**Student Informed Consent and Authorization for Reference Disclosure**

The University of Calgary collects, uses, and discloses personal information under the authority of Alberta’s *Freedom of Information and Protection of Privacy Act* for the purposes of operating the programs and activities of the university.

If you require the disclosure of your personal information for the purpose of an employment reference to another person, organization, or agency, please complete the following informed consent as required under the *Act*.

I request and consent to authorize:

|  |
| --- |
|  |
| Name of Reference/Position/Program |

to disclose my personal information specific to my academic performance, Field and/or practicum placement, and relevant personal attributes:

|  |
| --- |
|  |
| Identify specific individuals, organizations, or agencies |

* Only to
* Or **Check**  **if you wish to authorize disclosure to all requests for references.**

|  |
| --- |
| writing a letter of reference  providing a verbal reference  responding to a reference check |
| Check all that apply |

for the purpose of:

This consent will be effective, and I hereby agree to such disclosure, for one (1) year past the signature date. I understand that the authorization will be retained and disposed of in accordance with university’s record retention policies. I understand that I may request to withdraw my authorization at any time by issuing a signed letter to the Office of the Registrar.

Full Name: Student UCID #:

Signature: Date:

This information is collected under the authority of Section 33(c) of the Alberta *Freedom of Information and Protection of Privacy (FOIP) Act*. It will be used for the purpose of responding to requests for letters of reference, verbal references, or reference checks. If you have any questions about the collection or use of this information, please contact the FOIP Coordinator at AD111, 2500 University Drive NW, Calgary AB T2N 1N4, (403) 210-8405.