



**Immunization Document Release**

Completion of this form is required in order for the Department of Speech-Language to release your immunization record after it has been submitted to the Student Affairs Office. An administrative fee of \$15 applies for each release requested regardless of delivery method. Please provide exact payment by cash or by cheque/money order payable to: "Dept of Speech-Language Pathology, University of Toronto." Do not send cash by mail.

<b>Section 1: Personal Information</b>	
Name: _____	Student Number: _____
Email: _____	
<b>Section 2: Delivery Format Requested</b>	
<input type="checkbox"/> <b>Student to capture an image of immunization</b> Images may only be captured by the student requesting release; a student card may be requested	
<input type="checkbox"/> <b>Request a photocopy of immunization for personal records</b> Photocopies must be picked up in person by the student named on the immunization form; a student card may be requested	
<input type="checkbox"/> <b>Request a digital copy of immunization for personal records</b> Digital copies of immunization will only be emailed to students using their official mail.utoronto.ca address	
<input type="checkbox"/> <b>Request a digital copy of immunization be sent to placement administrator or delegate</b> A carbon copy will be sent to the student's official mail.utoronto.ca email.  Specify email address here: _____	
<input type="checkbox"/> <b>Request a faxed copy of immunization be sent to placement administrator or delegate</b>  Specify fax number here: _____	
<b>Section 3: Payment and Authorization</b>	
I hereby provide the Department of Speech-Language Pathology permission to issue the aforementioned documentation as specified above. I have enclosed a total of \$_____.	
Student Signature: _____	Date: _____
<b>Administrative Use Only</b>	
Total Payment: \$ _____ <input type="checkbox"/> cheque <input type="checkbox"/> money order <input type="checkbox"/> cash	Processed by: _____ Date Processed: _____

Form and payment may be:

- 1) Mailed to: Student Affairs Assistant, Department of Speech-Language Pathology, Rehabilitation Sciences Building, #160-500 University Avenue, Toronto, ON M5G 1V7
- 2) Delivered in person to the Student Affairs Office #1064-500 University Avenue, Toronto, ON M5G 1V7
- 3) Placed into a sealed envelope addressed to "Student Affairs Assistant" and dropped in the secure SLP drop-box on the tenth floor of 500 University Avenue, Toronto, ON M5G 1V7