



DOUGLAS COLLEGE

Employee Information Release Form

At Douglas College, employee information is covered under the Freedom of Information and Protection of Privacy Act. As a public body, Douglas College is required to adhere to the Act with respect to both the collection and use of personal information. We will not disclose any personal information in a manner that contravenes the Act. If you wish to have your employment information released to a third party, we require written authorization from you. Please attach any documentation you may have to this form that explains your request.

 Last Name, First Name (PLEASE PRINT)

 Employee ID #

 Department & Campus/Location

 Daytime Phone Number/Local

 Campus Email (or other)

Please indicate information that may be released:

- Salary
- Dates of Employment
- Job Title(s)
- Performance Information
- Other – please indicate below:

Please check one: I will pick up or I authorize Douglas College to release the employment information as indicated above to the following third party:

 Company

 Contact Name

 Address

 City, Province

 Phone Number

 Fax Number

 Signature of Employee

 Date of Signature

For details, refer to College's policy [A02.05.01 Compliance with the Freedom of Information and Protection of Privacy Act](#).