

Seneca STUDENT INFORMATION RELEASE FORM

(PLEASE PRINT CLEARLY)

Student Information	
Student First Name:	Male Female
Student Last Name	
Address	
City	
Country / Postal Code	Country: Postal Code:
Telephone:	
Date of Birth:	Month: Day: Year:
Seneca College Student ID #	
Student E-mail:	

Representative Information

My Agent:		Other:	
Agent Name:		First Name	
Company Name:		Last Name:	
Address:		Address:	
City / Country:		City / Country:	
Telephone:		Telephone:	
E-mail:		E-mail:	
Agent Number:		Relation to Student:	
When did this agent submit your application to Seneca?	Month: Year:	When did this agent submit your application to Seneca?	Month: Year:

I hereby authorize the above noted individual to act on my behalf in all matters concerning my application for admission to Seneca College including, if necessary, all international admissions matters. I understand and agree that all information concerning my application to Seneca can be communicated to the individual / company named above.

Student Signature:		Date:	
Representative Signature:		Date:	

Seneca College assumes no responsibility or liability, for the applicant's (student's) choice of representative. It is the applicant's (student's) responsibility to be informed of all Seneca's policies and procedures, as it related to any and all aspects of the application, acceptance, payment, up to their arrival at Seneca as a full-time international student.

A current and valid passport copy, showing the applicant's (student's) picture and signature, MUST accompany this form, to validate 'authorized representation'.