

## ALTONA POLICE SERVICE POLICE INFORMATION CHECK VULNERABLE SECTOR (PIC-VS)

## **LEVEL 3 CHECK**

Application Date (yyyy-mm-dd)

1) APPLICANT BACKGRO (To be completed by the Applicant Must Print Legibly Under Each Head		INFOF	RMATION								
Surname		First Name	First Name (no initials)					Middle Name(s) (no initials)			
Maiden Name or Other Names (legally changed)		Usual First Name (if different from above)				Gender	Gender				
Date of Birth (YYYY-MM-DD) Place of		Birth		Telephone (home)			Telephone (cell)				
Current Address		City					Postal Code		Since: (yyyy mm)		
Address History – please list all pre	vious a	ddresses	for the past 5	<b>years</b> in	cluding	g addre	esses outside	of Canada	а		
Street name and # (please state below	v)	Apt/Unit #	C	ity		Provinc	ce Postal	Code	From yyyy mm	To yyyy mm	
Primary Identification: MUST be Government issued with the applicant's Name, Date of Birth, Current Address, Signature and Photo  Secondary Identification: Government issued, or otherwise meet the ID requirements of the Altona Police Service  Primary ID Produced (Type / ID #): ID Verified By:											
( )		Goodilaary	.b				15 (0,11100 5)	,-			
Daniel Landau de	0 -	1 +1/ 1									
Do you have a criminal record to decla			□ No required to fill o	ut a Decl	aration	of a Cr	riminal Record	4			
If your declaration of criminal convictions of identity verification process (except for loc	does not al crimin	match the	e information locations).	ated durin	g the PI	C-VS, y	you will be requ	uired to sub		s part of the	
2) PURPOSE OF THE POLICE INFORMATION CHECK – VULNERABLE SECTOR											
☐ Employment ☐ Volunteer ☐ Other:											
a) Are you applying for a paid or volunteer position with a person, employer, or organization where you will be in a position of authority or trust towards one or more children or vulnerable person(s)?  Dyes Tho  The Yes The Yes Tho  The Yes The Yes Tho  The Yes											
*If no to questions a – c, stop and complete a Police Criminal Records Check (Level 1) or Police Information Check (Level 2) instead.											
d) Will the results of the vulnerable sector						□ No					
*If yes to question d, stop and comp Employer / Organization / Agency Name:	lete a P	olice Crin	ninal Records C	heck (Le	vel 1) o	r Police	e Information	Check (Le	vel 2) instead.		
Employer / Organization / Agency Name.											
Title / description of the paid or volunteer position:											
Details regarding the responsibilities towards children or vulnerable	persons:										
	-										

(The Police Service reserves the right to refuse to conduct a Vulnerable Sector Check)

## 3) SCOPE OF POLICE INFORMATION CHECK - VULNERABLE SECTOR

The name-based Police Information Check – Vulnerable Sector will only include the following information as it exists on the date of the search:

- Confirmation of <u>declared</u> criminal convictions.
- Summary convictions.
- Convictions Under appeal.
- Suspended Sentences;
- Findings of Guilt and Findings of Guilt with Reprimand under the Youth Criminal Justice Act within the applicable disclosure period.
- Other Federal convictions, (if a public safety concern exists).
- Provincial Convictions (if a public safety concern exists).
- Absolute Discharges and Conditional Discharges within the applicable disclosure period.
- For adults only, as authorized for release by the Minister of Public Safety, all record suspension (pardoned) criminal convictions, including non sex offences, as identified by a Vulnerable Sector query.
- Outstanding and / or pending entries such as Charges and Warrants.
- Judicial Orders such as Peace Bonds (including expired Peace Bonds), Restraining Orders, Protection Orders, Probation Orders, and Prohibition Orders.
- Youth Extrajudicial Sanctions within applicable retention periods.
- Adult Diversions / Alternative Measures within applicable retention periods.
- Dispositions including, but not limited to Stay of Proceedings (within 1 year for youth), and cases of Not Criminally Responsible.
- Adult dispositions including, but not limited to Withdrawn, Dismissed, Not Guilty and Acquittal.
- Youth dispositions including, but not limited to Withdrawn, Dismissed, Not Guilty and Acquittal, within the applicable disclosure periods.
- For criminal/federal offences: Accused, Suspect, Suspect Chargeable, Charges Recommended, Wanted, or Arrested information (unless youth Extrajudicial measures / sanctions taken).
- For criminal/ federal offences: Victim, Witness or Subject of Complaint (only under exceptional disclosure).
- Any additional information recorded in police databases documenting the applicant to have been a suspect in a criminal / federal offence.
- Adverse contact involving the threat or actual use of violence directed at other individuals, regardless of, but without disclosing mental health status.

•	If the applicant submits their fingerprints, a record of criminal con-	victions (results include a 'certified o	criminal record check').							
4) CC	DNSENT AND AUTHORIZATION									
Applica	nt's Informed Consent for Police Information Check an	d Vulnerable Sector Search:								
1.	I hereby authorize the Altona Police Service to: a. inquire into and conduct a search of my name in:									
	<ul> <li>i. the RCMP National Repository of Criminal R</li> <li>ii. CPIC Investigative and Identification databar</li> </ul>		ender Records,							
	<ul><li>iii. CPIC Intelligence databank,</li><li>b. and to inquire with and conduct a local police records s</li></ul>									
2.	<ul> <li>c. disclose to me a summary of the results of any police relationship of a possible record exists, it will relationship.</li> </ul>									
3.	fingerprints.  I hereby authorize the Altona Police Service and Forrest Green S	olutions Ltd. the third party compan	v authorized to act as the Altona Police							
	Service's virtual front counter for records checks, to exchange info conduct electronic identity verification.									
4.	I hereby consent to a search being made in the automated crimin (RCMP) to determine if I have been convicted of, and been grant listed in the schedule to the Criminal Records Act.									
	<ul> <li>a. I understand that if, as a result of giving this consent, a offences listed in the schedule to the Criminal Records record shall be provided by the Commissioner of the Re issued for the offence(s).</li> </ul>	Act in respect of which a Record St	uspension (Pardon) was granted or issued, that							
	<ul> <li>b. The Minister may disclose all or part of the information</li> <li>c. The police service or authorized body will then disclose</li> </ul>	that information to me.								
_	d. If I further consent in writing to disclosure of that inform verification, that information will be disclosed to that pe	rson, employer, organization or age	ncy.							
5.	I hereby authorize any law enforcement agency or police service purposes of the Police Information Check – Police Vulnerable Se	ctor Check.								
6.	I am providing informed consent to have these sources of police i that may be contained in them.									
7.	7. 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									
8.	employer or organization. I also consent that, should I come into contact with any law enforce with the above employer / organization / agency, the Altona Police	cement agency or police service after	er the completion of this check while connected							
9.	I hereby release and discharge the City of Altona, Altona Police S contributing information, and all their members, employees, , volution damages, loss or injury howsoever arising which may hereafter	Service, and any other Police Servic inteers, agents and elected officials	e(s) and Law Enforcement Agency(s) from any and all actions, claims and demands							
	Police Service.  I understand and agree that this application and any related record provider, if applicable) for a minimum of five years.	•	·							
	I certify that the information provided by me in this application is t authorization, understand it, and agree to it in its entirety.	rue and correct to the best of my kn	lowledge and belief. I have read this consent and							
_,	THORIZATION FOR DISCLOSURE ck Box)									
	Il pick up the Release of Results of Police Information Check – Vul	nerable Sector (PIC-VS) at the Alto	na Police Station.							
<ul> <li>A third party such as a family member, friend or employer <u>cannot</u> pick up the results on your behalf.</li> <li>The applicant will have to produce photo identification when they pick up the results.</li> </ul>										
Π.		or								
	request and consent to the disclosure of the Release of Results of Sovernment Department or Agency listed in part 2 of this application	•	o the Federal of Provincial							
	(OPTION TWO IS ONLY AVAILABL	_	CK APPLICATIONS)							
	quest and consent to the information contained in the Release of F	Results of Police Information Check	be disclosed directly to me via the							
	rest Green web portal.  GNATURES									
Applicant's	name (print):	Signature								
Parent / Gu	ardian's name (if applicant under 18 years of age) (print):	Signature:								
	, , , , , , , , , , , , , , , , , , ,	v								
D. II. O. I	W. G.									
Police Serv	ce Witness Signature:		Employee #							
7) NC	TICE TO APPLICANTS									
	The Altona Police Service reserves the rig Police Information Check	- Vulnerable Sector at a	ny time.							
information			·							
	a Police Service shall neither confirm the existence of information, rapid police service.	nor disclose information belonging to	another police service without written permission							
Personal	information contained on this form is collected for the purpose of p	processing this police information ch	neck. Questions concerning this collection should							
	ed to the Altona Police Service. henticity of this check is in question, please contact the Altona Poli	ce Service at 204-324-5373 or crch	ecks@altonapolice.ca.							
8) AF	PPEALS PROCESS									
the comp	ant may appeal the disclosure(s) contained within the Police Inform letion of the check. The appeal should be addressed to the Chief of eceipt of the appeal request.									
9)_EC	OR POLICE USE ONLY									
Date of Sea		Processed by:								
	P	age <b>2</b> of <b>3</b>								

Payment \$	Receipt #