

First Name:

## Consent to Release Information Form

With your permission, information sent to the UOIT Registrar's office will be shared with Student Accessibility Services as part of the admission review process. As such, all disability-related information being submitted must include this Consent to Release Information form.

The UOIT Admissions staff will not review any specific disability-related documentation. If the applicant has met the minimum published admission requirements their disability related documents (refer to checklist) will be forwarded to Student Accessibility Services.

Staff at Student Accessibility Services will review the information submitted for consideration on the basis of disability. Staff will then forward their determination as to whether or not consideration is warranted to the Admissions office.

Please fill in the form below to ensure timely processing of your application. **Incomplete packages** will not be reviewed.

Last Name:

Date of Birth:(DD/MM/YY)	UOIT Student #:
I hereby give permission for the following:	
<ul> <li>UOIT Admissions office to provide Student Accessibility Services with all information pertaining to my application; and</li> </ul>	
<ul> <li>Student Accessibility Services to review all documentation submitted as consideration on the basis of disability and to communicate relevant information regarding my eligibility for special consideration to the Admissions office.</li> </ul>	
I understand that all information will be reviewed and maintained in accordance with the Freedom of Information Protection of Privacy Act.	
Applicant's Signature	Date