



Confidentiality Statement

Alberta’s Freedom of Information and Protection of Privacy Act (FOIP) requires Northern Lakes College and its employees to properly collect, maintain and disclose personal information and corporate records.

I understand that my job involves working with potentially sensitive and confidential information, and I understand the principles of FOIP. I agree to take all reasonable steps necessary to ensure that personal information is not made available or disclosed, either intentionally or accidentally, without the prior written consent of the individuals who may be identified by that information.

Name (please print) _____

Program/Department _____

Signature _____

Date _____

Witness _____

If you have any questions about the collection, disclosure and use of this information, please contact the FOIP Coordinator at 780-751-3259 or by email foipcoordinator@northernlakescollege.ca