SAUGEEN SHORES POLICE SERVICE



			CRIMINAL RECORD AN		L MATTERS CHECK
TO BE COMPLETED BY APPLICANT			VOLINERABLE SECTOR		Request yyyy/mm/dd
Mailing Address (name, street, city, provin **Please Print UNDER each heading**	ce, postal cod	e)		Date of t	
Last Name	First Name			Middle N	ame
# and Street Name Apt/Unit #		Maiden	Name or Other Names Used	Other First Names	
City Province	Postal Co	de	Date of Birth yyyy / mm / dd	Gender	Other Names
Contact phone number	-000-		Email address		
Address History – please fill out if resident addres Street name # (please state below)	ess differs from m	ailing ad	dress and/or resided OUTSID Apt/Unit #	E of the Reg City	gion in the past 5 years Province
			A 230		
	6.1.1.0	X	2,050		
	20	0			
Identification – one form MUST be Government Type of Identification produced ID			plicant's name, date of birth, Ith or SIN card or bank/credit ca		nd photo of applicant
Type of Identification produced	number – do <u>NOT</u> r	ecord Hea	Ith or SIN card or bank/credit ca	rd numbers	Viewed
Reason for Request: **If you are applying for a position with a municipa	h provincial or f	ndoral ga	vornmont places refer the G	Sovernment	Agoncy Soction**
Specifically state the Reason for Criminal Record					
SELF DECLARATION (if applicable): Decla	aration of Crimi	nal Reco	rd Attached		
Fill out the below <u>ONLY</u> if request is Vulnerable Name of Employer/Organization/School/Other requ			bock		
			meck:		
State the Vulerable Person(s) you will be responsible	e for the well-bei	ng of:			SOL
 The Criminal Record Check will include the following information of the content of	nformation Centre e released on appli de all of the above nts, judicial orders, authorized for relea applicable retentic and the following i ublic Safety Test, no	"CPIC" and cations to and the fo Probation ase by the n period nformatio	I/or local databases and Summa government institutions/organi: ollowing information as it exists and Prohibition Orders – as per contributing agency n as it exists on the date of the	zations on the date of CPIC policy, ir search:	of the search: nformation obtained from the
All record suspensions for release by the Minister of Public Safety CONSENT					
CONSENT		-		- /	PR
 I hereby authorize the SAUGEEN SHORES POLIC obtain the information required to complete th Shores Police Service Records Management Sys search of the CPIC database includes a search o Data Bank and the Police Information Portal (PII I hereby release and discharge the SAUGEEN SH SERVICE from any and all actions, claims and de result of the disclosure of the information to me discharges; and cases of not criminally responsi prohibition orders and to conduct a local police I certify that the information provided by me in understand it, and agree to it in its entirety. For Vulnerable Sector Check applicants that ar retrieval system maintained by the Royal Canad (pardon) for, any sexual offences that are listed suspected of being the person named in a crimi which a record suspension was granted or issue the Commissioner of the Royal Canadian Mount contained in that record to a police force or oth further consent in writing to disclosure of that i information will be disclosed to that person or or 5. I understand that the prescibed fee is non-refur 	e Police Record Che tem (RMS), and the f the Identification P) IORES POLICE SERV mands for damage a by the SAUGEEN : records to me incl ble for reasons of n contact search wit this application is t e 18 years of age o lian Mounted Police in the schedule to nal record for one of d, I will be request ted Police to the M er authorized body nformation to the p organization	eck and dis Canadian Data Bank VICE BOAR s, loss or in SHORES Pe uding: crim hental disc h any Polic rue and co r older: 11 e to find ou the Crimin of the sexue ed to prov inister of F . That poli	close such information to me. T Police Information Centre (CPIC (known as the National Reposit D and all members and employed njury howsoever arising which m DICE SERVICE . I hereby authori- ninal convictions (summary and order; outstanding entries such a see Service in Canada orrect to the best of my knowled hereby consent to a search being at if I have been convicted of, an <i>al Records Act</i> . I understand tha ial offences listed in the schedul de fingerprints to confirm that r public Safety, who may then disc cee force or authorized body will	This includes a c) database, m ory of Crimina ess of the SAL hay hereafter ze the SAUGE indictable); at as charges, juc ge and belief. g made in the d been grant t, as a result of e to the Crimin ecord and that lose all or par then disclose	a search of the Saugeen haintained by the RCMP. This al Records), the Investigative JGEEN SHORES POLICE be sustained by myself as a EN SHORES POLICE SERVICE boolute and conditional dicial orders, probation and . I have read this consent, automated criminal records ed a records suspension of giving this consent, if I am <i>inal Records Act</i> in respect of at record may be provided by t of the information that information to me. If I
Applicant's Signature:				Date:	

					ry / mm / dd
POLICE USE ONLY – Request reviewed and non-refundable fee(s) received by:					
Received By:	Payment Type:	Receipt Number:	VS School/Volunteer	Employment	No Charge
			\$6.59	\$65.83	\$0.00

Personal Information contained on this form is collected pursuant to the Police Service Act s.41, and is collected for the purpose of processing a police check. Questions concerning this collection should be directed to the Chief of Police, Saugeen Shores Police Service Phone: (519) 832-9200



GOVERNMENT AGENCY SECTION

To be filled out by applicants who are applying for a position with a government agency

Name of Government Agency:

Address of Government Agency:

Position with Government Agency:



DECLARATION OF CRIMINAL RECORD

(To be filled out by Applicant)

This form must be completed in order to receive a name-based Criminal Record, which includes the Adult Criminal Convictions and associated information from the RCMP National Repository of Criminal Records. Failure to complete this form accurately, will result in an incomplete record check, and require submission of fingerprints to the RCMP National Repository of Criminal Records.

Last name:	First Name:	Other First Names:	
Maiden Names or Other Last Names:	Other Names:	Date of Birth: (yyyy/mm/dd)	Gender
Current Street # and name	City:	Province	Postal Code

DECLARATION OF CRIMINAL RECORD

- A declaration of Criminal Record does not constitute a Certified Criminal Record by RCMP
- A declaration of Criminal Record may not contain all criminal record convictions
- A certified Criminal Record can only be issued by Canadian Criminal Real Time Identification Services based on the submission of fingerprints to the RCMP National Repository of Criminal Records

A declaration <u>MUST</u> include:

ALL convictions for offences under Federal Law

Declaration must NOT include:

- a) A conviction in which you have received a Record Suspension (pardon) in accordance with the Criminal Records Act
- b) A conviction when you were a "young person" under the Youth Criminal Justice Act
- c) An Absolute or Conditional Discharge, pursuant to section 730 of the Criminal Code
- d) An offence for which you were not convicted (i.e. the charges were Withdrawn, Dismissed, etc)
- e) Any Provincial or Municipal offences
- f) Any charges dealt with outside of Canada

OFFENCE	DATE OF SENTENCE	LOCATION
		12X
S N // S S	CVA	
	VI	
		h
4 Pos	- AH	

Applicant Signature

Date (yyyy/mm/dd)

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