below for the purposes of obtaining:

- ☐ Confirmation of Registration
- ☐ Confirmation of Graduation and Degree
- ☐ Other, Please Specify _____

Carleton University is authorized to disclose such information as specified above to the person(s)
or organization(s) listed below:

The term of such release of information will be:

- ☐ One time only
- ☐ Ongoing until such written notice is given to terminate
- ☐ From the date of signing below until _____ (specify date)

Student Signature: _____ Date: _____

At Carleton University, we recognize and respect the importance of privacy. Personal information that we collect is kept confidential. In accordance with Section 41 of the Freedom of Information and Protection of Privacy Act, Carleton University will only use the information in its custody or control in the following circumstances: where the individual identifies the particular information and consents to its use; for the purpose for which it was collected or a consistent purpose (i.e. a purpose which the individual might have reasonably expected).

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