



## 2024 WINTER SEMESTER

### PROXY AUTHORIZATION FOR PERSONAL INFORMATION

I \_\_\_\_\_, authorize the Education department of the Odanak Band Council, to receive from the other services of the Band Council, schooling institution public or private, documents, copies of documents for my admissibility for financial assistance for post secondary studies

The term document, information, copy of document, refers to the following :

Report card  
Schedule  
Letter attesting that course is terminated  
All other pertinent document (s)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
DOB

\_\_\_\_\_  
Name and surname of parent (if student is a minor)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent (if student is minor)

### AUTHORIZATION TO TRANSMIT PERSONAL INFORMATION

I \_\_\_\_\_, authorize the Odanak Band Council to give my personal information, gathered with my consent to determine my admissibility for financial assistance for post secondary for other services of the Band Council, schooling institutions public or private, and this for the period covering my financial assistance.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
DOB

\_\_\_\_\_  
Name and surname of parent (if student is a minor)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent (if student is a minor)

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