

**CONSENT TO DISCLOSURE OF PERSONAL INFORMATION RE:
2022 BYRON PAEGE MEMORIAL AWARD SELECTION PROCESS**

Date: _____

I _____ consent to the disclosure of my personal information by _____ to the Byron Paege Memorial Award Selection Committee (the Committee being composed of three members delegated by CUPE 3911, one member delegated by AUSU, and one member delegated by AU Counselling Services) for the purposes of the selection process of a recipient for the 2022 Byron Paege Memorial Award. I understand that all nomination forms and accompanying information will be destroyed immediately following the award selection.

Signed:

Attach to completed Nomination Form

Scan and Email (Preferred) to: administrator@cupe3911.ca
(Subject line: Byron Paege Award)

OR

Mail to: Byron Paege Memorial Award
c/o CUPE 3911
14207 115 Ave NW
Edmonton, AB T5M 3B6

All nominations and consent forms must be received by 4pm, November 3, 2022