



Date		File No.:/Nº de dossier :
PFP funding opportunity Name of PFP funding applicant		
Consent form for PFP applica	ant – Third-party personal information	
	ect personal information as per paragraph 2 s and manages all personal information it r ith the <i>Privacy Act</i> .	
	am giving authority to the PFP applicant(s) nal services (i.e., name, company, contact to the CNSC.	
I,	, (print name) hereby consent for the (PFinformation: name, company, contact information when submitted as part of a PFP app	P applicant) to rmation, professional fees, résumé or CV, elication form under the CNSC's PFP.
	lect this personal information as part of the unding Review Committee, which reviews ants.	
	for this process is described in the PFP Person SC's Privacy Information Web page: Info S	
I give this consent freely and vo withholding personal information	pluntarily, and I understand that there is no on.	legal or other sanction against my
Name	(Signature of professional)	Date
Name	(Signature of PFP applicant)	Date
Please return the completed form	m to the PFP administrator by email at <u>cns</u> c	c.pfp.ccsn@canada.ca

70 years of nuclear safety in Canada / 70 ans de sûreté nucléaire au Canada



or by fax at 613-995-5086, along with the PFP funding application form.