RELEASE OF INFORMATION

Human Resources Department
Request for Employment Verification Letter

(IN ACCORDANCE WITH LEGISLATION AS SET OUT IN THE FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT, 1987)

I, _____, authorize the Human Resources Department
(please print full name)

to disclose the personal information listed below to:

_____

(please specify company name, location and contact name)

Please indicate the information required for Employment Verification Letter:

☐ Employment Status *(contract/permanent)*

☐ Position Title

☐ Salary

☐ Hire Date

☐ Other: _____

Limited Term employees please send request to limitedterm@ontariotechu.ca

Full-Time Continuing employees please send request to Fulltimecontinuing@ontariotechu.ca

Letters will be delivered as a PDF to the email address that sent the request.

NOTE: Standard letters will be prepared within five (5) business days of the request.

Consent for Release of Employment Information: I hereby authorize Ontario Tech University to release the above noted employment information:

Employee Signature: _____

Banner ID: _____

Date: _____