

## Consent to Disclose Personal Information to a Third Party Instruction Sheet

Use this *Consent to Disclose Personal Information to a Third Party Form* to give Advanced Education permission to **share** your personal information with a third party. If you want to give a third party permission **to take action** on your behalf, complete a Power of Attorney Form.

### How to complete this form:

1. Print off the consent form. (If you are studying outside of Canada, we encourage you to submit this form **before** you leave Alberta.)
2. Complete the consent form in ink with the following information:
  - your full legal name (first name, middle initial, last name)
  - the first 6 digits of your Social Insurance Number
  - the type of information that you do not want to have disclosed
  - the full legal name (first name, middle initial, last name) of the person you are authorizing to have access to your information
  - an end date on which you want your authorization to expire
3. Sign and date the consent form and make copies.
4. Submit the form to Student Aid Alberta:
  - Send documents electronically: 1. Visit [studentaid.alberta.ca](http://studentaid.alberta.ca) 2. Sign in via SFS Login 3. Submit securely using Upload Electronic Document(s).
  - Or mail the original to: Student Aid Alberta, PO Box 28000 Stn Main, Edmonton AB T5J 4R4
5. Give a copy to your authorized third party.
6. Keep a copy for yourself.

### Who do I contact for help?

Contact the Student Aid Alberta Service Centre at:

- 1-855-606-2096 toll free from anywhere in North America
- 1-855-306-2240 TTY for the hearing impaired
- 800 2 529-9242 outside North America – add the appropriate International Access Code



PO Box 28000 Stn Main  
Edmonton AB T5J 4R4

# Consent to Disclose Personal Information to a Third Party

Your written consent authorizes Advanced Education to disclose your personal information to a designated individual in accordance with the *Freedom of Information and Protection of Privacy Act* (Alberta). If you have any questions regarding the disclosure of information, contact the Student Aid Alberta Service Centre toll free at 1-855-606-2096 from anywhere in North America. You can also mail your questions to Student Aid Alberta, Privacy Officer, PO Box 28000 Stn Main, Edmonton AB T5J 4R4.

**STUDENT'S SOCIAL INSURANCE NUMBER**  
(provide the first 6 digits of your Social Insurance Number only)

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I, \_\_\_\_\_  
Print Student's Full Legal Name (first name, middle initial, last name)

authorize Advanced Education to disclose information, including my personal information, contained in my student aid application and any information about the status or consideration of my student aid application or student loan(s) (including any grants or other financial assistance) to:

\_\_\_\_\_ (the "Third Party")  
Print Full Legal Name (first name, middle initial, last name) of person to whom student aid application and student loan(s) information will be disclosed

so that this individual may:

\_\_\_\_\_  
(Insert reason/purpose for which you are consenting to disclose information to this Third Party, e.g. to manage and administer my student aid application in my absence; to assist me in my request for review of funding provided; for the purposes of litigation; etc.)

**Notwithstanding the authorization above, I do not consent** to Advanced Education disclosing the following information to the Third Party (list any particular pieces of information that you do not authorize the third party to obtain, e.g. do not share information regarding my disbursement amounts or loan balance):

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This authorization is valid until: 

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 day 

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 month 

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 year

← You must provide an end date on which your authorization will expire.

\_\_\_\_\_  
**Signature of student**

\_\_\_\_\_  
**Date**