



## **Criminal Record Background Check Consent Form**

### **Section 1**

Surname Name:

Previous Surname(s') If Any:

First Name:

Middle Name:

Sex:

Date of Birth:

Place of Birth:

Address:

Number & Street

City

Province

Postal Code

Previous Address:

Number & Street

City

Province

Postal Code

Email Address:

Phone Number:

## **Section 2**

Are you applying for a position whereby you will be working with vulnerable persons?

Yes

No

**If Yes, Vulnerable Person's Background Check Form must be completed.**

To the best of your knowledge, do you have a previous criminal record?

Yes

No

Is this a Paid position?

Is this a Volunteer position?

What organization are you applying with?

Phone number of organization.

Email of organization.

## **Section 3**

I authorize Summerside Police Services on my behalf, to inquire into, and determine whether or not I have been convicted of a Criminal Code of Canada offense or related federal statute offense within Canada.

Signature of applicant:

Date:

**OFFICE USE ONLY**

Verification & type of identification provided:

Records Check:

Provincial Record: POS\_\_\_\_\_ NEG \_\_\_\_\_

CPIC: POS\_\_\_\_\_ NEG\_\_\_\_\_

PIRS: POS\_\_\_\_\_ NEG\_\_\_\_\_

PROS: POS\_\_\_\_\_ NEG\_\_\_\_\_

PIP: POS\_\_\_\_\_ NEG\_\_\_\_\_

A fee of \$50.00 (fifty) is required prior to a records check being completed.

Paid:

Receipt Number:

Member: