

APPLICANT'S AGENT CONSENT FORM

THIS FORM MUST BE COMPLETED IN FULL TO BE DEEMED VALID

Huron Student Number: _____

or

OUAC Application Number: _____

Program(s) Applied: _____

I confirm I am interested in applying or have applied, to Huron and am receiving advice and assistance from the following agency/organization/agent: _____

I consent for the agent to act on my behalf, including in the submission of applications and communicating about my application directly with the university.

I hereby authorize Huron's Recruitment and Admissions Office to release information regarding my application to the agency listed in this form.

Date: _____

Applicant Email: _____

Applicant Signature: _____

Please email this completed form to admissions@huron.uwo.ca