

Student's Consent to Release Personal Information Form

Canada-Newfoundland and Labrador Integrated Student Financial Assistance Program

Student's Personal Information and Consent		
Student's First Name	Student's Last Name	Student's Social Insurance Number (SIN) XXX-XXX-
<p>I agree to have my personal and financial information from my Canada - Newfoundland and Labrador Integrated Student Financial Assistance Program file held at the Student Financial Services Division, Department of Education, Government of Newfoundland and Labrador shared with the person(s) indicated on this Form.</p> <p>This consent applies to all information in my file for the 2021-22 academic year and all prior academic years. This consent expires at the beginning of the next academic year (August 1, 2022).</p> <p>Withdrawal of consent can occur at any time by contacting or writing the Director, Student Financial Services Division, Department of Education, Government of Newfoundland and Labrador, P.O. Box 8700, St. John's, NL, A1B 4J6 or (709) 729-5849.</p>		
Student's Signature	Date	

Third Party 1			
First Name		Last Name	
City/Town	Province	Postal Code	Area Code and Telephone Number
Third Party 2			
First Name		Last Name	
City/Town	Province	Postal Code	Area Code and Telephone Number
Third Party 3			
First Name		Last Name	
City/Town	Province	Postal Code	Area Code and Telephone Number

Collection and Use of Information:

This personal information is collected under the authority of the **Canada Student Loans Act**, **Canada Student Financial Assistance Act**, and the **Student Financial Assistance Act, 2019** (Newfoundland and Labrador) as amended from time to time and will be used to determine and verify eligibility under the federal and provincial student financial assistance programs. For any questions about the collection and use of this information, contact the Director, Student Financial Services Division, Department of Education, Government of Newfoundland and Labrador, P.O. Box 8700, St. John's, NL, A1B 4J6 or (709) 729-5849.