

Consent to Release Information and/or Third Party Authorization to Act on my Behalf

Last Name / Surname (Legal)	First Name/ Given Name (Legal)	Student ID
Program / Course		Year attending:

I **CONSENT** for NorQuest College to **RELEASE THE FOLLOWING INFORMATION** from my student record to the **Third Party or Organization** below (select all that apply):

- Admission Status, Including Official Offer of Acceptance letters.
- Registration Status
- Education Progress
- Financial Information relating to payment of tuition and fees or funding.
- Educational Documentation (transcripts, grade results or testing assessments)
- Emails or Written Communications

AND/OR

I **AUTHORIZE** for the **Third Party or Organization** below to **ACT ON MY BEHALF** for the following transactions:

- Submit documents in support of my application for admission.
- Cancel my application for admission.
- Make an alternate program selection if I do not qualify for my first program of choice.
- Drop classes or withdraw from my program of study.
- Add or swap classes on my timetable.
- Other (specify type of action): _____

Third Party (a person you know) or Organization:

Name _____ Relationship to me _____
 Organization (if applicable) _____
 Email address _____

This consent or authorization is only valid until the end of the current academic year: (20__/06/30)

I give my consent/authorization voluntarily. I know that consent/authorization is valid until the date listed on this form, regardless of whether I withdraw from studies or re-apply to a different program or term. I understand that I can withdraw my consent at any time by submitting a written request to the Office of the Registrar at info@norquest.ca

Student Signature _____ **Date (YYYY/MM/DD)** _____

Freedom of Information and Protection of Privacy (FOIP) Act Notification Statement The personal information requested on this form is collected under the authority of section 65 of the Post-Secondary Learning Act and section 33(c) of Alberta's Freedom of Information and Protection of Privacy (FOIP) Act and will be used to authorize the release of personal information as specifically requested by you, and for the purpose(s) you have identified above. For information about the collection and use of this information, contact the Office of the Registrar at 10215 108 Street NW, Edmonton, AB, T5J 1L6, Tel. 780.644.6000.

Once signed, submit completed form to the Office of the Registrar at info@norquest.ca through your NorQuest student account.