THIRD PARTY PICK-UP FORM

l,	hereby authorize
(printed full name of student)	, hereby authorize (printed full name of third party)
	nt cheques/confirmation of enrolment forms on my behalf from al Aid Office at the University of Victoria during the following
	to .
(study start date)	to (study end date)
at	rticipating in a
(signature)	(social insurance number)
(student ID number)	(e-mail address)

Note to student: Please enclose a photocopy of a piece of photo identification with this form and submit both to our office.

Note to third party: In order to pick up documents on behalf of the above-named student, you will be required to show us **your** photo identification.