



INFORMED CONSENT FOR RELEASE OF PERSONAL INFORMATION

REGARDING RÉSUMÉS, CRIMINAL REFERENCE CHECKS, ENTRY IMMUNIZATION FORMS AND STUDENT DECLARATION OF UNDERSTANDING (WSIB) FORM

Name: _____ **Date:** _____

(Please Print in Full: Last Name, First Name)

Durham College Program: _____

I understand that Durham College is required by some field placement agencies to provide a copy of each student's Résumé, completed Entry Immunization Form, Student Declaration of Understanding (WSIB) Form and a Criminal Reference Check.

I understand that the information in my Résumé, completed Entry Immunization Form and Criminal Reference Check is personal.

I understand and agree to release my Résumé, completed Entry Immunization Form, Student Declaration of Understanding (WSIB) Form and Criminal Reference Check to Durham College and hereby give Durham College the authority to provide my personal Résumé, completed Entry Immunization Form, Student Declaration of Understanding (WSIB) Form and Criminal Reference Check to any field placement agency who makes a request for it or requires it for field placement purposes.

I understand that Durham College provides the Résumé, completed Entry Immunization Form, Student Declaration of Understanding (WSIB) Form and Criminal Reference Check to the field placement agencies, but has no authority or control on how the agency protects the information.

I will not hold Durham College responsible for the field placement employers' actions. I have read, understood and consent to the above.

Signature _____

Student ID # _____

*** Please note that the Faculty of Science and Engineering Technology at Durham College will keep your résumé on file for no longer than one year after graduation at which time it will be shredded and disposed of.***