

NON-DISCLOSURE OF PERSONAL INFORMATION FORM

IF YOU WISH TO:

- HAVE MACEWAN UNIVERSITY NOT UTILIZE SECTION 17 (2)(J) TO ROUTINELY RELEASE THE TYPES OF INFORMATION LISTED BELOW, OR
- TO CANCEL A PREVIOUS SPECIAL CONSENT TO DISCLOSURE AUTHORIZATION,

PLEASE COMPLETE THE FOLLOWING DECLARATION AND SUBMIT IN PERSON TO THE OFFICE OF THE UNIVERSITY REGISTRAR.

I INSTRUCT **MACEWAN UNIVERSITY** NOT TO DISCLOSE (*CHECK APPROPRIATE BOX(ES)*):

- ENROLMENT INFORMATION
- EVENT OR ACTIVITY ATTENDANCE OR PARTICIPATION
- RECEIPT OF HONOR OR AWARD

AND / OR REVOKE DISCLOSURE PERMISSION FOR _____
 (*IDENTIFY INDIVIDUAL TO WHOM PREVIOUS CONSENT HAS BEEN RELEASED*)

FOR THE PERIOD (*CHECK APPROPRIATE BOX*):

- PERMANENTLY
- UNTIL COMPLETION OF STUDIES
- UNTIL OTHERWISE DIRECTED

PERSONAL INFORMATION PLEASE FILL IN ALL INFORMATION IN FULL (PLEASE PRINT)

STUDENT ID NO.:	PROGRAM OF STUDY
FULL NAME:	DATE:

SIGNATURE: _____
Signature not required if sent from a student@mymacewan.ca email account

Office Use Only

RECORDS - PROCESSED BY : _____

DATE PROCESSED: _____

PERSONAL INFORMATION COLLECTION NOTICE

The personal information requested on this form is collected under Section.33(c) of the *Freedom of Information and Protection of Privacy Act* for the purpose of one or all of the following: to determine eligibility for admission and financial assistance, to advise students about academic programs and to provide university services at MacEwan University. Questions concerning this collection should be directed to the Lead, Privacy and Information Management at privacy@macewan.ca