



Carleton
UNIVERSITY

Canada's Capital University

**Student Accounts Receivable
Third Party Release of Information Form**

Instructions:

Please return completed forms via email to Student Accounts Receivable at student_accounts@carleton.ca from your Carleton University email address.

Name

Student Number

Pursuant to section 39(1)(a) of the Freedom of Information and Protection of Privacy Act,

I, _____ (student full name)

authorize Carleton University to contact the person(s) or organization(s) listed below for the purpose of obtaining the following information pertaining to my student account records:

Detailed Account Information

Or, limited to:

Account Balance

Student Account Documents (i.e. Account Statement, Payment Receipts)

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

Name of Third Party

Relation to Student

Address of Third Party (complete address)

Telephone

Email Address

The terms of such release of information will be:

One time only

Ongoing until 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).