

Consent to Release Information to a Third Party

Carleton University collects and protects personal information under the authority of the *Freedom of Information and Protection of Privacy Act* for the purposes of operating the programs and services of the University.

If you require the disclosure of your personal information to another person, designated agent or agency, legal counsel or for other purposes, please complete the following informed consent document.

I authorize	
	<i>Individual / Office / Program/ Agent</i>
to disclose	
	<i>State precise personal information, <u>attach separate sheet if necessary.</u></i>
originally collected for	
	<i>State purpose for original collection of this information.</i>
to	
	<i>Identify person, designated agent or agency, legal counsel or other purposes to whom/for which information is to be released.</i>
in the period	
	<i>Provide date range for which permission will exist.</i>

Full Name:	
Date of Birth:	
Student I.D.#	
Date:	

I declare that I have made this authorization voluntarily and the information on this form is true and correct.

Signature

Date

I understand that I may withdraw my consent at any time by giving notice in writing to the FIPPA contact named below. I further understand that this withdrawal of consent shall not be retroactive.

The personal information requested on this form is collected under the authority of the *Carleton University Act* in accordance with Sections 38(2) and 41(1) of the *Freedom of Information and Protection of Privacy Act* (FIPPA), R.S.O. 1990, c.F.31 as amended. The information provided will not be used for any purposes other than those stated upon this form unless the applicant provides express written consent. Should you have any questions concerning your personal information please contact the Privacy Office at 613-520-2600 ext. 2047 or Privacy_Office@carleton.ca. Carleton University is fully compliant with FIPPA and endeavors at all times to treat your personal information in accordance with this law.