



**FOR INDIVIDUAL SUBMISSION**

**Enhanced Police Records Check & Vulnerable Position Screening**

The results of this background check apply only to the position specified on this application. If a specific position has not been indicated the results of this background check will have been determined at the highest risk level to the vulnerable sector.

A written letter from the employer or Volunteer Organization should accompany this submission and confirm the individual is a Volunteer or employee. The applicant's responsibility is to ensure a response is provided for questions #7 to #14 below. If a response is not received for any of the questions then a 'risk assessment' will be completed at the highest risk level to the vulnerable sector.

**Applicant Details**

- 1. Last Name: \_\_\_\_\_ Given Names: \_\_\_\_\_  
Maiden Name: \_\_\_\_\_ Other surname or given names you have used since your birth which include name changes: \_\_\_\_\_
- 2. Sex (M/F): \_\_\_\_ 3. Date of Birth(yyyy//mm/dd): \_\_\_\_\_ Birth Place: \_\_\_\_\_
- 4. Photograph identification: Drivers License # \_\_\_\_\_ Passport # \_\_\_\_\_  
BC ID # \_\_\_\_\_ Other ID # \_\_\_\_\_ Phone # \_\_\_\_\_
- 5. Current Address: \_\_\_\_\_
- 6. Previous Addresses (over past 5 years) A): \_\_\_\_\_  
B) \_\_\_\_\_  
C) \_\_\_\_\_

**Business or Volunteer Organization Details \*\* MUST BE COMPLETED \*\***

This application is being made for the position of: \_\_ Coach / Manager \_\_\_\_\_ with  
(Name of Business or Volunteer Organization) \_\_ Port Moody Soccer Club \_\_\_\_\_  
Contact Person at this Business or Volunteer Organization is: \_\_ Dina McMahon \_\_\_\_\_  
Contact Address: \_\_ 119-255 Newport Drive, Port Moody, BC V3H 5H1 \_\_\_\_\_ Contact Phone: \_\_ 604-469-1870 \_\_\_\_\_

I, the applicant, certify that the above information is true and accurate.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Work / Volunteer Environment Details \*\* MUST BE COMPLETED \*\***

- 7. Which of the vulnerable sectors will the Applicant be working/volunteering with? (check all that apply)  
 Children  Elderly  Physically Disabled  Mentally Disabled  Infirm  Other \_\_\_\_\_
- 8. Will there ever be any possibility the applicant will be alone with the vulnerable person? (check all that apply)  

Applicant's home	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Private interview room	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Vulnerable person's home	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Unsupervised setting	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Classroom	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Field trips	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Overnight sleepovers	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Other (please describe)	__ Soccer field / School gym _____	
- 9. Will the applicant be responsible for the safety or well being of a vulnerable person?  Yes  No
- 10. Will the applicant be in a position of trust or influence over the vulnerable persons?  Yes  No
- 11. Any possibility the applicant will be transporting the vulnerable person in a vehicle?  Yes  No
- 12. What activities will the applicant be engaged in with the vulnerable person? (check all that apply)  
Counseling  Yes  No    Coaching  Yes  No    Teaching  Yes  No    Babysitting  Yes  No  
Other (please describe) \_\_\_\_\_
- 13. Will the applicant have access to, be handling or administering any medication?  Yes  No
- 14. Will the applicant be handling any money, credit cards, or debit cards?  Yes  No

## **GENERAL NOTICE:**

All police record checks will be based on the information and identification provided by the above noted applicant. In conducting these background checks, the following police and government information systems will be checked:

- 1 ) Royal Canadian Mounted Police's PIRS system;
- 2) Police Record Information Management Environment of British Columbia (PRIME-BC (all police agencies records in British Columbia);
- 3) Police Information Portal (PIP) (access RCMP and most Canadian police agencies outside of British Columbia);
- 4) Canadian Police Information Center (CPIC) (database containing all Warrants & Criminal Records);
- 5) Justice Information System (JUSTIN) of British Columbia;
- 5) Insurance Corporation of British Columbia Drivers License database; and
- 6) Vancouver Police Department (pre-PRIME-BC).

NOTE: No police agencies outside of Canada will be checked unless specifically required or requested.

NOTE: No details of the background check will be given to the Business or Volunteer organization.

## **CONSENT TO DISCLOSE**

I authorize the Port Moody Police Department to conduct a background check on myself by checking all the above noted police and government databases.

The primary purpose of this background check is to determine my suitability in working with vulnerable individuals and/or in positions of trust. I am also aware that vulnerable individuals are defined in Section 6.3 (1) of the Criminal Records Act as individuals "*who, because of their age (under 18 years old), a disability or other circumstances, whether temporary or permanent,*

(a) *are in a position of dependence on others; or*

(b) *are otherwise at a greater risk than the general population of being harmed by persons in a position of authority or trust relative to them."*

I understand that all police contacts will be examined based on the nature of this background check. At the conclusion of this background check, the Port Moody Police Department will conduct a 'risk assessment' based on questions #7 to #14. This assessment will determine if I was a suspect of any police investigations and/or convicted of a matter which is deemed job related.

Based on this 'risk assessment,' the Port Moody Police Department will provide me a letter. This letter will outline whether I am a "PERSON OF CONCERN" or "NOT A PERSON OF CONCERN." This rating will reflect if I was listed as a suspect in a job related offence. The same letter will also provide me a rating on whether I "MAY" or "MAY NOT" have a Criminal Record which is deemed work related. These ratings will be based on whether I have been a suspect and/or convicted in a job related offence within a relevant timeframe as defined by the volunteer organization or business.

In cases where there is an indication that I "MAY" have a Criminal Record which is job related, this Criminal Record can only be confirmed through the submission of my fingerprints. In taking and submitting your fingerprints, I agree to pay an additional \$40.00. I also understand that these fingerprints will be forwarded to the RCMP in Ottawa and who will conduct a fingerprint comparison. After the RCMP completes their comparison, the RCMP will forward directly to me a document certifying whether I have a Criminal Record or not.

If I disagree with the findings of the background checks then I can seek clarification and/or request changes. I have this right to do so under Section 29 of the provincial Freedom of Information and Protection of Privacy Act. Section 29 states: "*Applicant who believes there is an error or omission in his or her personal information may request the head of the public body that the information in its custody or under its control to correct the information."*

I acknowledge and understand that the Port Moody Police Department is not making a recommendation for or against my suitability for employment or volunteering. This determination shall be the sole responsibility of the employer or volunteer organization requiring this Police Records Check to be completed. I also acknowledge that the Port Moody Police Department bears no liability for me not receiving a job or volunteer work based on this Police Records Check. The Port Moody Police Department provides this background check on the basis that information is accurate as contained in the various police information systems it checks.

Applicant's

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This consent shall remain in effect for a period of 30 days from the date indicated in this box.

This page **MUST** be signed if the applicant will be in contact with one of the types of vulnerable individuals:

- Children   
  Elderly   
  Physically Disabled  
 Mentally Disabled   
  Infirm   
  Other \_\_\_\_\_

I consent to a search being made in the automated Criminal Retrieval System 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 consent to a search being made in criminal conviction records. Some of these sexual offences are listed below and the full listing of offence can be viewed at <http://laws.justice.gc.ca/en/showdoc/cs/C-47/sc:1/en#anchorsc:1>

Sexual offence against a child by an act or omission outside of Canada	Sexual interference with a person under the age of 14
invitation to a person under 14 to sexual touching	Sexual exploitation of a person 14 or more but under 18
sexual exploitation of a person with a disability	Incest
Anal intercourse	Bestiality in the presence of a person under 14 or inciting a person under 14 to commit bestiality
Obscene materials & Child pornography	Parent or guardian procuring sexual activity
Householder permitting sexual activity	Corrupting children
Indecent acts	Living on avails of prostitution of a person under 18
Obtain, or attempt to obtain, sexual services of a person under 18	Sexual assault
Removal of child under 14 from Canada for purposes of listed offences	Abduction of a person under 16
Indecent phone calls	Breaking and entering a place with intent to commit in that place an indictable offence listed in this schedule

I understand that, as a result of giving this consent, if I am suspected of being the person named in the 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 force or other authorized body. The police force or authorized body will then disclose the information to me.

Applicant's  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This consent shall remain in effect for a period of 30 days for the date indicated in this box.

<b>Fee Charged:</b>	<b>PAID BY</b>
Cash	
Debit	
Volunteer	

PORT MOODY POLICE USE ONLY		
Databases	Checked	Results
RCMP PIRS		
PIP/LEIP		
PRIME-BC		
CPIC		
ICBC - MVB		
JUSTIN		
Vancouver PD (Pre-PRIME-BC)		