



## RECORDS CHECK AUTHORIZATION

1. Surname: \_\_\_\_\_ Given \_\_\_\_\_ Initial \_\_\_\_\_
  2. Maiden name (if applicable) \_\_\_\_\_
  3. Current Address: \_\_\_\_\_ Postal Code \_\_\_\_\_
  4. Telephone: \_\_\_\_\_
  5. Date of Birth: \_\_\_\_\_
  6. Place of Birth: \_\_\_\_\_
  7. Drivers Licence: \_\_\_\_\_
  8. Sex:            Male                      Female
- |                           |                              |                             |                        |                                   |
|---------------------------|------------------------------|-----------------------------|------------------------|-----------------------------------|
| Do you have a history of: | Mental Illness?<br>Yes<br>No | Alcohol Abuse?<br>Yes<br>No | Drug Use?<br>Yes<br>No | Criminal Conviction?<br>Yes<br>No |
|---------------------------|------------------------------|-----------------------------|------------------------|-----------------------------------|

### Previous Addresses (Past 5 years)

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

### Waiver and Consents

#### **Consent for a criminal record check for a sexual offence for which a pardon has been granted or issued:**

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 giving 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 Canadian 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 force or other authorized body. That police force or authorized body will then disclose that information to me.

#### **Aylmer Police Authorization:**

I authorize the Aylmer Police Service to enquire into my background. These enquiries will include a criminal record check and a review of all other police records at it's disposal.

I am aware that the fee for this service is **\$40.00 (includes G.S.T.)**

I will not hold the Aylmer Police Service or its members responsible for any errors or omissions that may occur in the information obtained.

Criminal Code offences can only be confirmed through the submission of fingerprints for comparison which are done at an additional cost of **\$40.00.**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

---

---

#### *(Department Use Only)*

Date Received: \_\_\_\_\_ Queried by: \_\_\_\_\_

Received by: \_\_\_\_\_ CPIC Check: \_\_\_\_\_

Fee Collected: \_\_\_\_\_ Occurrence Check: \_\_\_\_\_

Criminal Record:    YES        NO                      Local Record: \_\_\_\_\_