



## FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY

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### Standard Consent Form for Disclosure of Personal Information

I, \_\_\_\_\_ authorize Grande Prairie Regional College to disclose the personal information listed below to \_\_\_\_\_ for the purpose of \_\_\_\_\_ for the Academic Year \_\_\_\_\_ or the period from \_\_\_\_\_ to \_\_\_\_\_.

#### List of Personal Information to be disclosed (check all that apply):

- Academic Performance       Academic Progress       Student Attendance  
 Academic Registration Details       Student Account Financial Details  
 Other (please list specifically):

\_\_\_\_\_  
\_\_\_\_\_  
**Name** \_\_\_\_\_ **Student ID #** \_\_\_\_\_

**Date** \_\_\_\_\_ (expires 1 year from this date)

**Signature** \_\_\_\_\_

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#### **Freedom of Information and Protection of Privacy**

Grande Prairie Regional College requires the collection of personal and other information pursuant to the Colleges Act, and the Statistics Act (Canada) for the purpose of (1) admission, registration, issuing income tax receipts and general operational requirements for attendance at the College (2) scholarships, awards, convocation and follow-up education information and (3) research, planning and reporting to Advanced Education and Career Development, Statistics Canada and others. The information provided will be protected under the Freedom of Information and Protection Act of Alberta and will be maintained as part of the student record.

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### **Instructions**

A public body may disclose personal information only if the individual the information is about has identified the information and consented, in the prescribed manner, to that release. The prescribed manner is in writing and must specify to whom the personal information may be disclosed and how the personal information may be used. Generally this consent is considered valid for 1 year unless otherwise indicated. The attached consent will serve this purpose. Please fill in the blanks based on the following key. If you have any questions please contact the Information and Privacy Coordinator at 539-2068.

### **Key**

1. Person giving consent fills in their name.
2. Name of individual or organization that will be disclosing the personal information.
3. Name of individual or organization that will be receiving the personal information.
4. How receiving individual or organization will use the personal information.
5. Indicate the period of time you require the consent to be valid.
6. List specifically what personal information will be disclosed.