



## PERMISSION TO RELEASE APPLICATION INFORMATION

The University is bound by the *Privacy and Personal Information Protection Act 1998* (NSW). The University of Sydney is committed to maintaining the privacy of an individual's personal information held by the University. Further information about privacy can be found at the University's [privacy statement](#).

This form may be used by a student to consent to the University disclosing their application progress to any representative nominated by a student.

The consent provided on this form will continue until such time that a student notifies the University that consent is withdrawn.

## PERSONAL DETAILS

Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_ DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

University of Sydney Course: \_\_\_\_\_ SID: \_\_\_\_\_

Current Postal Address: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

## REPRESENTATIVE

Please specify the name of the person that you consent your personal information being released to:

Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

OR

Name of the Entity: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

## AUTHORITY TO RELEASE INFORMATION

I consent to the University of Sydney releasing the following information (please list below), related to my study at the University of Sydney, to the person/entity I nominated above:

Student's Signature: \_\_\_\_\_

Date: \_\_\_\_\_