



Consent to Disclose Personal Information

Pursuant to Section 33(2)(c) of the British Columbia *Freedom of Information and Protection of Privacy Act* (RSBC 1996, c. 165), I, _____,

give my consent to the _____
(Name of faculty, department or office)

to disclose my personal information under the terms and conditions noted below.

1. The personal information to be disclosed is:

(List the specific types of personal information and/or records including title, to/from and date)

2. My personal information may be disclosed to the following person(s) and jurisdiction(s):

(List all individuals including name, title, institution/business and general location such as country)

3. My personal information is disclosed for the following purpose(s):

(List all the purposes for which the personal information will be disclosed)

4. This consent to disclose my personal information expires on:

(Specify the date on which the consent will expire)

No disclosure or use of personal information about me beyond the terms described above is permitted without my express written authorization or unless permitted by law.

Signature of person giving consent

Effective Date