



CRIMINAL BACKGROUND CHECK

PLEASE PRINT

Date: (YYMMDD) _____

Last Name: _____ First Name: _____ Middle Name: _____

Maiden Name Where Applicable: _____ Other/Nick Names: _____

Other Married Names: _____ Phone No: _____

Address: _____ Apt. No. _____

Town: _____ Postal Code _____

Date of Birth (YYMMDD): _____ Sex: F M

Identification – one form MUST be photo I.D.

Type of I.D. Produced: _____ I.D. Number: _____

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Agency: _____

Reason for Request: _____
*(must state specifically or form will **NOT** be processed)*

Is reason for request dealing with the Vulnerable Sector (the elderly, the disadvantaged, children)? Yes No

I hereby authorize York Regional Police to search for the following information in the National Repository of Criminal Records, based on my name(s) and date of birth:

- Records of criminal convictions for which a pardon has not been granted, and conditional and absolute discharges which have not been removed from the CPIC system in accordance with the *Criminal Records Act*.
- Wanted person information, which is information relating to a person who is arrestable and/or for whom a warrant has been issued.
- Accused person information, which is information relating to a person against whom criminal legal proceedings have been commenced and are in progress.
- Prohibitions and other judicial orders which are in effect.

I also certify that the information provided by me in this application is true and correct to the best of my knowledge and belief. I further acknowledge that records/information located may or may not pertain to me. Positive identification can only be confirmed through the comparison of fingerprints.

Applicant's Signature: _____

The information contained in the York Regional Police reply will be valid as of the date of the search, and will be released only to the subject/applicant.

Non-Refundable Fee: Employee \$40.00____ Student \$15.00____ Volunteer \$15.00____
(valid student card required)

Methods of payment: Certified cheque or money order payable to York Regional Police, Visa, Mastercard, debit card or cash

POLICE USE ONLY

Request and **fee** received by (Name): _____ Badge # _____

Date Processed: _____

Distribution: Original: Information Management

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