Royal Canadian Gendarmerie royale Mounted Police du Canada

"SAMPLE"

Consent for the Release of Police Information

| Applicant Informa | ition | | | | | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|-------------------------------------|------------------------------|---------------------------------------------------------------------------------------------------------------|----------------------|--|--|
| ast Name 5 M 1 | TH | Given Name 1 JANE | | Given Name 2 | SUE | ,, | | | |
| | te of Birth (yyyy-mm-dd) Current Address 999-03-15 1234 River 5+ | | | | | | | | |
| Meadow 1 | | | Province Postal Code (A9A 9A9) Telephone Nu | | | mber (Include area code) | | | |
| Place of Birth Weadow | Lake | Usual First Name or Alias | Usual First Name or Alias Maiden Name | | | or any Other Last Name | | | |
| Name at Birth | THOMPSON Previous Names or Legally Changed Names | | | | | | | | |
| Previous Addresse | Sun the second | | | | · . | - 4,14 | - | | |
| Provide previous addres | es if less than 5 years | t current address. | | | | والمنافرة | | | |
| Address | | | City | | Province | Postal Code (A9A 9A9) | | | |
| 1a 5th 5t W | | | Meadow Lake | | 3K 59411 | | 16 | | |
| Consent | | | | | | | | | |
| Signature of Applications of a search of a findings of guilt or convict service. I understand that by fingerprints. | ill records and informations and court orders i | ion available at the time the sear registered in my name in the Nat sible record exists, it will not be | rch is conducted, including r ional Repository of Criminal | non-conviction in Records and ic | nformation, o | charges before t | he courts, police | | |
| Signature | | | | | Date of Consent (yyyy-mm-dd) | | | | |
| Requesting Orga | nization | | | | Fing | Fingerprint | | | |
| Record Check result | For ca | ard scan submis | sions only | | | | | | |
| Name of Person or Orga | | d should receive the results of the Address | ne record checks. | | | | | | |
| City | Province Postal Code (A9A 9A9) | | | | | | | | |
| Walver for Consent of Release of Information to Third Party I consent to the release of any and all information from available records to the authorized person of the above indicated | | | | | | | | | |
| Organization/Company/f Signature | Flrm. | | Date (yyyy-mm-do |)) | Finge | er | *********** | | |
| Type of Record (| Check Required | | | | | | | | |
| | applicant (initial type o | f record check being requested). | | т | | | | | |
| Туре | A museus harand an area | Description | | | Additional | Requirements | Initial | | |
| | 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. 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 JZ | | | |
| 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. | | | | | 3923 leted and ned | P | | |
| Declaration of Criminal Records | This will result in the RCMP detachment providing a list of all of the criminal convictions and related information that are included on the criminal record on CPIC. This may only be provided by the detachment where the applicant lives. | | | | | 6359 eleted and ned | | | |
| Identification Pr | ovided | | | | | | | | |
| To be completed by the | | | | | | I | | | |
| Applicant Identification | Type 1 | Applicant Identification Type 2 | RCMP Emplo | yee Name | | HRMIS Nur | nber | | |



Royal Canadian Gendarmerie royale Mounted Police du Canada Protected B once completed

PIB CMP PPU 005

PIB CMP PPU 030

Consent for Check for a Sexual Offence for which a Record Suspension (Pardon) has Been Granted or Issued (Vulnerable Sector Verification)

Reference Number (to be completed by detachment)

- This form must be submitted with RCMP form 6388 Consent for the Release of Police Information.
- This form is to be completed by an individual 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 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 of the Criminal Records Act and has been pardoned.
- To be used only for organizations inside of Canada.

| dentification of the Applicant | | | | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------|--|--|--|--|--|--|--|--|
| Current Legal Surname (required) | Current Legal Given Name (required) | | | | | | | | | |
| S no 144 | Take | | | | | | | | | |
| Gender , | Date of Birth (required; yyyy-mm-dd) | | | | | | | | | |
| Male (1) Female | 1999-07-15 | | | | | | | | | |
| 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. | | | | | | | | | | |
| itle of the Paid or Volunteer Position Name of the Person or Organization Abin Leader Name of the Person or Organization Leader | | | | | | | | | | |
| Details regarding the responsibilities towards children or vulnerable persons | | | | | | | | | | |
| Cabin Teachers have responsibility to lead guide, care and worth over the company throughout the duration of camp. | | | | | | | | | | |
| Type of Position Paid Position (fee enclosed) Processing Fees Volunteer Position (letter from non-profit organization attached) | | | | | | | | | | |
| Consent | | Fingerprint | | | | | | | | |
| I hereby consent to a search being made in the automated records retrieval system maintained by the Royal Canadian Mounted For card scan submissions or Police to find out if I have been convicted of, and been granted or issued a Record Suspension (Pardon) for, any of the sexual offences that are listed in the schedule of the <i>Criminal Records Act</i> . | | | | | | | | | | |
| I understand that if, as a result of giving this consent, a search discloses that there is a record of my conviction for one of the sexual offences listed in the schedule of the <i>Criminal Records Act</i> in respect of which a Record Suspension (Pardon) was granted or issued, that record shall be provided by the Commissioner of the Royal Canadian Mounted Police to the Minister of Public Safety, 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 X Signification Verification Name of Verifier | Date (yyyy-mm-dd) 2011 - 04 - 03 | | | | | | | | | |
| Title | Date Received (yyyy-mm-dd) | Finger | | | | | | | | |

RCMP GRC 3923e (2018-06)

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Dieses of ID (valid chrive's license and Saskatchewar Health carel) are required when submitting the applications)



Royal Canadian Gendarmerie royale Mounted Police du Canada

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PIB CMP PPU 005

Declaration of Criminal Record This form must be completed and submitted with RCMP form 6388 - Consent for the Release of Police Information

PIB CMP PPU 030 Reference Number

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| pplicant | | AAN TO THE TOTAL TOTAL TO THE THE TOTAL TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTAL TO THE TOTA | Given Name 2 |
| st Name | Given Name 1 | | C/1 Ta |
| 5 M I T H | JANE | | District and the second |
| aiden Name or Other Last Name | Gender · | | Date of Birth (yyyy-mm-dd) |
| k THOMP SON A | Male & Female | | 10 11 (2010 (2020 (2020) |
| urrent Address | City | ıe. u | Province Postal Code (A9A 9A9) |
| 1004 8 1100 | | Color | Lake 31 391 170 |
| Certified Criminal Record | Market Control of the | | |
| Note: A Certified Criminal Record can only be issu | ed based on the submission of finge | rprints to the RCMP N | lational Repository of Criminal Records. |
| | isa bassa sii are sesimenen | © * -2000/2004/2009 VOCE US | |
| Declaration of Criminal Record Does not constitute a Certified Criminal Re | cord by the RCMP. | | |
| | | | |
| May not contain all criminal record conviction | ons. | | |
| Declare the following information: | | | |
| All convictions for offences under federal la | iw. | | |
| Do not declare the following information: | 4 -6 4am | | |
| Absolute Discharges (disclosed for a period | | | |
| Conditional Discharges (disclosed for a per | riod of 3 years). | ald\ accommodela | the Youth Criminal Justice Act. |
| Any offences while you were a "young per | son" (12 years old but less than 18 y | ears old), pursuant to | the roun criminal dustion riot. |
| Any charges for which you were not convi | cted, for example, charges that were | withdrawn or dismiss | ed. |
| Any provincial or municipal offences. | | | · |
| Any charges dealt with outside of Canada | . | | |
| Any charge for which you received a stay | of proceedings (disclosed until reter | tion period is met). | |
| a Any charge for which you toom to a | | | 1 |
| Offence | | Date of Sentence Location (yyyy-mm-dd) | |
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| | CHANNEL THE IN THE PROJECT CHANNEL SHEET S | | |
| I certify that the information provided is correct | t to the best of my knowledge. | | |
| Signature of Applicant | * | | Date (yyyy-mm-dd) |
| Signature of Applicant | and the state of t | | 2003-04-02 |
| | way " . John Byerdo B | | |
| Received By | | lo. | etachment Stamp or Seal |
| Employee Name | HRMIS | | www.completer.com |
| | | | |
| | | | |
| Signature | Date (уууу-mr | n-dd) | |
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