

ALTONA POLICE SERVICE POLICE CRIMINAL RECORD CHECK (PCRC)



Application Date (yyyy-mm-dd)

ALTONA POLICE SERVICE									
1) APPLICANT BACKGRC (To be completed by the Applicant) INFO	RMATION						
Must Print Legibly Under Each Head) ding	First Name	e (no initials)				Middle Name	(a) (na initic	
Sumane		TIISCINAILIC						(3) (110 11111	als <i>)</i>
Maiden Name or Other Names (legally changed)		Usual First	Name (if different fro	m above)			Gender		
Date of Birth (YYYY-MM-DD)	Place of	f Birth		Telephone	(home)			Telephon	e (cell)
					. .				e : ()
Current Address		City			Province		Postal Co	de	Since: (yyyy / mm)
Address History – please list all pre			for the past 5		cluding a				
Street name and # (please state belov	v)	Apt/Unit #		City		Provinc	e Posta	al Code	From To yyyy mm yyyy mm
Primary Identification: (MUST be Gov	/ernmei	nt issued a	and include app	licant's N	ame Date	of Birth	Current	Address	Signature and Photo)
Secondary Identification: Governmen Primary ID Produced (Type / ID #):		d, or other		D require		he Altona		Service	, e.g. a.a. a.a
	_								
*If yes,	Do you have a criminal record to declare? □ *Yes □ No *If yes, you are required to fill out a Declaration of Criminal Convictions								
If your declaration of criminal convictions the identity verification process (except for				ated durin	g the PCR	C, you wi	ll be requi	red to su	Ibmit fingerprints as part of
2) PURPOSE OF THE POI	LICE								
Employment Volunteer Immigration / Citizenship Adoption / Guardianship / Foster Parent Other:									
Name of Employer / Organization / Agency:									
Description of position / duties:									
Do you require a Vulnerable Secto	r Chec	k? [□ *Yes	□ No					
*If yes, stop and con (Only available to applic									
(Applicants residing outs		Town of	Altona & LUL	of Plun	n Coulee	will nee			
3) SCOPE OF POLICE CR	IMIN		e/detachment		-vs cne	CK)			
The Police Criminal Record Check					ng inforn	nation a	s it exist	ts on th	e date of the search:
Confirmation of <u>declared</u> crimin	al convi	ctions.							
 Summary convictions. Suspended sentences. 									
 Convictions under appeal. Findings of Guilt under the Youth Criminal Justice Act within the applicable disclosure period. 									
Absolute Discharges and Conditional Discharges within the applicable disclosure period.									
If the applicant submits their fin	•••		of criminal conv	ictions (re	sults incluc	le a 'certi	fied crimin	al record	I check'.
4) CONSENT AND AUTHO									
Applicant's Informed Consent for I 1. I hereby authorize the Altona Pe			Record Checl	K					
a. inquire into and conc	duct a se	earch of my							
ii. CPIC Inves	 i. the RCMP National Repository of Criminal Records; ii. CPIC Investigative and Identification databanks, and 								
b. and to inquire with an									
			a Federal or Provection 3 of this a		ernment E	Departmei	nt or Agen	cy autho	prized by me, the results of
2. I understand that if information	of a pos	sible record	d exists, it will no	ot be discle	osed until i	dentificat	ion has be	en confi	rmed by either myself or by
fingerprints.	Ingerprints.						n act as the Δltona Police		

4.	I hereby authorize any law enforcement agency or police service in Canada to disclose information to the Altona Police Service upon request
	for the purposes of the Police Criminal Record Check.

- 5. I am providing informed consent to have these sources of police information reviewed and disclosed, and I understand the nature of the information that may be contained in them.
- 6. I am allowing my personal information to be disclosed to a prospective employer or organization, and I acknowledge that my suitability could be determined based on the information disclosed. The suitability criteria are established and controlled by the employer or organization not the police service or authorized body conducting the checks. The police service is not involved with, or responsible for, the decisions that are made by the employer or organization.
- 7. I also consent that, should I come into contact with any law enforcement agency or police service after the completion of this check while connected with the above employer / organization / agency, the Altona Police Service shall have the right to notify that employer / organization / agency.
- 8. I hereby release and discharge the Altona Police Service, and any other Police Service(s) contributing information, and all their Members, employees and agents of the said Service(s) 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 by the Police Service to myself or directly to any third party authorized by me.
- 9. I understand and agree that this application and any related records are retained by the Altona Police Service (and their on-line provider, if applicable) for a minimum of five years.
- 10. 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.

) AUTHORIZATION FOR DISCLOSURE Select one option)

I request and consent to the disclosure of the Release of Results of Police Criminal Record Check (PCRC) directly to the Federal or Provincial Government Department or Agency listed in part 2 of this application.

or

(OPTION IS ONLY AVAILABLE FOR ON-LINE RECORDS CHECK APPLICATIONS)

I request and consent to the information contained in the Release of Results of Police Criminal Record Check (PCRC) be disclosed directly to me via the Forrest Green web portal.

6) SIGNATURES

Applicant's name (print):

Parent / Guardian's name (if applicant under 18 years of age) (print):

Police Service Witness Signature

7) NOTICE TO APPLICANTS

The Altona Police Service reserves the right to discontinue, defer or deny a request for a Police Criminal Record Check at any time.

All applicants and agencies/organizations receiving these checks should consult the Fact sheet at: <u>https://www.altona.ca/m/altona-police-service</u> for additional information.

Personal information contained on this form is collected for the purpose of processing this police record check. Questions concerning this collection should be directed to the Altona Police Service.

If the authenticity of this check is in question, please contact the Altona Police Service at 204-324-5373 or crchecks@altona.ca

8) APPEALS PROCESS

An applicant may appeal the disclosure(s) contained within the Police Information Check – Vulnerable Sector by submitting a written request within 30 days of the completion of the check. The appeal should be addressed to the Chief of Police who will conduct a review. A written response will be provided within 90 days of receipt of the appeal request.

9) FOR POLICE USE ONLY				
Date of Search:	Processed by:			
Payment \$	Receipt #			

Signature

Signature:

Employee #