



THOMPSON RIVERS UNIVERSITY

CONSENT TO RELEASE PERSONAL INFORMATION TO A THIRD PARTY

Thompson Rivers University (TRU) collects, uses, discloses and retains personal information in compliance with the BC *Freedom of Information and Protection of Privacy Act* (the FIPPA).

Under Section 33.1(b) of the FIPPA, TRU may disclose (release) personal information to third parties only if the individual the information is about has identified the information and consented to its disclosure.

Name _____

Employee/Student Number _____

I consent to Thompson Rivers University (TRU) and its service providers, disclosing the following information to the following persons/organizations for the following purposes.

<u>Information to be Disclosed</u> (include a time frame if necessary)	<u>To Whom</u>	<u>The Purpose for Disclosure</u>

This signed authorization will remain in effect until _____ (date if applicable).

I understand that the party to whom disclosure is made (and not TRU) is responsible for the security arrangements to prevent unauthorized access to my personal information.

I have read the above, understand it, and agree to it.

(Signature)

(Date)

Your personal information is collected on this form under section 26(c) of the FIPPA in order to gain your consent. For further information about this privacy notice and consent please contact your department contact. Alternatively, you may contact the Privacy and Access Office at privacy@tru.ca, or by post: 805 TRU Way, Kamloops, BC V2C 0C8. This form will be kept on file in compliance to TRU's Records Retention Policy.