

Foundation Consent Request

AT THE UNIVERSITY OF WEST FLORIDA, WE TAKE YOUR RIGHT TO PRIVACY SERIOUSLY AND ALWAYS ENDEAVOR TO BE GOOD STEWARDS OF YOUR PERSONAL DATA.

Please complete the form below, and provide your consent to continue maintaining your personal file in the University's alumni and friends database. You can direct any questions about this form or your communication preferences to advservices@uwf.edu. You may also contact us by telephone at 1.850.474.2758 or by mail at 11000 University Pkwy, Bldg 12/133, Pensacola, FL 32514.

YOUR INFORMATION:

First Name: _____ Last Name: _____

Middle Name: _____ Maiden Name: _____
(or any previous name used with the University)

Nickname: _____ Email: _____

Phone: _____ Date of Birth: _____

Address: _____ City: _____

State: _____ Zip: _____ Country _____

PERMISSIONS:

Consent to maintain an individual's electronic file must be verifiable and will not be inferred from non-response or silence. If at any time you object to our further use of your personal data and all processing activity, you may withdraw consent and make inactive your electronic file within our database by visiting this site or contacting us using the information provided at the top of this page. You may withdraw your consent at any time without detriment.

REVIEW EU PRIVACY POLICY:

- I agree to the use of my personal information as explained in the EU privacy policy.
- I do not agree to the use of my personal information as explained in the EU privacy policy.

GETTING IN TOUCH:

Please let us know how you would like us to communicate with you. (Check all that apply.)

- Post Email Telephone SMS