

CONSENT for RELEASE of PERSONAL INFORMATION

(See below for a guide to completing this form. See also the definition of 'personal information.')

(1) I, (print name)	
(2) a graduate of the Faculty of Medicine, at t	he University of Manitoba ,
(3) authorize The Faculty of Medicine at The	University of Manitoba
(4) to release Verification of Undergraduate N Education.	ledical Education or Postgraduate Medical
(5) This personal information can be released organization, or individual):	<u>to</u> (give the name of the public body,
(6) for the purpose of verification of undergra- residency or internship programs.	aduate medical education or postgraduate training
I hereby state that I have read and understood the contents of this Consent for Release of Personal Information. I HEREBY GIVE MY CONSENT FOR THE RELEASE AND USE OF THE SPECIFIED PERSONAL INFORMATION AND I DECLARE THAT THIS CONSENT HAS BEEN GIVEN VOLUNTARILY.	
(7) Date:	(8) Signature:

The public body, organization, or individual receiving this personal information is directed <u>not to use</u> the information for any other purpose than that stated above. The recipient is also directed <u>not to further release</u> this personal information without the further written permission of the individual that the information is about.

GUIDE to COMPLETING 'CONSENT for RELEASE of PERSONAL INFORMATION'

This form pertains to personal information that is in the care and custody of the University of Manitoba. The form is to be used when a student, employee, or other individual wishes to provide consent for the release of his or her personal information to an external public body, organization, or individual (i.e., release of a student's information to an employer connected with a work co-op program).

- (1) Print your given name, middle initial(s), and surname in this blank.
- (2) Indicate your relationship to the University (i.e., student, former student, employee, former employee, or other. A student may be required to provide student number).
- (3) Name the University administrative office, faculty, department, unit or centre that holds and will be releasing your personal information (i.e., Student Records Office).
- (4) List the types or items of personal information that are to be released (i.e., name, e-mail address, grades (see below for definition of 'personal information')).
- (5) Name the public body, organization, or individual that your personal information will be released <u>to</u>. Include the address if known. If the release is to be made to an individual, include the individual's position if known.
- **(6)** List and describe briefly the purpose(s) for release of the information (i.e., 'to enable Company XYZ to initiate and administer my work co-op employment').
- (7) Indicate the date of signing.
- (8) An expiry date is optional. You or the University may find it necessary to specify a date when the consent expires.
- (9) Sign only when you have read the entire form and have understood the implications of signing it.
- (10) Your witness can be any adult who is not related to you. The witness can be a staff member of the department that holds and will be releasing your information.

DEFINITION of 'PERSONAL INFORMATION'

'Personal information' means recorded information about an identifiable individual, including:

- a) The individual's name,
- b) The individual's home address, or home telephone number, facsimile or e-mail number,
- c) Information about the individual's age, sex, sexual orientation, marital or family status,
- **d)** Information about the individual's ancestry, race, colour, nationality, or national or ethnic origin,

- e) Information about the individual's religion or creed, or religious belief, association or activity,
- f) Personal health information about the individual:

'Personal health information' means **'recorded information'** about an identifiable individual that relates to:

- i. the individual's health or 'health care' history, including genetic information about the individual,
- ii. the provision of health care to the individual, or
- iii. payment for health care provided to the individual,

and includes

- i. the 'PHIN' and any other identifying number, symbol or particular assigned to
- ii. an individual, and
- iii. any identifying information about the individual that is collected in the course of, and is incidental to, the provision of health care or payment for health care.

'Health care' means any care, service or procedure:

- i. provided to diagnose, treat or maintain an individual's physical or mental condition,
- ii. provided to prevent disease or injury or promote health, or
- iii. that affects the structure or a function of the body,

and includes the sale or dispensing of a drug, device, equipment or other item pursuant to a prescription.

- g) The individual's blood type, finger prints, or hereditary characteristics,
- h) Information about the individual's political belief, association or activity,
- i) Information about the individual's education, employment or occupation, or educational, employment or occupational history,
- j) Information about the individual's source of income or financial circumstances, activities or history,
- k) Information about the individual's criminal history, including regulatory offences,
- I) The individual's own personal views or opinions, except if they are about another person,
- m) The views or opinions expressed about the individual by another person, and
- n) An identifying number, symbol or other particular assigned to the individual.
- Clauses (a) to (n) of the definition 'personal information' list examples of personal information. This list is not exhaustive, as the word 'including' is used; clauses (a) to (n) do not set out the only information which is personal information (Provincial Government, Freedom of Information and Protection of Privacy Act, Resource Manual, 2002).