

**Consent for Release of Information  
Post Secondary Student Support Program  
Northern Nishnawbe Education Council**



**FOR STUDENTS RECEIVING NNEC FUNDING**

As a condition of receiving funding, you are required to give your consent to the exchange of personal, financial, and academic information with affiliated education, government, and financial representatives.

I, (print) \_\_\_\_\_ authorize the Registrar (or designate) and the Student Services Department of my post secondary institution to release the following information to the Post Secondary Department of Northern Nishnawbe Education Council. The release of any additional information requires the "informed consent" of the student.

**Personal Information**

- Name
- Student number
- Mailing address
- Telephone number
- Email address

**Financial Information**

- Records of payment
- Records of non-payment
- Records of fraudulent payment

**Academic Information**

- Course schedules
- Grades
- Attendance records
- Copies of academic warnings

I, (print) \_\_\_\_\_ authorize Northern Nishnawbe Education Council to release my information to the board approved auditor and affiliated Government of Canada representative. My consent is in effect from this day forth through seven years after the completion of my post secondary studies.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
NNEC Post Secondary Counsellor Signature

\_\_\_\_\_  
Date