

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY

Student Records Reference Request Form

I,	request that of reference or respond to a reference check on my be	write a
I under		will have to disclose personal information ics, in order to write a letter of reference or
I agree	to the disclosure of my personal information:	
O	Only to the following individuals or organizations	
		<u> </u>
		
		<u></u>
		
O	To all requests for references.	
This co	onsent will be effective for one year after the signature	re date.
G:		
Signati	ure	
Date_		

This information is collected under the authority of the Freedom of Information and Protection of Privacy Act - Section 32(c). It is required only to respond to a request for a reference. If you have any questions regarding the collection or use of this information, contact the Freedom of Information and Protection of Privacy Coordinator at Mount Royal University, A307, 403-440-7288.