Consent for Criminal Records Search

Full Name : _____

Surname, Given Name

Place of Birth : _____

City, Province, Country

Other Names : _____

(maiden, birth, aliases)

Birth Date : _____

(Year/Month/Day)

Current Address : _____

_____

Whereas I am interested in being considered for a sensitive position of trust with vulnerable individuals in Orchard Valley United Church, and I am required by Orchard Valley United Church to disclose whether or not I have any convictions or have been charged under any federal or provincial enactment:

And whereas I understand that disclosure of a criminal record may not necessarily preclude me from performing the duties I am interested in:

And whereas I understand that, if Orchard Valley United Church should decide any conviction or charge disclosed might preclude me from being involved, I will be given an opportunity to see and discuss that criminal record to determine whether or not my criminal record indicated that I present a risk to participants:

I therefore authorize the (relevant police service) to determine whether or not I have a criminal record and to make to Orchard Valley United Church a full and complete disclosure of any record they may find. I understand that I may be fingerprinted to verify a criminal record

_____ _____

Signature Date