

Records Act.

## **POLICE INFORMATION CHECK**

Application Form must be completed in Full before your request will be processed

## **UNCLAIMED CERTIFICATES WILL BE DESTROYED AFTER 90 DAYS**

Information collected as a result of this Police Information Check will only be released to the person making the application. *No refunds*.

	making the a	pplication. <u>Ivo i</u>	<u>eiunas</u> .		
Last Name:	Given Name:	Midd	Middle Name		Alias/Nickname/Preferred Name
Previous Last Names: (Maiden Name,	Name Change etc.)	Date of Birth			Female: □
					Male: □
Street Address	City	Year	Month Pos	<b>Day</b> tal Code	Place of Birth (Province / Country)
	W D1	lev			
Home Phone Ce	ell Phone	Email			
Previous Address (if any) within the las	t 5 years – <b>lived in for</b>	more than 5 m	nonths (City	/Province	only) None: □
This Police Information Check is for: Er	nployment □ Immigr	ration □ Reco	ord Suspensi	on 🗆 V	Vaiver □ Travel □ Adoption □
Volunteer □ <i>(Volunteer Letter Attached)</i>	☐ Other ☐ (Please in	ndicate)			
If Police Information Check is for employ	•				
Employer/Organization requesting thi					
Vulnerable Clientele Duties:					
Have you been fingerprinted for a <b>CRIM</b>	INAL OFFENCE IN CA	<b>NADA</b> for which	h you have <u>r</u>	not receiv	ed a Pardon? Yes   No
I consent to the Medicine Hat Police Ser	vice (the "Police Servi	ce") conducting	the following	ng search	es about me:
A. Criminal convictions, conditional Repository of Criminal Records.	and absolute discharg	es and other re	lated informa	ation abou	ut me contained in Canada's National
B. Criminal and provincial statute dis in the Justice Online Information Network.	spositions and any pend	ing criminal or pr	ovincial statu	ite charge	s before the Alberta courts as identified
C. Current court orders, warrants, prout of province warrants identified in the Ca		•	bonds, recog	nizance o	rders in Alberta and current outstanding
D. Information obtained from local p a police investigation where a risk to public Service upon consideration of several factobe interacting, the frequency and recency o in the records.	safety exists. A decision or sincluding the nature of	n to disclose info of the responsibil	rmation desc ities of the po	ribed here osition app	lied for, the individuals with whom I will
E. Vulnerable Sector Check: comp children, the elderly, people with disabilities you are applying for meets the requirement	s or other vulnerable pop	oulations. It is the			Il be responsible for the well-being of etermines or verifies that the position
A Vulnerable Sector Check is required whe people with disabilities. A Vulnerable Sect maintained by the RCMP to identify the exist includes a search of local police records to	or Check involves a sea stence of sex offences for	rch of the automa or which a record	ated criminal suspension of	records (por pardon	pardoned sex offender) retrieval system exists. A Vulnerable Sector Check also
I consent to a search being made in the au if I have been convicted of, and have been		-			

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 to the *Criminal Records Act* in respect of which a pardon was granted or issued, that record shall 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 understand that the Police Service will not disclose this information to the Requesting Agency without further consent from me.
If you are obtaining a Vulnerable Sector Check, List all cities and provinces of residence other than your current city of resident for the past 5 years:
Location: Location: Location:
Please provide a brief description of the position you are applying for and identify the vulnerable population you will in a position of trust or authority over (i.e. are they children, persons with disabilities or from some other vulnerable population).
I acknowledge that I understand when a Vulnerable Sector Check is required and, if required, I consent to the Vulnerable Sector Check.
Signature of Applicant: Date:
A police record consists of information created or gathered by police. It may include information such as criminal charges and convictions, non-conviction information such as acquittals, findings of not criminally responsible by reason of mental disorder, stays of proceedings, participation in alternative measures and other diversionary programs, investigations, and occurrences that did not result in charges being laid. A police record may also include non-criminal contact with police. Even if you have never been charged or convicted of an offence a police record may exist as a result of an interaction with the police, including interactions due to mental health issues or as a result of an investigation conducted by police, whether you knew about the investigation or not. Information created or gathered by police is retained in accordance with the Police Service's records retention schedule. If you require further information about the Police Service's retention schedule, please contact the Police Service responsible for completing your Police Information Check.
I give my consent to the Police Service to use any and all information about me that it has found after completing the above identified searches, including information obtained from local police records, to complete a Police Information Check and I give my consent to the Police Service to disclose the results of the searches to me in a Police Information Check. I understand that it is my decision whether I provide the results of the searches to any other person or organization. I understand that further information about the Police Information Check process is available in the Alberta Police Information Check Disclosure Procedures which are available on the Police Service's website.
I remise, release and forever discharge the Police Service, the Chief of Police of the Police Service, the Police Service's Police Commission, and all of their administrators, successors, assigns, agents, officers, servants and employees from any and all demands or claims of every nature and kind at law or in equity including, without limitation, all manner of actions, suits, debts, dues, general damages, special damages, pecuniary damages, costs or interest, incurred by me or my legal representatives, heirs, assigns or agents and arising from or in any way related to my participation in the Police Information Check process and the obtaining of a Police Information Check.
The information collected on this form and the information collected, used and disclosed as part of this Police Information Check process will be collected, used and disclosed in accordance with the <i>Freedom of Information and Protection of Privacy Act</i> or as otherwise provided by law.
By signing this form, I confirm that I have fully informed myself and understand the content, meaning and effect of this consent and release of liability and I declare that the information provided by me is accurate and may be verified by the Police Service through police information databases if required.
Signature of Applicant: Date:
Verification of Identification  TWO PIECES OF ORIGINAL & CURRENT GOVERNMENT ISSUED IDENTIFICATION, THAT INCLUDE BOTH NAME AND DATE OF BIRTH ARE REQUIRED. ONE MUST CONTAIN YOUR PICTURE
ID Type & Number: VERIFIED BY:
ID Type & Number:
The personal information collected on this form, including your name, address, birthdate and phone number is authorized under Section 33(c) of the <i>Freedom of Information and Protection of Privacy Act</i> (FOIP) of Alberta. If you have any questions about the collection or use of this information, contact <i>MHPS</i> FOIP Coordinator.