



CONSENT FOR CRIMINAL RECORD CHECK

Please sign and return with your application. Holland College Atlantic Police Academy conducts criminal record checks on all students prior to admission to the Police Science program. This is in addition to the Criminal Record Check (RCMP GRC 3584 form) you are required to submit from local police or RCMP with your application.

I, the undersigned, authorize the Atlantic Police Academy to conduct a Records Check with any law enforcement or other agency to determine whether there are convictions or contraventions recorded.

I hereby expressly consent to and authorize all such police law enforcement or other agencies to release any information they have on record relating to criminal convictions, contraventions, charges, court orders or dispositions, or other relevant information related to the undersigned.

I further acknowledge that I have read and understood the foregoing consent and authorization.

Dated this _____ day of _____, 20____ _____
Signature of Applicant

Please print following information clearly

Full Name of Applicant _____

Maiden Name or previous legal name(s) _____

Date of Birth _____ Sex _____ Height _____ Eye colour _____

Current Address _____

Previous Address _____

This section for use by the Atlantic Police Academy

RESULTS

Based on the information received there is no record identified. Negative

There may or may not be a record in existence. Possible

DATA SYSTEMS CHECKED:

Please check appropriate responses

PORS	<input type="checkbox"/>	INDICES	<input type="checkbox"/>
CPIC	<input type="checkbox"/>	JIS	<input type="checkbox"/>
PIRS	<input type="checkbox"/>	OTHER	<input type="checkbox"/>

Signature of Officer Conducting Checks

Date