



Institutional Planning, Analysis and Risk Services
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Survey Prize Collection Acknowledgment

Recipient Information

Recipient Name: _____ ☐ Student ☐ Staff ☐ Other _____
Phone Number: _____ Email: _____

Prize Information

Prize Description _____ Dollar Value \$ _____

I _____ Acknowledge that I have received the above noted prize for the dollar value outlined above.

Skill Testing Questions: $(30 \times 5) + 33/3 =$ _____

Recipient Signature: _____ Date _____

Witness Name (Please Print): _____ Witness Phone: _____

Witness Signature: _____ Date _____

FOIP Notification

Your personal information is being collected under the authority of subsection 33(c) of Alberta's Freedom of Information and Protection of Privacy Act for the purpose of managing Survey Prize Collections. It may be used and disclosed to other College departments and employees for this purpose, or for a use consistent with this purpose. If you have a question about the collection, use, disclosure or protection of your personal information, please contact Lethbridge College's Manager of Institutional Compliance by phoning (403) 320-3202 ext. 5703, emailing privacy@lethbridgecollege.ca, or writing to 3000 College Dr S, Lethbridge, Alberta T1K 1L6 c/o Manager of Institutional Compliance.