

Prior to a driver training school booking a road test on behalf of a student, the student must provide his or her consent for the school to book a road test on the student's behalf and disclose personal information about that student to ICBC for the purpose of booking a road test. The completed form must be kept in the student record.

| I | | authorize | |
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| | NAME OF STUDENT | NAME OF DRIVER TRAINING SCHOOL | |
| | ne purpose of booking a road test, in accordance with sec | sonal information to the Insurance Corporation of British Columbia (ICBC) tions 26 and 27 of the Freedom of Information and Protection of Privacy Act | |
| • | My name My learner's licence number My e-mail address (if applicable) My contact phone number My preferred method of communication (email or text) Road test appointment cancellation fees (if applicable) | | |
| C | I understand that if I fail to attend a road test appointment booked on my behalf without providing either at least 48 hours notice of cancellation to ICBC, or a reason for my failure to attend that is satisfactory to ICBC, I will be charged a \$25.00 fee for each missed test at my next road test appointment. This \$25.00 fee is in addition to the usual road test fees. | | |
| C | I understand and agree that ICBC may use the above information to update its customer database, and that ICBC will not disclose the above personal information to any external third party without my consent except where authorized by law, or for law enforcement purposes. | | |
| | understand that ICBC maintains physical, electronic, and personal information. | procedural safeguards in compliance with the Act to protect my | |
| | | | |
| | SIGNATURE OF STUDENT | DATE | |

If the student has any questions regarding how his or her personal information will be used by ICBC, he or she may contact:

Driver Licensing Customer Contact Victoria

910 Government Street Victoria BC V8W 3Y8 Victoria: 250-978-8300

Metro Vancouver: 604-982-2250 Toll-Free: 1-800-950-1498