

SUPPLEMENTARY PARENT/GUARDIAN CONSENT FORM (CANADA)
FOR UNDER 18 CANDIDATE



Consent for Disclosure of Personal Information		Applicant: Please read and sign.
By signing below, I acknowledge that I have read the privacy notice, I am the parent or legal guardian of the person whose personal information will be collected, and I consent on that person's behalf to the collection, use and disclosure of that person's personal information as described in it.		
Applicant Full Name ▼		
First Name	Middle Name	Last Name
Parent/Guardian Signature ▼ X		Date (yyyy/mm/dd)
Parent/Guardian Print Full Name ▼		