**Change of address
and non-confidential personal information form**

Use this form to change your address, telephone number, email address, title, or any other personal information that must be updated. Please email this form to **PUO-UOP-Acquisitions@uOttawa.ca**. We will acknowledge receipt of your submission and confirm changes have been made to your file. In order to protect your private information, do not use this form to correct or update confidential information (social insurance number, date of birth, etc.). Please call our main office at **1-613-562-5246** to provide this information.

**Name, salutation, and language preference**

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Salutation: [ ] Mr. [ ] Ms. [ ] Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ] None
Pronoun: [ ] He [ ] She [ ] Other (please specify):

Language preference: [ ] English [ ] French

**Professional information**

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mailing address** – Home (this address is essential for the remit of royalty reports, T5 slips, etc.)

Apt no – Street no:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Street name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province/Territory: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Postal code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country, state, zip code (if outside Canada): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
*Effective date:*

**Mailing address** – Professional

Apt no – Street no:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Street name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province/Territory: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Postal code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country, state, zip code (if outside Canada): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
*Effective date:*

**Telephone**

[ ] Home: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ] Work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ] Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Social media**(please identify which social media you use and provide links, if possible)

[ ] Facebook:
[ ] Twitter:
[ ] Instagram:
[ ] LinkedIn:
[ ] Personal website:
[ ] Blog:
[ ] Other:

**Citizenship** (required to determine eligibility to certain programs)

[ ] Canadian or permanent residency [ ] Other (Please specify):

**Biography** (please update your 200-word biography here if you wish to do so)

**While you’re here… Are you a member of an underrepresented community?**

[ ] First Nations, Metis, or Inuit
[ ] Visible/racialized minority
[ ]  Disabled
[ ]  LGBTQI2S+
[ ]  Other
[ ]  I’d rather not answer

**Signature**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Document last modified: October 2022