



## Consent to Release Student Information

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

I voluntarily authorize and consent to the release of information, held by MITT, specific to the following (check boxes, as applicable). *Consent will expire two years from the signature date below or when MITT is informed otherwise in writing to [enrolment@mitt.ca](mailto:enrolment@mitt.ca).*

Academic Inquiries:	Financial Inquiries:
<input type="checkbox"/> Current student status ( <i>Full/Part-time status, Regular/Suspension status, etc.</i> ) <input type="checkbox"/> Current course registration/schedule <input type="checkbox"/> Complete student academic history <input type="checkbox"/> Confirmation of program completion and graduation eligibility <input type="checkbox"/> Grades	<input type="checkbox"/> Amounts owing on my account <input type="checkbox"/> Payments made on my account <input type="checkbox"/> Status of account ( <i>past due, registration cancelled, sent to collections, etc.</i> )

The information checked off above may be released to the following person(s), agency or organization(s):

1. Name of designate/agency/organization: \_\_\_\_\_

Email address: \_\_\_\_\_

2. Name of designate/agency/organization: \_\_\_\_\_

Email address: \_\_\_\_\_

3. Name of designate/agency/organization: \_\_\_\_\_

Email address: \_\_\_\_\_

*I understand I have the right to rescind the permission(s) granted to the above noted designate/agency/organization at any time by writing to [enrolment@mitt.ca](mailto:enrolment@mitt.ca).*

By signing this form, I am explicitly granting access to elements of my personal/academic information to the person/organization designate on this document. I hereby agree to save harmless MITT from any present or future claims by myself, my heirs, or assigns for releasing the above information. MITT will not release student account username(s) and/or password(s), or Tuition and Education Credit Certificates (T2202A Tax Receipts) to anyone other than the student.

I understand it is my responsibility to become familiar with MITT's policies and read the Freedom of Information and Protection of Privacy Act (FIPPA) <https://mitt.ca/privacy>. MITT collects and protects personal information under the authority of the Freedom of Information and Protection of Privacy Act (FIPPA) for the purpose of operating the programs and services of the College. More information about FIPPA is at <http://www.gov.mb.ca/chc/fippa>.

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_

**Office Use Only:**

Date Received: \_\_\_\_\_ Date Entered: \_\_\_\_\_