

## YORK REGIONAL POLICE POLICE VULNERABLE SECTOR CHECK

Must print legibly (names, street, city, province, postal code) as this is your mailing label.															
		OMPLETED BY													
Last Name First		First N	Name	Middle Name				Maiden / other names							
Address (# and street name)					Apt #		М	lale 🗌	Fe	male [	nale  Place of Birth				
City Province				Postal Code				Date of Birth (DD/MM/YY):							
Phone Number:				E-mail:											
Reason for Request															
I am an applicant for a 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						Name/address of the person or organization									
Descri	ption of the resp	onsibilities towards	childre	n or vulnerable	person(s)										
Address History – Complete address history for the past 5 years															
Addi	ess History	- Complete ac	iaress	s nistory for	tne past 5	years			T			# of years at			
Street	Name and Num	ber (please state b	ease state below)			Ci	City		Provin	ce	Postal Code	address			
Reque	ested and Fee re	ceived by – Badge	#			•						<u> </u>			
UNIT 2. POLICE USE ONLY – One box must be checked for each section															
RESULTS FOR NAME- Based criminal record verification															
Based solely on the name(s) and date of birth provided and the criminal record information declared by the search of the RCMP National Repository of Criminal Records did NOT identify any records with the name(s) and															
	Negotivo	the applicant. Po	applicant. Positive identification that a cr					nal record does or does not exist at the RCMP National Repository of							
	Negative											nviction being rendered			
		the RCMP Nation				national	кер	ository of	Criminai	Record	as. Not all off	ences are reported to			
												d by the applicant, a cation that a criminal			
	Incomplete														
Incomplete record does or does not exist requires the applicant to SUBMIT FINGERPRINTS to the RCMP National R Criminal Records by an authorized police service or accredited private fingerprinting company. Delays conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Repository of Criminal Repository of Criminal Records by an authorized police service or accredited private fingerprinting company. Delays conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Records by an authorized police service or accredited private fingerprinting company.															
		offences are repo							IVIP Nauc	ла ке	pository of C	niminai Records. Not ali			
	Possible	Based solely on	the na	me(s) and date	of birth prov	ided and	the	criminal				d by the applicant, a			
	Matches											gistered criminal of Criminal Records			
	(See attached	can only be ach	ieved b	y FINGERPRIN	IT comparisor	n. As suc	h, th	he crimina	al record	l inform	nation decla	red by the applicant			
	page											eing rendered in court, e reported to the RCMP			
	for details)	National Reposito				i Keposii	Oly C	)i Cilillillai	Records	s. INOL al	ii onences ar	e reported to the RCIVIP			
A DECULTO OF FINOEDRINT COMPARIOON OF A DOLL WITH THE MATIONAL DEPOCITORY OF ORDINANCE DECOMP															
2. RESULTS OF FINGERPRINT COMPARISON SEARCH WITH THE NATIONAL REPOSITORY OF CRIMINAL RECORDS  No Records Identified															
-=	Records Identified – See attached														
Not Applicable															
3. RESULTS OF INVESTIGATIVE DATABANK AND LOCAL INDICES RESULTS  NEGATIVE – No information was revealed that can be disclosed in accordance with federal laws and RCMP policies															
片片		E – No information E – See attached pa			be disclosed in	accorda	rice \	with redera	ai iaws ai	na KUN	ne policies				
			J (-/	-											

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4. RESULTS OF POLICE VULNERABLE SECTOR	SCREENING ONLY								
A search of pardoned sex offenders was conducted. N	A search of pardoned sex offenders was conducted. No information to release.								
,	earch of pardoned sex offenders was conducted. Information authorized for release.								
A search of pardoned sex offenders <u>was not</u> conducted.									
Date of Search Customer Service Representative									
NOT VALID UNLESS EMBOSSED WITH POLICE SEAL									
Identification –MUST be Government Issued and include applicant's name, date of birth, signature and photo of applicant.  Health cards or SIN cards will <b>NOT</b> be accepted as identification									
Type of ID produced :	ID Number :								
Type of ID produced:	ID Number:								
The Police Vulnerable Sector Check will include the following	Ilowing information as it exists on the date of the search:								
<ul> <li>Outstanding entries, such as charges and warrants, Judicial Orders, Peace Bonds, Probation and Prohibition Orders</li> <li>Criminal Convictions from CPIC and/or local databases.</li> <li>Summary Convictions, for 5 years, when identified.</li> <li>Absolute and Conditional Discharges for 1 or 3 years respectively.</li> </ul>									
<ul> <li>Absolute and Conditional Discharges for For S years respectively.</li> <li>Findings of Guilt under the Youth Criminal Justice Act within the applicable disclosure period.</li> </ul>									
Criminal charges resulting in a disposition of Not Criminally Responsible by Reason of Mental Disorder.									
<ul> <li>In very exceptional cases, where it meets the Ex limited to Withdrawn and Dismissed.</li> </ul>	<ul> <li>In very exceptional cases, where it meets the Exceptional Disclosure Assessment, non-conviction dispositions including but not</li> </ul>								
<ol> <li>I hereby release and discharge the York Regional Police Service and all members and employees of the said Service from any and all actions, claims and demands for damages, loss or injury howsoever arising which may hereafter be sustained by myself as a result of the disclosure of information to me by the Police Service. I hereby authorize the York Regional Police Service to inquire into and disclose the results of any police records indicating criminal convictions, conditional discharges, absolute discharges and outstanding criminal charges to me and to conduct a local police contact search with any Police Service in Canada.</li> <li>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.</li> </ol>									
Applicant's Name (Please Print):	no onaroty.								
Applicant's Name (Flease Finit).									
Applicant's Signature:	Date:								
UNIT 3. POLICE VULNERABLE SECTOR CHECK	Duto.								
This section is restricted to applicants seeking employment and/or volunteering with vulnerable individuals.  "Vulnerable persons" means persons who, because of their age, a disability or other circumstances, whether temporary or permanent,									
(a) are in a position of dependence on others; or (b) are otherwise at a greater risk than the general population of being harmed by persons in a position of authority or trust relative to them.									
CONSENT POLICE USE ONLY									
I hereby 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 <i>Criminal Records Act</i> .									
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 <i>Criminal Records Act</i> in respect of which a pardon was granted or issued, I will be requested to provide fingerprints to confirm that record and 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. If I further consent in writing to disclosure of that information to the person or organization referred to above that requested the verification, that information will be disclosed to that person or organization.									
Contributing Agency:									
Signature of Applicant:	Date:								

Personal information contained on this form is collected pursuant to the Police Services Act, s.41 and is collected for the purpose of processing this police record check. Questions concerning this collection should be directed to York Regional Police, 47 Don Hillock Dr., Aurora, ON, L4G 0S7. 905-830-0303 ext. 6781 or 7655

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