

CONSENT TO DISCLOSURE OF PERSONAL INFORMATION

Freedom of Information and Protection of Privacy Act

and

Personal Information Protection Act

This form serves as consent by the applicant for the Office of the Information and Privacy Commissioner (OIPC) to disclose information, including the applicant's personal information, to another individual who the applicant authorizes as his or her agent in relation to a request for review or complaint.

l, Name of Applicant	, () Preferred pronoun
hereby authorize the OIPC to disc	lose information, including my personal information, to
	Name of Agent
in the matter involving	Name of Public Body or Organization
and relating to	
	Description of request for records or complaint.
	ntil the sooner of conclusion of the review or complaint or Inquiry raws consent in writing to the OIPC.
Address of Applicant:	
Phone # of Applicant:	
Alternate Phone #:	
Email of Applicant:	
Signature:	Date:
Witness:	Date:
Witness Name and Address: (The Witness must be a neutral	third party that knows the Applicant, and cannot be the Agent)
, .	applicant, and you are unable to obtain consent, or the applicant

is incapable of providing consent, you must include proof of your authority to act on behalf of the applicant as set out in Regulation 4 of the *Freedom of Information and Protection of Privacy Act* Regulation, or Regulation 2 of the *Personal Information Protection Act* Regulation.