

Financial Assistance for Nunavut Students

CONSENT FOR THE RELEASE OF INFORMATION

I IMPORTANT

Return to: FANS@gov.nu.ca

Use this form if you wish to have a parent or someone else access your FANS information on your behalf during the current school year. A separate form must be submitted for each person you want to have access to your FANS information. The consent provided by this form expires on June 30th. A new form must be completed and submitted each year

STUDENT INFORMATION	
Last Name	Given Names
Telephone	Email Address
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RELEASE INFORMATION TO	
Last Name	Given Names
Relationship to Student	Email Address
INFORMATION TO BE RELEASED	
Please indicate the type of information you want FANS to release to this person during this academic year:	
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☐ All or ☐ Some (Please Explain):	
DECLARATION OF CONSENT	
I hereby consent to the release of information from my FANS file referred to above by the Department of Family Services. No other person(s) will be given this information without my further written consent and this information will be used only as stated above. I understand that I can withdraw this consent at any time by notifying the FANS office.	
Student's Signature	Date (YYYY-MM-DD)

This information is being collected under the authority of the Access to Information and Protection of Privacy (ATIPP) Act, Section 40 and the Student Financial Assistance Act and Regulations. The information will be used to determine your intial and continued eligibility for FANS and for the general administration and enforcement of this program. The Privacy provisions of the ATIPP Act protect your information, and all applicants have the right to examine and request correction of their records and to request a review by the Information and Privacy Commissioner. If you have any questions about the collection of your personal information, contact the FANS Manager, Box 390 Arviat, Nunavut X0C 0E0, FANS@gov.nu.ca or call 1-877-860-0680.

FANS@gov.nu.ca www.gov.nu.ca

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