



**OTTAWA POLICE SERVICE
SERVICE DE POLICE D'OTTAWA**

*The Trusted Leader in Policing
Le chef de file de confiance dans la police*

**POLICE RECORDS CHECK FOR SERVICE
WITH THE VULNERABLE SECTOR**

FORM #306/Rev. June 2015

PRINT CLEARLY. THIS WILL BE USED TO MAIL YOUR FORM BACK TO YOU.

_____ < First Name, Middle Name, Surname
 _____ < Unit/Number, Street
 _____ < City, Province
 _____ < Postal Code
 _____ < How long have you lived at
 this address?

Agency and Position Applying for:

NON-VOLUNTEER VOLUNTEER

Verified by:

Non/Profit Member:

Sex: M F

Maiden Name: _____ Other Names Used: _____ Date of Birth (yy/mm/dd): | |

Place of Birth: _____ Home Phone Number: _____ Business Phone Number: _____

FIVE YEAR ADDRESS HISTORY IF DIFFERENT THAN ABOVE (*Any address outside Ottawa jurisdiction must include name of Police Service)

Unit/Number:	Street:	City:	Prov.:	Postal Code:	How Long?:
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Other Police Agency _____

1. I consent to a search being made in the automated criminal records retrieval system maintained by the Royal Canadian Mounted Police to find out if I have been charged and/or convicted of any criminal offences or convicted and granted a pardon for any of the sexual offences that are listed in the schedule of the *Criminal Records Act*. I understand that, as a result of giving this consent, if I am suspected of being the person named in a criminal record for one of the sexual offences listed in the schedule to the *Criminal Records Act* in respect of which a pardon was granted or issued, that record may be provided by the Commissioner of the Royal Canadian Mounted Police to the Solicitor General of Canada, who may then disclose all or part of the information contained in that record to a police service or other authorized body. That police service or authorized body will then disclose that information to me.
2. I hereby release and discharge the Ottawa Police Service and all their agents from any and all claims, actions and demands for damages, loss or injury of any nature arising from disclosure of information. I hereby authorize the Ottawa Police Service to inquire into and conduct local police information searches Canada wide and disclose to myself details of police investigated incidents that the Ottawa Police believes may assist an agency in making an informed decision concerning my application. Furthermore, I understand that upon the disclosure of information, the Ottawa Police Service and all their agents waive any responsibility for its use and or subsequent dissemination by myself.
3. I certify that the information provided by me in this application is true and correct to the best of my knowledge and belief. I have read this consent, understand it and agree to it in its entirety.

SIGNATURE OF APPLICANT: _____ Signed this date: _____, 201

POLICE RECORDS CHECK RELEASE CRITERIA

The Police Vulnerable Sector Check will include the following information as it exists on the date of the search:

- Criminal Convictions from CPIC and/or local databases.
- Outstanding entries, such as charges and warrants, Judicial Orders, Peace Bonds, Probation and Prohibition Orders.
- Summary Convictions, for 5 years, when identified.
- Absolute and Conditional Discharges for 1 or 3 years respectively.
- Findings of Guilt under the Youth Criminal Justice Act within the applicable disclosure period.
- Criminal charges resulting in a disposition of Not Criminally Responsible by Reason of Mental Disorder.
- All Records Suspension as authorized for release by the Minister of Public Safety.
- In very exceptional cases, where it meets the Exceptional Disclosure Assessment, non-conviction dispositions, including, but not limited to Withdrawn and Dismissed.

The search does NOT cover the following areas:

- Convictions under provincial statutes.
- Local Police Contact.
- Ministry of Transportation Information (PARIS).
- Special Interest Police (SIP) category of CPIC.
- Family Court Restraining Orders.
- Foreign Information.
- Any reference to incidents involving mental health contact.
- Notable police contact that were processed by other means, such as Diversion.
- Youth Criminal Justice Act information beyond the applicable disclosure period.
- Any reference to contagious diseases.

This search is intended for individuals seeking employment and/or a volunteer position with children or vulnerable person(s). Information is collected and disclosed according to section 29(1) and 32 of the *Municipal Freedom of Information and Protection of Privacy Act (MFIPPA)* and the *Police Services Act, RSO 1990,c.P.15*

The information contained on this certificate is accurate on the date issued.

For more information, please visit our Web site at ottawapolice.ca

PROCEDURE

1. The **Police Records Check Form** must not be altered.
2. The applicant **must apply in person and** produce two pieces of **valid (i.e. not expired)** identification that confirm his/her **name, date of birth and address**. One piece of identification presented must include a **photo**. Ontario Health Cards cannot be accepted for identification purposes (*Health Cards and Numbers Control Act*, 1991 section 2.2(1)).

In the case of a possible match, individuals who require a copy of their criminal record, will have to be fingerprinted by the **Ottawa Police Service**. Please see the attached information sheet and or visit our website for further information at www.ottawapolice.ca.

VOID *without* Ottawa Police seal

First Name: _____ Middle Name: _____ Surname: _____ Date of Birth (yy/mm/dd): | |

FOR POLICE USE ONLY

<p>This is to confirm that no criminal convictions, no outstanding charges, no outstanding judicial orders, no pardoned sex offences have been found in the Canadian National Repository of Criminal Records as a result of a search based on the above name and date of birth. The search has not been confirmed by fingerprints.</p>	<p>This is to notify that there are current/active Judicial Orders associated to the above name and date of birth. Please see the attached Disclosure document.</p> <p>Please SEE ATTACHED DISCLOSURE document.</p>
<p>This is to notify that there may be criminal convictions, outstanding charges, or pardoned sex offences associated to the above name and date of birth. The existence of which may only be confirmed by the RCMP based on fingerprints.</p> <p>Please SEE ATTACHED DISCLOSURE document.</p>	<p>This is to notify that there are Non-Conviction Records for Exceptional Disclosure associated to the above name and date of birth. The information meets the Exceptional Disclosure Assessment and is being released under the authority of PSA (265.98, S.3).</p> <p>Please SEE ATTACHED DISCLOSURE document.</p>

<p>Date Completed (yy/mm/dd): </p>	<p>Signed: _____</p>
<p>(BY POLICE)</p>	<p>POLICE AUTHORIZING SIGNATURE</p>

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