

Consent for the Release of Police Information

Applicant Inform	nation					SHE WILL				
Last Name			Given Name 1			Given Name	ven Name 2			
Gender	Date of Birth (yyyy-mm	n-dd) Current A	Address							
Male Female										
City	,		Province Postal Code (A9A 9A9) Tele			Telephone N	phone Number (include area code)			
Place of Birth		Usual Fire	Usual First Name or Alias Ma		Maiden Nam	iden Name or any Other Last Name				
Name at Birth	Previous	Previous Names or Legally Changed Names								
Previous Address	ses	s at current addre	aee							
Torido proviodo addic		City			Province Postal Code (A9A 9A9)					
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11.00							-11 12			
						sauces beighous				
Consent										
and disclosed, it is impose disclosed. The suitabilit checks. The police age Signature of Appl I consent to a search of findings of guilt or conviservice. I understand the	Consent (provided by ortant that you understa ective employer or orga ty criteria are establishency or authorized body licant f all records and informatictions and court orders at if information or a po	nd the nature of anization, you ack d and controlled is not involved wation available at registered in my	the information that knowledge that you by the employer o ith, or responsible the time the searce name in the Natio	at may be u underst r the orga for, decis	e contained in them and that your suita anization - not the sions that are mad ducted, including no ository of Criminal	n. By agreein ability could by police agence by the empon-conviction Records and	g to allow your e determined y or authorized loyer or organ information, or local records	personal inforbased on the industrial body conductive ization. Charges before available to the	mation to information ting the the courts,	
by fingerprints. Signature							Data of Cons	amt (44\	
Signature							Date of Cons	ent (yyyy-mm-	uu)	
Paguating Cananization										
Requesting Organization Record Check results will be picked up in person by the applicant								erprint ard scan submi	ssions only	
					ha alsa		Force	ira scan submi	ssions only.	
Identity of the organization that is requesting and should receive the results of the record checks. Name of Person or Organization Address										
Youth Leadersh			Address							
	iip committee		Province Postel Code (AGA GAG)							
City Yorkton		Province Postal Code (A9A 9A9)								
Waiver for Conse	nt of Bologes of In	of amotion to								
				thorized	nerson of the above	heteribui ev				
I consent to the release of any and all information from available records to the authorized person of the above indicated Organization/Company/Firm.										
Signature			Date (yyyy-mm-dd)				Finger			
Type of Record	Check Required									
To be completed by the	applicant (initial type of	f record check be	eing requested).							
Туре	Description						Additional Requirements Initial			
Name-Based Criminal Record Check	A query, based on name and date of birth, of active criminal files in the RCMP National Repository of Criminal Records. Used to determine the possible existence of a criminal record. I Generally used as a preliminary search only to determine if a Fingerprint-based Criminal Record Check may be required. The query may also include a search of court records and a query of records management systems in other police agencies' jurisdictions through the Police Information Portal (PIP) or other data sharing systems.						N/A			
Fingerprint-Based Criminal Record Check	A fingerprint-based search of the RCMP's national repository of fingerprints and criminal record information. The results of the search will produce a document that includes criminal record information where the identity of the applicant has been verified by fingerprints.						N/A			
Vulnerable Sector Check	A Vulnerable Sector Check is the most comprehensive type of check. It includes a query based on name and date of birth of a local police agency's records management system, commonly referred to as a local indices's check, in addition to queries of CPIC Identification, Investigative, and Intelligence Data Banks. The query may also include a search of court records and a query of records management systems in other police agencies' jurisdictions through the Police Information Portal (PIP) or other data sharing systems.						Form 3923 completed and attached			
Declaration of Criminal Records This will result in the RCMP detachment providing a list of all of related information that are included on the criminal record on by the detachment where the applicant lives.								Form 6359 completed and attached		
Identification Pr	ovided								77	
To be completed by the Applicant Identification		applicant Identific	ation Type 2		RCMP Employee	Name		HRMIS Numi	ber	