

Schedule “B”/CONSENT FORM

The Government of Ontario is seeking your consent to use the below information.

I, _____ (parent/guardian name) of _____ (child’s name)
allow the Government of Ontario to use my child’s (check all that apply and fill in the details in the space provided):

☐ Name

☐ A description of your child

☐ A photograph or other electronic image of your child

☐ A videotape of your child

☐ A recording of your child’s voice

☐ A quotation or summary of your child’s opinion that they expressed orally

☐ A quotation or summary of your child’s opinion that they expressed in writing, including in an electronic medium

☐ Artwork or other creative/intellectual material created by your child

for the uses described below, and for no other purposes:

☐ Advertising on television, radio, newspaper or other medium

☐ Information or publication (e.g. brochure, fact-sheet, poster or other display material) that may be sent to or shared with some or all households, businesses, associations, schools, colleges, universities, etc.

☐ Presentation, training video, correspondence or memo that may sent to or shared with some or all households, businesses, associations, schools, colleges, universities, etc.

☐ Communications materials (e.g. speeches, news releases, backgrounders) that may be released to the media

☐ Web, Internet, Intranet-based communications materials

- ☐ Participation in an event where representatives of the media (television, radio, newspaper, etc.) may be present. Their image, name, etc. may be used by the media
- ☐ Their image, name, etc. may be shared with and used by school boards and Members of Provincial Parliament

Personal information collected pursuant to this form is collected in compliance with section 38(2) of the **Freedom of Information and Protection of Privacy Act**. The information will be used for purposes described on this form and for no other purpose. If you have any questions about the collection, use or disclosure of this information, or you wish to revoke your consent, contact:

Ainsley Matthews
Events and Communications Officer
Ainsley.Matthews@ontario.ca
Ministry of Training, Colleges and Universities
315 Front Street West, 14th Floor
Toronto ON, M7A 0B8

By signing this form, you understand that the Youth Criminal Justice Act contains provisions that protect the privacy of young offenders, alleged young offenders, young persons who are victims of such offences, as well as young persons who may be witnesses to such offences. Under the Youth Criminal Justice Act, it is an offence to disclose the identity of these individuals, as well as information relating to the offences or alleged offences in which they are involved. Signing this form does not, in any way, permit the disclosure of such information.

By signing this form, you acknowledge that the personal information referred to above was provided freely and voluntarily. You agree to release the Government of Ontario and its representatives from any claim or liability that may arise out of the use or disclosure of the information collected on this form.

I have read this form after it was completed and I understand its contents. I hereby give my consent as follows:

To be signed by a parent or legally appointment guardian of individuals under the age of eighteen (18) or those who cannot provide their informed consent:

Signature

Print Name

Date