

CONSENT FORM

Unless otherwise arranged, this consent form is valid for the entire study period at University of St. Michael's college.

In accordance with the Freedom of Information and Protection of Privacy Act (FIPPA) and the University of Toronto's general notice of collection as posted on ROSI, the Faculty of Theology, University of St. Michael's College, Student Services Office will not distribute your personal information without your expressed permission. To assist us, please indicate your preference outlined below:

- I grant consent to the office to use collected personal information for statistical reports as required by ATS and other outside agencies:
 Yes No

- I grant consent to the office to disclose, provide or use collected personal information for reports to and inquiries from my denominational representatives:
 Yes No

- I grant consent to the office to add me onto the Portal by providing my UTORid - _____ so that I can access community announcements and program documents:
 Yes No

Photography and video recordings of students may be taken throughout the academic year at events and in class sessions for promotional or educational purposes. If you do not wish to have your photo used, check here .

It is the Faculty of Theology's practice to make the names, the academic program and/or some personal information of award winners available to the donors of awards and bursaries. Check here if you do not wish the office to disclose information .

In addition, your name and the award you have won will be published in documents circulated within the University of St. Michael's College community and may be posted on our website as they celebrate the achievements of the winners. Check here if you do not wish to have this information shared .

Date: _____

Name (Please print): _____

Signature: _____

**This Form Must Be Submitted To The Student Services Office
(Room 307, Alumni Hall, 121 St. Joseph Street)
No Later Than The Second Friday After The Fall Term Starts Each Year.**