

**Consent for Check for a Sexual Offence for which a Record Suspension (Pardon) has Been Granted or Issued (Vulnerable Sector Verification)**

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|  | **PIB** | **CMP PPU 005** |
| **PIB** | **CMP PPU 030** |
| Reference Number  (to be completed by detachment) | | |

# Protected B once completed

**This form must be submitted with RCMP form 6388 - Consent for the Release of Police Information.**

This form is to be completed by an individual applying for a position with a person or organization responsible for the well-being of one or more children or vulnerable persons, if the position is a position of authority or trust relative to those children or vulnerable persons and the applicant wishes to consent to a search being made in criminal conviction records to determine if the applicant has been convicted of a sexual offence listed in the schedule of the *Criminal Records Act* and has been pardoned.

To be used only for organizations inside of Canada.

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| --- | --- | --- | --- |
| **Identification of the Applicant** | | | |
| Current Legal Surname (required) | Current Legal Given Name (required) | | |
| Gender  Male Female | Date of Birth (required; yyyy-mm-dd) | | |
| **Reason for the Consent** | | | |
| I am an applicant for a paid or volunteer position with a person or organization responsible for the well-being of one or more children or vulnerable persons. | | | |
| Title of the Paid or Volunteer Position | Name of the Person or Organization | | |
| Details regarding the responsibilities towards children or vulnerable persons | | | |
| Type of Position  Paid Position (fee enclosed) Processing Fees Volunteer Position (letter from non-profit organization attached) | | | |
| **Consent** | | | **Fingerprint** |
| I hereby consent to a search being made in the automated records retrieval system maintained by the Royal Canadian Mounted Police to find out if I have been convicted of, and been granted or issued a Record Suspension (Pardon) for, any of the sexual offences that are listed in the schedule of the *Criminal Records Act.*  I understand that if, as a result of giving this consent, a search discloses that there is a record of my conviction for one of the sexual offences listed in the schedule of the *Criminal Records Act* in respect of which a Record Suspension (Pardon) was granted or issued, that record shall be provided by the Commissioner of the Royal Canadian Mounted Police to the Minister of Public Safety, 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. If I further consent in writing to disclosure of that information to the person or organization referred to above that requested the verification, that information will be disclosed to that person or organization. | | | For card scan submissions only. |
| Contributing Agency | | |
| Signature of Applicant | | Date (yyyy-mm-dd) |
| **Verification** | | |
| Name of Verifier | | |
| Title | | Date Received (yyyy-mm-dd) | Finger |

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