## **POLICE INFORMATION CHECK**

| IDENTIFICATION — one form must I<br>Type of ID Produced:  |  | Number:                                    |                   |                      |  |
|---|--|--|-------------------|----------------------|--|
| Type of ID Produced:  |  | Number:                                    |                   | 1 00                 |  |
|   |  | ONS FOR COMPLE                             |                   |                      |  |
| (PERSONAL INFORMATION ON T  | HIS FORM IS COLLECTI<br>PROTECTION OF PR               |  |                   |                      | OM OF INFORMATION AND  |
| Please complete clearly in ink  |  |  |                   | ,                    | ,  |
| You must apply in person at the Po Any applicable fee (see w One piece of photo identi                                | rebsite for costs and pay<br>fication and one piece of | yment options).<br>of (dentification verif | ving nam          | e and date of birth. |  |
| to submit fingerprints to   | confirm your identity.                                 |  | mergym y          | meek for purpose or  | employment, you wan need   |
| Your Police Information Check will i  THIS CHECK WILL NOT INCLUE  Checks of overseas or US Traffic Violation Tickets, | e:<br>• systems.                                       |  |                   | ,                    | records.   |
|   | e results of this check<br>th the exception of con     | firmed positive Vuln                       | erable Se         | ector responses)     | N :  |
| PART I - PERSONAL INFORMATION   | (COMPLETED BY APPL                                     | ICANT)                                     | 1 1 1 1 1 1 1 1 1 |                      |  |
| LAST NAME   | FIRST NAME   |  | MII               | DOLE NAME            |  |
| PREVIOUS NAMES (including name char   | nges and maiden name)                                  |  | ŀ                 |                      | SEX (circle one)   |
|   | <b>4</b>   |  |                   | •                    | M F  |
| DATE OF BIRTH (YYYY/MM/DD)  | PLACE OF BIRT  | н:   |                   | ,                    | 111  |
| ADDRESS (street # and name)   | CITY   |  | PROV              | POSTAL CODE          | CORTE DE LA COMPANSION DE |
| PHONE NUMBER (residence)  | PHÓN   | e numbér (celi)                            |                   | <u> </u>             | · cimer  |
| PREVIOUS ADDRESS (LIST ALL ADDR   | ESSES WITHIN THE LA                                    | ST FIVE YEARS)                             |                   |                      | *Check Completed<br>(office use only)  |
| STREET NAME:  | (  |  |                   | PROVINCE:            | _ pes = no   |
| TREET NAME:   | (  | CTTY:                                      |                   | PROVINCE:            | _ □ yes □ no   |
| STREET NAME:  | (  | CTTY:                                      | <u></u>           | PROVINCE:            | _ ⇔yes □ no  |
| STREET NAME;  | •  | TTY:                                       |                   | PROVINCE:            | _ ryes rano  |
| STREET NAME: ,  | (  | <u> </u>                                   |                   | PRÓVINĆE;            | _ = yes = no   |
| *If previous addresses were not checked   | i see attached instruction                             | ons for the applicant                      |                   |                      |  |
| REASON FOR APPLICATION (circle)   | one): Volunteer (attach                                | letter) - Employm                          | ent - O           | other (specify below | )  |
| NAME OF VOLUNTEER AGENCY OR   | EMPLOYER:  |  |                   |                      |  |
| IS YOUR REQUEST RELATED TO WO   | RK/VOLUNTEERING  | WITH VULNERAE                              | LE PER            | SONS: YES            | МО   |
| 4144  |  |  |                   | Page                 | -£   |

| WAIVER, RELEASE AND CONSENT:  I request and conpent to policy of economic and in the possession of any policy agency or contained in a court registry database. I understand and agree that search will report on the existence of any primary formula economic or periodicy agency or contained in a court registry database. I understand and agree that search will report on the existence of economic registry database. I understand and agree that search will report on the existence of economic registry database. I understand and agree that the policy including occurrences white no disriges have been laid, herital Health Act occurrence and provincing statutes. I was a constructive that the policy including occurrences white no disriges have been laid, herital Health Act occurred and provincing statutes. I was a constructive that the policy of the employer or voluntaer organization through its own background investigation and in accordance with human rights legislation and employment law.  I understand that information collected as a result of this policy information Check will only be released by  | Police Department Authorizing Signature   | Date Check Completed   |
|--|---|--|
| In request and consent to POLICE DEPARTMENT and its employees conducting a search with the information I have provided records and information in the possession of any policing agency or contained in a court registry database. I understand and agree described in the control of records and information in the possession of any policing agency or contained in a court registry database. I understand and agree described in the control of the destine of erospic provided significant in related to adverse contact with the policin industry of the policing formation related to adverse contact which the policin industry of the policing provided significant the policing information related to adverse contact with the policing information related to a provided a factual report on the results of the search and will not be responsible for determining whether the search and visit provided are one or will provide a factual report on the results of the search and will not be responsible for determining whether the search and visit provided and the termination through its own background investigation and in accordance with human rights legislation and employment last information collected as a result of this Police Information Check will only be released byPOLICE DEPARTMENT at semployees, agents and assigns, from any and all actions, dains and demands for losses and darrages, including indirect or consequential, that I might sested by responsible information check I understandPOLICE DEPARTMENT and its employees conducting searches and reporting on the results of information collected during his Police Information Check I understand   | Applicant, Name   | Applicant DOB  |
| request and consent to   | WATVER DELEASE AND CONCERN  |  |
| if records and information in the possession of any policing agency or contained in a court registry database. Indirestand and agine thet search will report on the existence of any formal criminal records or pending charges, as well as the existence of records including formation related to adverse contact with the police including occurrences where no charges have been laid, Mental Health Act occurrence in provincial statutes. I understand that erootic may continue to exist even if they are no longer included. I understand the  | VALVER, RELEASE AND CONSENT   | en in great dat growth of a street is the street and dispersion by the street at the street  |
| release thePOLICE DEPARTMENT its employees, agents and assigns, from any and all actions, calms and demands for losees of lamages, including indirect or consequential, the LT might sustain by reasonPOLICE DEPARTMENT and its employees conducting rearches and reporting on the results of information collected during this Police Information Check. I understandPOLICE DEPARTMENT cannot and does not guarantee the accuracy of the information I have provided or of the information to be disclosed. Certify that the information provided is true and correct to the best of my knowledge and belief. I have read and understood this form an consent to these terms by my signature.  Date Signed  ***********************************   | f records and information in the possession of any policing agen-<br>earch will report on the existence of any formal criminal records<br>normation related to adverse contact with the police including or<br>not provincial statutes. I understand that records may continue to<br>EPARTMENT will provide a factual report on the results of the se<br>re or are not relevant to my proposed employment or volunteer<br>rolunteer organization through its own background inves | ncy or contained in a court registry database. I understand and agree that or pending charges, as well as the existence of records including occurrences where no charges have been laid, Mental Health Act occurrences where no charges have been laid, Mental Health Act occurrences exist, even if they are no longer indicated. I understand thePOLIC earch and will not be responsible for determining whether the search result position. This determination must be made by the employer or   |
| lamages, including indirect or consequential, that I might sustain by reasonPOLICE DEPARTMENT and its employees conducting earches and reporting on the results of information can be described using this Police Information Check I understandPOLICE DEPARTMENT cannot and does not guarantee the accuracy of the information I have provided or of the information to be disclosed.  certify that the information provided is true and correct to the best of my knowledge and belief. I have read and understood this form an ansent to these terms by my signature.  Date Signature of Applicant  | understand that information collected as a result of this Police In<br>s employees directly to me and not to any third party.   | information Check will only be released byPOLICE DEPARTMENT a  |
| Date Signature of Applicant  Date Signed  ***********************************  | amages, including Indirect or consequential, that I might sustain<br>éarches and reporting on the results of information collected dur  | n by reasonPOLICE DEPARTMENT and its employees conducting<br>ring this Police Information Check. I understand POLICE   |
| VULNERABLE SECTOR APPLICANTS  FORM 1 - CONSENT FOR CRIMINAL RECORD CHECK FOR A SEXUAL OFFENCE FOR WHICH A PARDON HAS BEEN GRANTED OR ISSUED  This form is to be used by a person 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 to the Criminal Records Act and has been pardoned.  Reason for Consent: I am an applicant for a paid or volunteer position with a person or organization for the well-being of one or more children or vulnerable persons.  Description of the paid or volunteer position: (what will you be doing?)  Provide details regarding the children or vulnerable persons: (what ages & types of clients will you be in authority over?)  Consent: I consent to a search being made in the automated criminal records retrieval system maintained by the Royal Canadian Mounte Police to determine 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, in respect of which a pardon was granted or issued at a record may be provided by the Commissioner of the Royal Canadian Mounted Police to the Minister of Public Safety of Canada, who make record may be provided by the Commissioner of the Royal Canadian Mounted Police to the Minister of Public Safety of Canada, who make record may be provided by the Commissioner of the Royal Canadian Mounted Police to the Minister of Public Safety of Canada, who make record may be provided by the Commissioner of the Royal Canadian Mounted Police to the Minister of Public Safety of Canada, who make record may be provided by the Commissioner of the Royal Canadian Mounted Police to the Minister of Public Safety of Canada, who make record may be | certify that the information provided is true and correct to the bonsent to these terms by my signature.  | est of my knowledge and belief. I have read and understood this form ar  |
| FORM 1 - CONSENT FOR CRIMINAL RECORD CHECK FOR A SEXUAL OFFENCE FOR WHICH A PARDON HAS BEEN GRANTED OR ISSUED  This form is to be used by a person 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 to the Criminal Records Act and has been pardoned.  Reason for Consent: I am an applicant for a paid or volunteer position with a person or organization for the well-being of one or more children or vulnerable persons.  Description of the paid or volunteer position: (what will you be doing?)  Provide details regarding the children or vulnerable persons: (what ages & types of clients will you be in authority over?)  Provide details regarding the children or vulnerable persons: (what ages & types of clients will you be in authority over?)  Consent: I consent to a search being made in the automated criminal records retrievel system maintained by the Royal Canadian Mounte 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 ecord 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 Minister of Public Safety of Canada, who make not seem the information contained in that record to a police force or other authorized body. That police force or organization referred to above that requested the verification, that information will be disclosure of that information to the person or organization referred to above that requested the verification, that information will be disclosure of that information to the person or or | ignature of Applicant   | Date Signed  |
| FORM 1 - CONSENT FOR CRIMINAL RECORD CHECK FOR A SEXUAL OFFENCE FOR WHICH A PARDON HAS BEEN GRANTED OR ISSUED  This form is to be used by a person 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 to the Criminal Records Act and has been pardoned.  Reason for Consent: I am an applicant for a paid or volunteer position with a person or organization for the well-being of one or more children or vulnerable persons.  Description of the paid or volunteer position: (what will you be doing?)  Provide details regarding the children or vulnerable persons: (what ages & types of clients will you be in authority over?)  Provide details regarding the children or vulnerable persons: (what ages & types of clients will you be in authority over?)  Consent: I consent to a search being made in the automated criminal records retrievel system maintained by the Royal Canadian Mounte 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 ecord 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 Minister of Public Safety of Canada, who make not seem the information contained in that record to a police force or other authorized body. That police force or organization referred to above that requested the verification, that information will be disclosure of that information to the person or organization referred to above that requested the verification, that information will be disclosure of that information to the person or or | **************************************  | <b>*********************</b>   |
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| Description of the paid or volunteer position: (what will you be doing?)  Provide details regarding the children or vulnerable persons: (what ages & types of clients will you be in authority over?)  Consent: I consent to a search being made in the automated criminal records retrieval system maintained by the Royal Canadian Mounter Police to determine 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 Minister of Public Safety of Canada, who make the disclose all or part of the information contained in that record to a police force or other authorized body. That police force or authorized will then disclose the 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.  Signature of Applicant  Date Signature  | FORM 1 - CONSENT FOR CRIMINAL RECORD CHECHAS BEEN GRANTED OR ISSUED This form is to be used by a person applying for a position with a more children or vulnerable persons, if the position is a position of the applicant wishes to consent to a search being made in cr   | a person or organization responsible for the well-being of one or of authority or trust relative to those children or vulnerable persons riminal conviction records to determine if the applicant has been   |
| Provide details regarding the children or vulnerable persons: (what ages & types of clients will you be in authority over?)  Consent: I consent to a search being made in the automated criminal records retrieval system maintained by the Royal Canadian Mounts Police to determine 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 Minister of Public Safety of Canadia, who men 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 is the person or organization referred to above that requested the verification, that information will be disclosed to that person or organization.  Date Signature of Applicant  Date Signature of Applicant  |   | osition with a person or organization for the well-being of one or more  |
| Consent: I consent to a search being made in the automated criminal records retrieval system maintained by the Royal Canadian Mounts colice to determine 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 ecord 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 Minister of Public Safety of Canada, who make the part of the information contained in that record to a police force or other authorized body. That police force or authorized will then disclose the information to me. If I further consent in writing to disclosure of that information to the person or organization efferred to above that requested the verification, that information will be disclosed to that person or organization.  Signature of Applicant  Date Signed  | escription of the paid or volunteer position: (what will you be do  | oing?)   |
| Police to determine 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 Minister of Public Safety of Canada, who me 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 will then disclose the 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.  Signature of Applicant  Date Signed   | rovide details regarding the children or vulnerable persons: (wha   | at ages & types of clients will you be in authority over?)   |
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|  | olice to determine if I have been convicted of, and been granted<br>ne Criminal Records Act. I understand that as a result of giving t  |  |
| Pageof   | nat record may be provided by the Commissioner of the Royal Ca<br>nen disclose all or part of the information contained in that recor-<br>ody will then disclose the information to me. If I further consen   | this consent, if I am suspected of being the person named in a criminal $\epsilon$ Criminal Records Act in respect of which a pardon was granted or issued anadian Mounted Police to the Minister of Public Safety of Canada, who make the police force or other authorized body. That police force or authority in writing to disclosure of that information to the person or organization.   |
|  | nat record may be provided by the Commissioner of the Royal Ca<br>nen disclose all or part of the information contained in that recor-<br>ody will then disclose the information to me. If I further consen-<br>eferred to above that requested the verification, that information  | this consent, if I am suspected of being the person named in a criminal e Criminal Records Act in respect of which a pardon was granted or issued anadian Mounted Police to the Minister of Public Safety of Canada, who make the police force or other authorized body. That police force or authority in writing to disclosure of that information to the person or organization will be disclosed to that person or organization.   |

| Police Department Authorizing Signature   | Date Check Completed   |
|---|--|
| Applicant Name  | Applicant DOB  |
| OFFICE USE ONLY   | · · · · · · · · · · · · · · · · · · ·  |
| DISCLOSURE RESULTS OF CRIMINAL CONVICE  | CTION CHECK  |
| Records of criminal conviction for which a pardon has no<br>Centre (CPIC) National Repository for Criminal Records  | ot been granted, attainable through Canadian Police Information<br>Identification Data Bank  |
| RESULTS: CRIMINAL RECORD CHECK INFORMATION IS   | S BASED ON NAME AND DATE OF BIRTH ONLY   |
| NEGATIVE  | •  |
| Based solely on the name(s) and date of birth provided a of the RCMP National Repository of Criminal Records did not id applicant. Positive identification that a criminal record ma  | and the criminal record information declared by the applicant a search fentify any records for a person with the name(s) and date of birth of the ay or may not exist at the RCMP National Repository for Criminal In. Not all offences are reported to the RCMP National Repository of Criminal Initial record convictions that have not been reported.   |
| INCOMPLETE  |  |
| of the RCMP National Repository of Criminal Records <b>could not</b> have fingerprints submitted to the RCMP National Repository of fingerprint company. <b>Positive identification that a criminal</b>   | and the criminal record information declared by the applicant a search to completed. In order to complete the request, the applicant is required to Criminal Record by an authorized police service or accredited private if record may or may not exist at the RCMP National Repository for comparison. Not all offences are reported to the RCMP National Repository of eveal criminal record convictions that have not been reported.   |
| ☐ POSSIBLE MATCH - *SEE ATTACHED DECLARAT   | TION*  |
| Based solely on the name(s) and date of birth provided a of the RCMP National Repository of Criminal Records has result identification that a criminal record may or may not exist confirmed by fingerprint comparison. The declared criminal record may be recorded in the declared criminal record may be recorded in the declared criminal recorded in | and the criminal record information declared by the applicant a search ted in a possible match to a registered criminal record. Positive stat the RCMP National Repository for Criminal Records can only be pinal record does not constitute a certified criminal record by the pinal pinal record by the pinal pi |
|   |  |
| Vulnerable Sector Search  | • 1  |
| o A Vulnerable sector check was not requested   |  |
| $\ensuremath{\sigma}$ A vulnerable sector check for pardoned sexual offences was met with negative results  | s has been conducted based on a name, gender and date of birth and   |
| $\hfill\Box$ A vulnerable sector check was verified by fingerprints disclosed in accordance with Federal Laws.  | and name could not be associated to any records that may be  |
| o A vulnerable sector check was verified by fingerprints employer/agency as per Form 1 Consent (see page 2)   | and a pardoned record was disclosed to the requesting  |

| Police Department Authorizing Signature  | Date Check Com   | pleted   |                         |
|--|--|----------|-------------------------|
| Applicant Name   | Applicant DOB  |          |                         |
| THE  |  | , come   |                         |
| RESULTS OF POLICE INFORMATION CHECK  | (Office use Only)  | 4811A 24 |                         |
| INVESTIGATIVE DATA BANK, COURT AND LOCAL   | POLICE INDICES RES   | ULTS     | - 10 m                  |
| Records of outstanding criminal charges which the police agency is aware of or are indicated within the Investigative Data Bank of CPIC or any other available police computer systems (e.g. BC PRIME,   | negative – no infor<br>can be disclosed accordi<br>laws and policies |          | see attached disclosure |
| PIRS, CPIC, JUSTIN and PIP)  |  |          |                         |
| Records of conditional or absolute discharges located on police computer systems (e.g. BC PRIME, PIRS, CPIC, JUSTIN and PIP) This may also include stay of proceedings, Peace Bonds or other non-conviction information or convictions located on other police systems.  | negative – no infoncan be disclosed according laws and policies      |          | see attached disclosure |
| Police information located on computer systems (e.g. BC PRIME, PIRS, CPIC, JUSTIN and PIP) and information located through local police indices checks. This may include information related to adverse contact with the police including occurrences where no charges were laid, Mental Health Act occurrences and provincial statutes. | negative – no infor<br>can be disclosed accordi<br>laws and policies | j        | see attached disclosure |
| ****If the position involves operation of a<br>Superintendent of Motor Vehicles. This Poli-<br>tickets, Motor Vehicle Act or Municipal Byla  | e Information Chec<br>v offences****                                 |          |                         |
| See Next Page for Disclosures of above categori  | s if applicable.   | Page of  |                         |

| Police Department Authorizing Signature  | Date Check Completed   |  |
|--|--|--|
| Applicant Name   | Applicant DQB  |  |
|  |  |  |
| ADDITIONAL COURT OR OUTSTANDING C  | HARGES DISCLOSURE INFORMAT   | ION (if applicable)  |
| DATE CHARGE  | POLICE AGENCY  | DISPOSITION/RESULT   |
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| CONDITIONAL/ABSOLUTE DISCHARGES/S<br>INFORMATION (if applicable)   | STAY OF PROCEEDINGS/PEACE BO   | OND DISCLOSURE   |
| DATE CHARGE  | POLICE AGENCY  | DISPOSITION/RESULT   |
| DATE   | POLICE AGENCY  | DISPOSITION/RESULT   |
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| DISCLOSURE OF LOCAL POLICE IN  | IDICES DESCRIPTION OF EVENT  | POLICE AGENCY  |
| DATE APPLICANTS ROLE   | DESCRIPTION OF EVENT   | POLICE AGENCY  |
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| ice Department Authorizing Signature   | Dat  | e Check Completed   |
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| plicant Name   | Арр  | dicant DOB  |
| ·  |  |   |
| LARATION OF A CRIMINAL R   | ECORD (if applicable)  | - Completed by Applicant  |
| Applicant should:  |  |   |
| Identify all Indictable Offence Convi  | ctions and Summary Offence (   | Convictions   |
| Identify the offence, date of sentence   | e conviction, and place where o  | ffence was committed  |
| <b>Do Not</b> disclose offence convictions <i>ct</i>   | for which the applicant has rec  | eived a pardon, pursuant to the <i>Criminal I</i>   |
| <b>Do Not</b> disclose offence convictions person" (twelve years old but less the  |  | an offence committed while you were a '<br>at to the <i>Youth Criminal Justice Act</i>  |
| THIS DECLARATION MAY NO  | T CONTAIN ALL CRIMI  | NAL RECORDS OF CONVICTIO  |
| Offence  | Date Of Sentence   | Place of Sentence   |
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| Applicants Signature:  |  | Date:   |
| Applicants Signature:  |  | Date:   |
| is declaration is confirmed as of dat  | te stamped below by a nam  | e and date of birth inquiry of the Nat  |
| is declaration is confirmed as of dat<br>ository of Criminal Records This dec  | laration does not constitute a C   |   |
| is declaration is confirmed as of dat<br>ository of Criminal Records This dec<br>drilinal Record can only be issued based<br>AYS MAY EXIST BETWEEN A CONVICTIO | laration does not constitute a C<br>on the submission of fingerprin<br>Records.                              | e and date of birth inquiry of the Nat<br>ertified Criminal Record by the RCMP. A C<br>is to the RCMP National Repository of Cri<br>AND THE DETAILS BEING ACCESSIBLE. |
| is declaration is confirmed as of dat<br>ository of Criminal Records This dec<br>drilinal Record can only be issued based<br>AYS MAY EXIST BETWEEN A CONVICTIO | laration does not constitute a C<br>on the submission of fingerprin<br>Records.<br>ON BEING RENDERED IN COUR | e and date of birth inquiry of the Nat<br>ertified Criminal Record by the RCMP. A C<br>is to the RCMP National Repository of Cri<br>AND THE DETAILS BEING ACCESSIBLE. |