



Consent for Disclosure of Personal Information (Personal Information, Photographs, Video and Audio)

I authorize the	
	Department/Office / Program / Individual
to use the designated Personal Information, photographs, video or audio	
	Listing of Personal Information to be used
taken on	
	Date photograph taken or video or audio recorded
for the purpose of	
	State specific purpose of information release
in the period	
	State date range for which permission will exist

Full Name:	
I.D. Number:	
Email Address:	
Date:	

Signature: _____

Privacy Notice: Personal Information is collected by Carleton University under the authority of the Federal Freedom of Information and Protection of Privacy Act and the Carleton University Act 1952. If I have any questions about the collection of personal information by Carleton University I can contact the Carleton University Privacy Office, 613-520-2600, ext. 2047, University_Privacy_Office@carleton.ca.

Note: All photographs, audio and video commissioned by Carleton University is the property of Carleton University. This information will be retained and disposed in accordance with approved records retention and disposal schedules of the university.