HUMBER POLYTECHNIC

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Humber Polytechnic

_____
Humber Staff issuing this consent form
416-675-6622 ext. _____

I certify that I am over the age of eighteen years and have read and understand the contents of this Licence and Consent. Pursuant to Ontario's *Freedom of Information and Protection of Privacy Act,* I consent to the collection of my personal information in the form of my work and my name by Humber, its employees, agents and representatives to be used for the purposes and disclosed to third parties as described above.

Name	
Phone Number	
Email	
Humber Student	
Signature	
	Please sign here Date
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