

CONSENT TO DISCLOSURE OF PERSONAL INFORMATION



PLEASE PRINT (APPLICANT TO COMPLETE)

Surname (Provide previous last name/s prior to application, if applicable):			First Name:		Middle (Second) Name:	
Maiden Name or Other Surnames Used (If applicable):			Place of Birth (If other than Canada, please also note date entry):			
Date of Birth (YYYY-MM-DD or 2011-Jan-01)	Sex M/F	Phone #	Driver's Licence # *Required for Driver's Abstract		SIN # *Required for Credit Report	
# Number	Street Name	Apt / Unit #:	City / Province / Country:			Postal Code:

PREVIOUS ADDRESS/ES: (Provide if you did not reside at above address for more than five [5] years)

# Number	Street Name	Apt / Unit #:	City / Province / Country:			Postal Code:
# Number	Street Name	Apt / Unit #:	City / Province / Country:			Postal Code:

<p>RELEASE AUTHORIZATION AND WAIVER</p> <p>By signing this form, I certify that the information set out by me in this application is true and correct to the best of my ability. I am aware and give consent to the release of a Criminal Record or any Criminal Information through Canadian Police Information Centre to Canadian Employment Screening and its partner to disseminate and transmit the results electronically or in hard copy to a location in/ or outside of Canada. The information is collected and disclosed according to the Federal Privacy Act, MFIPPA, PIPA, PIPEDA and Quebec Privacy Laws. It may also be subjected to applicable International privacy legislation ie. U.S. Patriot Act.</p> <p>I hereby release and forever discharge all members and employees of the processing Police Service from any and all actions, claims and demands for damages, loss or injury which may hereafter be sustained by myself, as a result of the disclosure of information by the processing Police Service to Canadian Employment Screening and its partners named below.</p>	<p>I HEREBY CONSENT TO THE SEARCH AND RELEASE OF:</p> <p>A. Criminal Record Check B. Additional Searches Listed Below (IF REQUIRED)</p> <p>Additional Searches may include: Credit Report, Driver's Abstract, Education Verification, Personal Accreditation, ID Verification, Reference Check, Employment Verification, SIN Validation.</p> <p>Signed this _____ day of _____, 20_____</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">SIGNATURE OF APPLICANT</p>
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DECLARATION REGARDING CRIMINAL CONVICTIONS

A certified Criminal Record is defined as a summary of an individual's offence, convictions and non-convictions (where authorized), that are releasable in accordance with Federal laws, based on the results of a Fingerprint-based Criminal Record Verification.

Qu: Have you ever been convicted of a criminal offence for which you have not been granted a pardon? (Circle one) **YES** **NO**

If YES, complete Declaration of Criminal Record Form C. Record details of criminal offences; Identify the offence, the date and the location of the sentence as per section 9.6.5 of the Dissemination of Criminal Record Information Policy.

This information is collected pursuant to the company safety & security policies and is protected by the provisions of the applicable Privacy Act. It is confidential and will only be disclosed to designated staff. The existence of a conviction will not preclude you from consideration of employment, provided it is declared, it may not be an impediment to employment and each case will be judged on its own merit. Details of the offence are requested to enable a potential employer to determine whether the offence is related to your employment or intended employment. I understand failing to provide accurate information or omission of facts on this form may disqualify me from consideration for employment or subsequent termination if I am employed.

AUTHORIZATION FOR REQUESTED SEARCH/ES (EMPLOYER / NOTARY / ORGANIZATION TO COMPLETE)

Acceptable: Driver's Licence, Birth Certificate, Passport, Permanent Residency Card NOT Acceptable: Health Card, SIN Card, Invalid / Expired ID

IDENTIFICATION TYPE	ID #	IDENTIFICATION TYPE	ID #
1.		2.	

WITNESSING APPLICANT'S IDENTIFICATION

I verify that I have witnessed two pieces of the Applicant's Identification, one of which is government issued with a photograph, and attached a copy in a legible format.

Employer / Organization / Notary Name: _____

Company Representative Name: _____ Company Representative Signature: _____