

Huron

AT WESTERN



International Student Exchanges

PERMISSION TO RELEASE INFORMATION

ABOUT PARTICIPANTS ON HURON EXCHANGE PROGRAMS

It is often helpful for participants going on an Exchange Program through Huron to have contact with participants who are currently studying or previously studied on exchange. With your permission, we would like to release your contact information to **other participants specific to the Exchange Program and other Huron departments** that may wish to have contact with participants while they are abroad.

I agree to allow the following information to be released to interested parties:

(Please initial in the spaces provided)

My Name

My permanent phone number

My e-mail address while on exchange

My UWO e-mail address

My overseas mailing address

My permanent mailing address

DO NOT RELEASE MY CONTACT INFORMATION

Student Name:

(please print)

Student Number:

Signature: _____