

Graduate Studies - Applicant Information Release Form

School of Graduate and Postdoctoral Studies (SGPS)
University of Ontario Institute of Technology
2000 Simcoe Street North, Oshawa, ON L1H 7K4 Canada

905.721.8668
905.721.3062 (fax)
gradstudies.uoit.ca

Student ID _____

I _____
(Please print full name)

hereby give consent and authorize the University of Ontario Institute of Technology's School of Graduate and Postdoctoral Studies to release any and all information pertaining to my graduate application to the following person(s):

Name: _____

Relation/Organization Title: _____

Name: _____

Relation/Organization Title: _____

Signature of Applicant: _____ Date _____

IMPORTANT: If you are giving consent to a third party agency or agent, no fees will be paid by UOIT for any services provided to the applicant by the third party.

THIS CONSENT WILL BE EFFECTIVE UNTIL SGPS IS NOTIFIED BY THE APPLICANT

If you require this information in an alternative format due to disability, please email gradstudies@uoit.ca