



Kingston Police



APPLICANT: (PLEASE PRINT CLEARLY)

Date of Application: _____

Last Name: _____ First Name: _____ Middle Name: _____

Previous Surnames: _____ Male Female Date of Birth: _____
(Maiden, Adopted, Previous Marriages) Year Month Day

_____ Email Address: _____

Residence Phone _____ Business Phone: _____

Current Residence (include full address including city/town/province) _____

Past Residences (previous 5 years): 1. _____

2. _____

3. _____

4. _____

Agency Requiring Check (or reason for Request): 1. _____

2. _____

3. _____

Records Check/Criminal Information Request

I, THE APPLICANT, hereby consent to a reference check to be conducted through the Canadian Police Information Centre and other relevant police records for the purpose of assisting the above agency in assessing my suitability as either an employee or volunteer with the above agency. I authorize that this information, including the results of the reference check, be supplied to the above agency where allowed by law, who will use the information for the purpose intended and will destroy the information following such use. The agency may keep this form on file but will destroy all attachments. I consent to YOUNG OFFENDER information being provided on this form where allowed by law. I also consent that should I come into contact with the police while connected with the above named agency, the Kingston Police shall have the right to notify the agency named above. I also certify that the information set out by me in this application is true and correct to the best of my knowledge and belief.

Signature of Applicant

As the witness to this application, I have confirmed the identification of the applicant

Signature of Witness

Signature of Parent/Guardian
If applicant is under 18 years of age

Print Name of Witness

Vulnerable Sector Check

ATTENTION: This check is to be used by a person applying for a position with a person or organization responsible for the well-being of one or more children or vulnerable persons, if the position is a position of authority or trust, or a position where limited supervision exists, relative to those children or vulnerable persons and the applicant wishes to consent to a search being made in criminal conviction records to determine if the applicant has been convicted of a sexual offence listed in the schedule to the Criminal Records Act and has been pardoned. In addition, a person who has signed this form has consented to the disclosure of information obtained in that search to the person or organization who requested the search.

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 convicted of, and been granted a pardon for, any of the sexual offences that are listed in the schedule to 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 force or other authorized body. That police force or authorized body will then disclose that information to me.

I also consent to information contained in a criminal record, found as a result of a criminal record check for a sexual offence for which a pardon has been granted or issued, being disclosed by a police force or other authorized body to the person or organization referred to above to whom or to which I am applying or have applied for a paid or volunteer position. I understand that as a result of giving this consent, that information will be disclosed by the police force or other authorized body to the person or organization, even though a pardon has been granted or issued for the offence.

Reason for the Consent

I am an applicant for a paid or volunteer position with a person or organization responsible for the well-being of one or more children or vulnerable persons.

Description of the paid or volunteer position: _____

The name of the person or organization is: _____

Provide details regarding the children or vulnerable persons: _____

Signature of Applicant

As the witness to this application, I have confirmed the identification of the applicant

Signature of Witness

Signature of Parent/Guardian
If applicant is under 18 years of age

Print Name of Witness

Results of search are indicated on the reverse of this form

Police Use Only

RMS

CPIC

VS

LEIP

NCIC

Niche



Kingston Police



FOR POLICE USE ONLY

The following Police Records were checked in performing this Records Check

Check of Canadian Police Information Centre (CPIC) and Kingston Police Records (RMS)

Yes No

Check of other policing jurisdictions (LEIP, NCIC, NICHE) where applicant indicates they have resided.

Yes No

Check of Pardoned Criminal Records for pardoned sex offences (Vulnerable Sector Check)

Yes No

The following Police Records were NOT checked in performing this Records Check

Kingston Police were unable to perform local records checks for following Police jurisdictions:

**Kingston
Police
Seal**

All searches should include the embossed seal of the Kingston Police

Results of the Criminal Records Search are only valid until: _____

Reviewed by: _____

No Record

(the above search failed to reveal any relevant Police Records for this person)

Record as Attached

(see the attached _____ page(s) for Criminal Records Information and related police files). All attached pages should be embossed with the Kingston Police seal.

NOTE: This information MAY include suspect information, charges where no convictions are registered, charges where applicant was not fingerprinted, or convictions that have met CPIC purge criteria.

All attachments must be destroyed by requesting Agency after review and determination of suitability of applicant.