

Student Information Release Form

Registrar's Office
 Halifax NS B3M 2J6
 Phone (902) 457-6117 FAX (902) 457-6498
registration@msvu.ca

Financial Services
 Halifax NS B3M 2J6
 Phone (902) 457-6277 FAX (902) 457-6498
financial.services@msvu.ca

This form must be completed by the student in order for a parent or additional persons, other than the student, to have access to that student's enrolment and financial information, such as, but not limited to:

- Admissions status
- Financial standing
- Program of Study
- Academic Standing
- Year level
- Transcripts
- Class schedule
- Grades

This information will only be provided to the person(s) listed below upon presentation of valid photo ID at the Registrar's Office or Financial Services Counter. Written requests signed by the authorized person will also be considered. Please note that it is not University policy to provide any information over the phone. Students will also be notified when an external request for information is made.

The completed form must be returned to the Registrar's or the Financial Services Office (Evaristus Service Counter or fax to 902-457-6498) in order to be considered in effect.

Student ID#	Last Name	First Name(s)		
Apartment/Street	Town/City	Province	Postal Code	
Date of Birth	(____)_____ Phone Number	Mount Email Address		

I agree that (please list all that apply):

Name	Relationship to student	Signature
Name	Relationship to student	Signature
Name	Relationship to student	Signature

has/have permission to have:
 any and all enrolment information
 any and all financial information

that they request about my student account at Mount Saint Vincent University.
 I hereby agree that by signing this form I am giving permission to the person(s) above to receive detailed information pertaining to both Financial and Registration information on my account.
 This permission will remain in effect until I submit a written request to the contrary.

Student Signature	University Authorization
Date	Date