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| Personal information contained on this form is collected pursuant to the Police Record Checks Reform Act, Police Services Act, s.41 and Federal and Provincial privacy legislation and is collected for the purpose of processing this Vulnerable Sector Check. Information related to this check will be retained for two years. Questions concerning this collection should be directed to your local Nishnawbe-Aski Police Service (NAPS) detachment.    This form must be complete in order to receive a copy of the Adult Criminal Convictions & Associated Information from the National Repository of Criminal Records. A Certified Criminal Record can only be issued by the Canadian Real Time Identification Services based on the submission of fingerprints to the Royal Canadian Mounted Police National Repository of Criminal Records.  This form must be used in conjunction with form A-210 – Criminal Record Check/Criminal Record and Judicial Matters Check or A-211 – Vulnerable Sector Check.  **Declaration of Criminal Record:**   * Does not constitute a Certified Criminal Record by the Royal Canadian Mounted Police * May not contain all criminal record convictions   **Do not declare:**   * Absolute Discharges or Conditional Discharges, pursuant to the *Criminal Code*, Sec. 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to the *Youth Criminal Justice Act* * Any charges for which you were not convicted, for example, charges that were withdrawn, dismissed, etc… * Any Provincial or Municipal offences * Any charges dealt with outside of Canada | | | | | | | | | |
| **Applicant Information** | | | | | | | | | |
| Last Name | | | | First Name | | | | | |
| Middle Names | | | | | | | Gender  Male | | Female |
| Maiden Name or other Last Names used | | | | Name commonly used or other First Names | | | | | |
| Address  Unit No. | Street Number | | Street Name | | | | | PO Box | |
| City/Town | | | | Province | | | | Postal Code | |
| Date of Birth(yyyy/mm/dd) | Email Address: | | | Telephone | | Country of Birth | | | |
| **Details on all convictions (If more space is needed, please attach additional page as required)** | | | | | | | | | |
| Offence: | | | | | Disposition/Sentence | | | | |
| Date: | | Location of Court (city/town) | | |
| Offence: | | | | | Disposition/Sentence | | | | |
| Date: | | Location of Court (city/town | | |
| Offence: | | | | | Disposition/Sentence | | | | |
| Date: | | Location of Court (city/town) | | |
| Offence: | | | | | Disposition/Sentence | | | | |
| Date: | | Location of Court (city/town) | | |
| **I hereby certify that the information that I have provided above is, to the best of my knowledge, true, accurate and complete.** | | | | | | | | | |
| **Signature of Applicant:** | | | | Number of pages: \_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| Date: | | | | | | | | | |