

## THIRD-PARTY AUTHORIZATION/RELEASE OF INFORMATION FORM

Submit completed form to any Campus Services Office or by email to <a href="StudentHelp@nlc.bc.ca">StudentHelp@nlc.bc.ca</a>

\* Indicates a required field

In compliance with the **Freedom of Information and Protection of Privacy Act** (FOIPOP), Northern Lights College (NLC) is prohibited from providing information from your student record to a third party, including student records such as information on attendance or grades, invoices, financial aid (including scholarships, grants, or loan amounts). This restriction applies, but is not limited to, your parents or guardians, your spouse, or a sponsor.

Students may grant NLC permission to release information from their student record to a third party by submitting a completed *Third-Party Authorization/Release of Information* form. The specified information will be made available only if requested by the authorized third party. NLC does not automatically send this information. Authentication of the third party will be required before releasing authorized information. Government issued photo ID may be requested.

Complete this form to grant NLC permission to release your student record information to a third party. Please fill out one form per authorized third party.

STUDENT INFORMATION	<u></u>	
Last name (Legal) *	First name (Leg	al) *
NLC student number or Date of Birth (yyyy/mm/dd) *	Daytime phone	number *
THIRD PARTY INFORMATION		
SELECT ONE *		
☐ The third-party I am granting a student records	s release to is an <b>individual</b> . Relationship t	o student:
☐ The third-party I am granting a student records	release to is an <b>organization/company.</b> /	lame:
THIRD PARTY CONTACT INFORMATION		
Name (First and Last): please provide the individual's name	e or (if applicable) the name of a contact for	or the authorized Organization/Company *
Phone #*	Email*	
STUDENT RECORDS RELEASE		
I authorize Northern Lights College to release the following	; information from my student record to th	ne above-named third party upon request *
☐ Academic standing – access to information abut academic status and/or academic standing		
☐ Enrolment status – access to information about admissions and registration		
☐ <b>Graduation / credentials</b> – access to information about graduation status and credential(s)		
☐ <b>Grades</b> – access to information about final grades		
☐ Student account information – access to information about student account receivables		
☐ Financial aid information – access to information about financial aid and awards		
☐ <b>Disciplinary information</b> – access to information about disciplinary status, including academic and non-academic		
☐ Other:		
DURATION		
Start date (yyyy/mm/dd) *	End date (yyyy/mm/dd)	or ☐ Indefinite (no end date)
☐ I understand I can revoke this Student Records Release at any time by notifying <a href="mailto:StudentHelp@nlc.bc.ca">StudentHelp@nlc.bc.ca</a> *		
DECLARATION AND SIGNATURE		
=		ent, unless otherwise required by law. By signing below, I hereby authorize pecified period of time. NLC considers a falsified student records release
Student signature*		
Staucht Signature		Date*

20240215 An Office of the Registrar form