



**REQUEST FOR VULNERABLE  
SECTOR SCREENING**

THIS SEARCH IS FOR INDIVIDUALS SEEKING A VOLUNTEER AND/OR EMPLOYMENT POSITION WITH CHILDREN OR VULNERABLE PERSON(S).

(PLEASE PRINT)

LAST NAME		FIRST NAME		MIDDLE NAME	
MAIDEN NAME OR OTHER SURNAMES USED				PLACE OF BIRTH (CITY, PROVINCE, OTHER)	
D O B	Y Y M M D D	SEX	AREA	TELEPHONE (RES.)	DRIVER'S LICENCE NUMBER
NUMBER	STREET	APT. / UNIT	CITY	POSTAL CODE	

(PROVIDE PREVIOUS ADDRESSES IF YOU DID NOT RESIDE AT THE ABOVE ADDRESS FOR MORE THAN FIVE YEARS)

NUMBER	STREET	APT. / UNIT	CITY	POSTAL CODE
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REASON FOR REQUEST: SCREENING FOR

EMPLOYMENT   
  VOLUNTEER   
  STUDENT PLACEMENT   
  OTHER: \_\_\_\_\_

AUTHORIZATION, RELEASE AND WAIVER:

I HEREBY AUTHORIZE, AND CONSENT TO, THE FULL DISCLOSURE OF THE FOLLOWING INFORMATION AND RECORDS BY THE HAMILTON POLICE SERVICE, AND BY ANY OTHER POLICE AGENCY IN CANADA TO WHICH A COPY OF THIS FORM IS PROVIDED:

- A. CRIMINAL RECORD (ADULT)
- B. CRIMINAL RECORD (YOUNG PERSON).\*
- C. RECORDS OF "NOT GUILTY; NOT CRIMINALLY RESPONSIBLE ON ACCOUNT OF MENTAL DISORDER."
- D. CONVICTIONS, PENDING CHARGES AND ONGOING INVESTIGATIONS UNDER FEDERAL STATUTES AND PROVINCIAL STATUTES, WHERE AVAILABLE. (NOTE: INFORMATION MAINTAINED UNDER THE HIGHWAY TRAFFIC ACT AND THE COMPULSORY AUTOMOBILE INSURANCE ACT IS NOT INCLUDED).
- E. RELEVANT OCCURRENCE REPORTS.
- F. PROBATION, PROHIBITION AND OTHER JUDICIAL ORDERS.
- G. WHERE THE SUBJECT INDICATED RESIDENCE IN ANOTHER JURISDICTION IN CANADA WITHIN THE PREVIOUS FIVE (5) YEARS, INFORMATION WAS REQUESTED FROM THE RELEVANT POLICE AGENCY. RELEASE CRITERIA OF OTHER AGENCIES MAY DIFFER FROM THAT OF THE HPS.

CONSENT FOR A CRIMINAL RECORD CHECK FOR A SEXUAL OFFENCE FOR WHICH A PARDON HAS BEEN GRANTED OR ISSUED. (Not applicable for persons under the age of 21)

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 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, that record may be provided by the Commissioner of the Royal 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 OF APPLICANT

\* PURSUANT TO SECTION 119(1) OF THE YOUTH CRIMINAL JUSTICE ACT, A YOUTH RECORD CAN BE MADE AVAILABLE TO THE YOUNG PERSON TO WHOM THE RECORD RELATES AND FOR THE PURPOSE OF GRANTING A SECURITY CLEARANCE.

IN CONSIDERATION OF COMPLIANCE WITH THE FOREGOING AUTHORIZATION, I, FOR MYSELF, MY HEIRS, EXECUTORS, ADMINISTRATORS, SUCCESSORS AND ASSIGNS HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE THE CITY OF HAMILTON, THE HAMILTON POLICE SERVICES BOARD, THE HAMILTON POLICE SERVICE AND ALL THEIR AGENTS, OFFICERS, ASSIGNS, REPRESENTATIVES AND SUCCESSORS OF AND FROM ANY AND ALL LIABILITY FOR SUCH DISCLOSURE, INCLUDING ALL CLAIMS, DEMANDS, DAMAGES, COSTS, ACTIONS AND CAUSES OF ACTION, WHETHER IN LAW OR EQUITY, IN RESPECT OF DEATH, INJURY, LOSS OR DAMAGE OF ANY NATURE WHICH MAY BE SUSTAINED BY ME OR BY ANY OTHER PERSON, HOWSOEVER CAUSED OR ARISING, AS A RESULT OF OR CONNECTED TO, THE RELEASE OF THIS INFORMATION.

FURTHERMORE, I WAIVE ALL RIGHTS, PRESENT AND FUTURE, RELATING TO THE RELEASE OF THE INFORMATION SET OUT HEREIN, AND UNDERSTAND THAT UPON DISCLOSURE OF SUCH INFORMATION, THE POLICE SERVICE AND ALL THE AFORESAID WAIVE ANY RESPONSIBILITY FOR THE USE, APPLICATION AND/OR DISSEMINATION OF SAME BY ME.

DATE	SIGNATURE
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I HEREBY CONSENT TO HAVING THE RESULTS OF THIS SEARCH MAILED OUT TO ME AT THE ADDRESS I INDICATE ON THE RETURN ENVELOPE.  YES (Initials)  NO  
 THE INFORMATION LOCATED AND/OR RELEASED MAY OR MAY NOT PERTAIN TO THE SUBJECT OF THIS INQUIRY. POSITIVE IDENTIFICATION CAN ONLY BE CONFIRMED THROUGH SUBMISSION OF FINGERPRINTS. PERSONAL INFORMATION ON THIS FORM IS COLLECTED AND DISCLOSED UNDER THE AUTHORITY OF THE POLICE SERVICES ACT AND WILL BE USED TO DISCLOSE PERSONAL INFORMATION TO THE APPLICANT. ANY PERSON OR ORGANIZATION WHICH ACQUIRES INFORMATION RELATING TO AN APPLICATION FOR A POSITION SHALL NOT USE IT OR COMMUNICATE IT EXCEPT IN RELATION TO THE ASSESSMENT OF THE APPLICANT.

**OFFICE USE ONLY**

- The Hamilton Police Service has conducted the above search with negative results.
- The Hamilton Police Service has conducted the above search with the following results as indicated in the attached documents.
- A Search for sex offences for which a pardon has been granted was conducted with negative results.

DATE OF SEARCH	CLERK
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VALID ONLY WHEN EMBOSSED WITH AN ORIGINAL HAMILTON POLICE SERVICE SEAL



# MOUNT HAMILTON YOUTH SOCCER CLUB

9 Dallas Avenue, Hamilton, ON L8V 2E2

Phone: (905) 318-1933 Fax: 905-318-8699

Email: [info@mhysc.org](mailto:info@mhysc.org)

Website: <http://www.mhysc.org>



\_\_\_\_\_, 2012

Police Check Information:

To Whom it May Concern;

This letter is to confirm that \_\_\_\_\_ is the \_\_\_\_\_ for our

\_\_\_\_\_ soccer team for the Mount Hamilton Youth Soccer Club for the 2012 season  
and as such requires a police check.

Sincerely,

Tammy Alessi  
Office Administrator  
Mount Hamilton Youth Soccer Club  
905-318-1933