

Consent Form - Release of Personal Information

I understand that Robertson collects personal information from students as part of the educational process and in compliance with the Freedom of Information and Protection of Privacy Act and as stipulated in Robertson's Confidentiality of Student Records and Information Policy. Personal information is any information that enables identification of an individual such as name, address, telephone number or any identifying number or symbol assigned to you. The information may also be about my student record, such as progress, grades, and financial information.

I understand that Robertson has an obligation to keep my personal information and my records confidential. I also understand that I can choose to allow Robertson to release my personal information to certain individuals or agencies.

Please select from one or all of the following:

- I, _____ (please print name) **hereby agree** that Robertson may share my information with potential employers, sponsoring agencies and accrediting bodies (if applicable) as it relates to my enrolled program of interest at Robertson.

Exceptions (eg. grades, fee payment information):

Signed: _____ Date: _____

and/or

- I, _____ (please print name) **hereby agree** that Robertson may share information contained in, or forming part of my student record, with the following people/organizations:

Name: _____

Organization or relationship: _____

- I authorize the above-named to act on my behalf if needed (If a parent or guardian needs to act on behalf of a dependent).

Exceptions (eg. grades, fee payment information):

Signed: _____ Date: _____

I understand that this release is valid when I sign it and that I may withdraw my consent to this release (in writing) at any time.