

8. APPENDIX B – OWHA CRIMINAL OFFENCE DECLARATION FORM



ONTARIO WOMEN'S HOCKEY ASSOCIATION
225 Watline Ave., Mississauga, Ontario L4Z 1P3
www.owha.on.ca

CRIMINAL OFFENCE DECLARATION

Print Name: _____

Date of Birth: _____

Month/Day/Year

Telephone Number: _____

Email Address: _____

OWHA Referee Number: _____

Member: _____

Clinic Location: _____

Date: _____

Failure to execute this process will be in violation of the OWHA Screening Policy, this will mean that the official will be considered to be not in good standing and may be subject to further discipline.

I, _____

(Print Name)

hereby declare that:

I have no convictions for offenses under the Criminal Code of Canada as specified in the OWHA Screening Policy up to and including the date of this declaration for which a person has not been issued or granted under the Criminal Records Act (Canada).

I have no convictions for offenses in any other country up to and including the date of this declaration for which a pardon has not been issued or granted.

OR

I have the following convictions for offences under the Criminal Code of Canada as specified in the OWHA Screening Policy for which a pardon under the Criminal Records Act (Canada) has not been issued or granted:

I have the following convictions for offenses in another country up to and including the date of this declaration for which a pardon has not been issued or granted:

Supplementary Information, Including Outstanding Charges, Warrants or Orders.

DATE	LOCATION	CHARGE	DISPOSITION

Any questions can be directed to the OWHA office.

Signature of Applicant: _____

Date: _____