



BELLEVILLE POLICE SERVICE

CONSENT TO DISCLOSURE OF PERSONAL INFORMATION

BPS # 45
(Rev. - 04/08)

REASON FOR REQUEST: (SCREENING FOR) EMPLOYMENT ___ VOLUNTEER ___ VISA ___ OTHER ___
 IF FOR DRIVING PURPOSES, STATE REASON: IE TAXI _____

IS REASON FOR REQUEST DEALING WITH THE VULNERABLE SECTOR (the elderly, the disadvantaged, children) Yes No
 AFTER 60 DAYS THIS FORM WILL NO LONGER BE HELD ON FILE AND WILL BE DESTROYED BY THE BELLEVILLE POLICE SERVICE.
THE RECORD CHECK INFORMATION RECEIVED FROM THE BELLEVILLE POLICE SERVICE IS CURRENT AS OF THE DATE OF PROCESS
 NOTE: INFORMATION IS COLLECTED AND DISCLOSED ACCORDING TO SECTION 29(1) & 32 OF THE MFIPPA

LAST NAME: _____ MAIDEN NAME (IF APPLICABLE) _____
 FIRST & SECOND NAME: _____ DRIVER LICENSE NUMBER: _____
 D.O.B.(Y/M/D) ___/___/___ SEX: _____ PLACE OF BIRTH (IE: BELLEVILLE) _____
 HOME TELEPHONE NUMBER: (____) _____-_____
 ADDRESS:

 NUMBER STREET APT/UNIT MUNICIPALITY POSTAL CODE
 PREVIOUS ADDRESSES FOR THE PAST FIVE YEARS: _____

PHOTOSTAT OF I.D. ATTACHED

WAIVER AND RELEASE:
 I HEREBY CONSENT TO THE FULL DISCLOSURE OF MY:
 A. CRIMINAL RECORD (ADULT), CRIMINAL RECORD (YOUNG PERSON)*, and PENDING CHARGES UNDER ANY FEDERAL STATUTE.

*** PURSUANT TO SECTION 119(1) YCJA, A YOUNG OFFENDER RECORD CAN BE MADE AVAILABLE TO THE YOUNG PERSON TO WHOM THE RECORD RELATES AND FOR THE PURPOSE OF GRANTING A SECURITY IN ACCORDANCE WITH SECTION 119(1) YCJA.**

I HEREBY RELEASE THE BELLEVILLE POLICE SERVICE AND ANY OTHER AGENCIES FOR ANY LIABILITY FOR SUCH DISCLOSURE:

SIGNATURE OF APPLICANT DATE OF REQUEST

FOR POLICE USE ONLY
 THIS RECORD MAY OR MAY NOT PERTAIN TO THE SUBJECT OF YOUR ENQUIRY. POSITIVE IDENTIFICATION CAN ONLY BE CONFIRMED THROUGH SUBMISSION OF FINGERPRINTS. *TRUE COPY WILL BE EMBOSSSED.*

THE PARDONED SEXUAL OFFENDER DATABASE HAS BEEN CHECKED FOR THE ABOVE MENTIONED PERSON ON _____
 AND RESULTS ARE NEGATIVE POSITIVE **NOT APPLICABLE**

DATE _____
 SIGNATURE FOR THE CHIEF OF POLICE _____
 DATE AND AMOUNT RECEIVED _____ \$ _____ IDENTIFICATION VERIFIED BY _____



BPS #45.1
(Rev. 04/05)

**CONSENT FOR A CRIMINAL RECORD CHECK FOR A SEXUAL
OFFENCE FOR WHICH A PARDON HAS BEEN
GRANTED OR ISSUED.**

**(This form is to be used by a person applying for a position with vulnerable person(s)
(i.e. the elderly, the disadvantaged, children, etc.)**

Reason for Consent (Please fill out the following):

Description of the paid or volunteer position (i.e. leader, nurse, group home, etc)

The name of the person or organization is:

Provide details regarding the children or vulnerable persons: (i.e. boys 5-10 yrs., disadvantaged, etc.)

Consent:

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, 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 service or other authorized body. That police service or authorized body will then disclose that information to me.

Signature

Date