



Consent to Release Student Information Student Exchange Programs

I, (full name) _____, Student ID # _____,

hereby authorize and consent to the release of any information contained in, or part of, my University of Manitoba student record and Exchange Program student record to the following:

University of Manitoba Exchange Contacts

- Function: Student Exchange Coordinator/Advisor _____
Organization: International Centre (IC) and/or Faculty offering the Exchange Program

Personal Contacts (optional)

This may include a parent, guardian, spouse/partner, or other designate who could make inquiries on behalf of the student or contact the International Centre or faculty staff in the event of an emergency.

- Name: _____
Relationship: _____
- Name: _____
Relationship: _____
- Manitoba Student Aid (only for students who have applied for Manitoba Student Aid)

Restrictions (optional): I do NOT want my Personal Contacts to receive information on:

- My grades and academic performance
- My fees and financial situation
- My registration and enrolment status
- Other (please specify): _____
- Do not release information to Manitoba Student Aid

Student Signature: _____ **Date:** _____

Notice Regarding Collection, Use, and Disclosure of Personal Information by the University

Your personal information is being collected under the authority of The University of Manitoba Act. The information you provide will be used by the University for the purpose of providing consent to release information to International Centre staff and relevant University of Manitoba staff in relation to your Exchange Program. Your personal information will not be used or disclosed for other purposes, unless permitted by The Freedom of Information and Protection of Privacy Act (FIPPA). If you have any questions about the collection of your personal information, contact the Access & Privacy Office (tel. 204-474-9462), 233 Elizabeth Dafoe Library, University of Manitoba, Winnipeg, MB, R3T 2N2.