



Brescia University College – Business Office

RELEASE OF STUDENT FEE ACCOUNT INFORMATION FORM

I _____
Student ID # _____ Date of Birth (DD/MM/YR) _____

Give Permission for : _____
Name of Person _____ Date of Birth (For person granted access to student
account) _____

To have access, on my behalf, to my student fee account
at Brescia during the academic year
September 1, 2016 to April 30, 2017

Student _____ Signature Date _____

**Bring this form to the Hive at Brescia University College in the Mother St. James Bldg.
1285 Western Road, London, ON N6G 1H2 or complete and return by email to business@uwo.ca**