



Information Waiver

Policy Reference: [AD.1.1.2 Confidentiality of Student Information Schedule A](#)

AA211, Heritage Hall
 1301 - 16 Avenue NW
 Calgary, AB T2M 0L4
 Phone: 403.284.7248
 Toll-free: 1.877.284.7248
 Fax: 403.284.7112
 Email: inquiry@sait.ca

Please complete sections A to D.

A) Personal Information

| | | | |
|------------------|---|-------------------|---|
| | | Student ID Number | |
| Last Name | | First Name | Middle Name |
| Address | | City | Province |
| Preferred Number | <input type="checkbox"/> Home <input type="checkbox"/> Cellular <input type="checkbox"/> Business | Alternate Number | <input type="checkbox"/> Home <input type="checkbox"/> Cellular <input type="checkbox"/> Business |
| Email Address | | Postal Code | |

B) This information is to be given only to the following individual(s) or organization(s)

| | |
|--------------------|--------------------------------------|
| Relationship to me | Name, Email Address and Phone Number |
| Relationship to me | Name, Email Address and Phone Number |
| Relationship to me | Name, Email Address and Phone Number |

C) Types of Releasable Information and Time-frame

Please allow the above listed individuals or organization(s) access to the following information effective of the dates listed below. *(Select all that are applicable)*

Grades
 Application Status
 Registration Information
 Account Balance
 Other *(please specify)*

| | |
|--|----------------------------------|
| Date from <i>(dd/mm/yyyy)</i> to <i>(dd/mm/yyyy)</i> | Duration of registration at SAIT |
|--|----------------------------------|

D) Student Acknowledgement

I hereby give my permission/authorization for the disclosure of for SAIT to disclose my personal information to the above noted individual(s) or organization(s).

| | |
|-----------|------|
| Signature | Date |
|-----------|------|

FOIP Notification Statement

The personal information provided on this form is collected under the authority of the [Freedom of Information and Protection of Privacy Act](#) of the Province of Alberta, Section 33(c). This information will be used to respond to your authorization to release your official student record. Your personal information is protected by Alberta's Freedom of Information and Protection of Privacy Act and can be reviewed on request. If you have any questions about the collection or use of this information or to notify SAIT that you wish to withdraw your consent, contact the FOIP Coordinator at 1301-16 Avenue NW, Calgary, AB T2M 0L4 or email at foip.coordinator@sait.ca

| | |
|--------------------|------|
| Records updated by | Date |
|--------------------|------|