



GREATER SUBBURY POLICE SERVICE REQUEST FOR CLEARANCE LETTER/VISA

Please Print

SURNAME		MAIDEN NAME	
GIVEN NAME(S)		GENDER	
		<input type="checkbox"/> Male <input type="checkbox"/> Female	
DRIVER'S LICENCE NUMBER			
DATE OF BIRTH (DD/MM/YY)		TELEPHONE NUMBER	
STREET ADDRESS		CITY	POSTAL CODE
SIGNATURE OF REQUESTOR		DATE OF REQUEST	
IDENTIFICATION VERIFIED BY		EMPLOYEE NUMBER	

SCREENING FOR VULNERABLE SECTOR

IF YOU ARE APPLYING FOR AN INTERNATIONAL ADOPTION OR A POSITION, WHICH REQUIRES A VULNERABLE SECTOR CHECK, **THIS FURTHER CONSENT IS REQUIRED.**

I FURTHER CONSENT TO A SEARCH BEING MADE IN THE AUTOMATED CRIMINAL RECORDS RETRIEVAL 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 SERVICE OR OTHER AUTHORIZED BODY. THAT POLICE SERVICE OR AUTHORIZED BODY WILL THEN DISCLOSE THAT INFORMATION TO ME.

SIGNATURE OF APPLICANT _____

DATE _____

NOTE: Completed Clearance Letter/Visa check must be picked up within 3 months from date of request or it will be destroyed. Afterwards, any new request shall be subject to the fee in place at the time of the new request.