Criminal Background/Drivers Abstract/Credit Check Form

Important

1. *Photocopy **2 pieces** of identification, 1 piece must be government issued with employees picture and signature*
2. *When photocopying ID ensure it is clear and can be read.*

Services Ordered: Criminal Background Check ☐ **Credit Bureau Inquiry** ☐ **Drivers Abstract** (incl. Lic as ID) ☐ SIN Validation ☐

1

Identification Verification

_____ _____ _____

Date **Drivers' License Number** (If Abstract Ordered) **SIN Number** (for SIN Validation)

I have examined the identification of the person below and am satisfied that the person depicted on the photo identification is one and the same.

_____ _____ **X**_____

Manager First Name **Last Name** **Managers Signature**

2 **Have you ever been convicted of a criminal offence? Yes** ☐ **No** ☐ **If "Yes" please provide details below:**

Do not declare the following: Absolute discharges or Conditional Discharges, pursuant to the Criminal Code, section 730. Any charges for which you have received a Pardon, pursuant to the Criminal Records Act. Any offences while you were a "young person" (12 years old but less than 18 years old), pursuant to the Youth Criminal Justice Act. Any charges for which you were not convicted, for example, charges that were withdrawn, dismissed, etc. Any provincial or municipal offences. Any charges dealt with outside of Canada.

Offence	Date	Location	Penalty

3

Employee Consent

_____ _____ _____

Employee First Name **Middle Name** **Last Name**

_____ Birth Date _____ _____ _____ **Gender** Male Female (circle one)

Maiden Name(s) / Alias (Other Names) **Month** **Day** **Year**

_____ _____

Present Address (street name, number, city, province, postal code) **Telephone**

_____ _____ _____

Previous Address (if present address is less than 5 years) **Place of Birth** (Town, Prov., Country, or Hospital) **Email Address**

I have applied to (CLIENT NAME)_____ for employment and hereby authorize them through their agents to complete a criminal history check which searches the RCMP Canadian Police Information Centre (CPIC) database. Agents conduct these investigations on behalf of (CLIENT NAME)_____. I hereby consent and authorize a Canadian Police Department to search for and disclose on my behalf to the agents who are requesting the criminal history check on behalf of (CLIENT NAME)_____ the fact that records may exist on me and are registered on the CPIC database. I acknowledge that such records may include information relating to criminal convictions under federal legislation for which a pardon has not been granted. I authorize these agents to release all information obtained to (CLIENT NAME)_____ and hold harmless these agents upon the release of this information or its findings to (CLIENT NAME)_____. The Applicant consents to the release of the information contained in the application and results of the criminal reference check being disclosed to the necessary third party for the purposes of (CLIENT NAME)_____ business. I understand that failing to provide accurate information or omission of facts herein may disqualify me from consideration for employment with (CLIENT NAME)_____. Furthermore, if there is a discrepancy with the information provided by myself on this form and that disclosed by a Canadian Police Department during this investigation of my criminal records history, I understand that I have the option to provide my fingerprints to resolve any discrepancy or dispute. This request is made in compliance with any applicable federal, provincial or municipal public sector privacy legislation which allows a public body or municipality to disclose my personal information to me or my agent upon my request.

X_____ _____

Employees Signature Authorizing Name Based Criminal Check **Date**

In connection with my application for employment with (CLIENT NAME)_____ I understand that background check process includes a Canadian credit bureau inquiry with retrieval of information from a major Canadian credit bureau. I hereby consent to a Canadian credit bureau inquiry on behalf of (CLIENT NAME)_____ which will include information about me, including any previous bankruptcies, legal proceedings, collection actions, negative banking items and other information reported by my creditors and I hereby authorize any public or private institution to provide and release the agents information related to my credit record. I authorize the agents to release all personal information obtained during the above Canadian credit bureau inquiry to (CLIENT NAME)_____ and hold harmless the agents upon the release of this information or its findings to (CLIENT NAME)_____

X_____ _____

Employees Signature Authorizing Credit Bureau Inquiry **Date**