



Criminal Records Screening Certificate

(Pending Investigations/Charges)

Note: This form is used when applying for a position where a vulnerable sector check is **not** required but a search of current investigations and present and or pending charges is required.

Please select your location

- ☐ Northeast Avalon
- ☐ Corner Brook Region
- ☐ Labrador West

Identification of Applicant

Last Name:*

First Name*

Second Name

Third Name

Maiden / Other Names
(Your last name at birth)

Gender*

City/Town/Province of Birth*

Date of Birth*

Telephone Number

Email

Residential Address

Street Address*

Apt/Unit

City/Town*

Province*

Postal Code*

Mailing Address*(if different from residential address)*

☐ Same as Residential Address

Street Address*

Apt/Unit

City/Town*

Province*

Postal Code*

Have you been convicted of any offence for which a Record Suspension (formerly pardoned) has not been granted?*

- ☐ YES If yes, please provide details:
- ☐ NO

Have you ever changed your identity?*

- ☐ YES If yes, please provide all current and former legal names:
- ☐ NO

Have you ever been prohibited by any court from processing any firearm, ammunition, or explosive substance?*

- ☐ YES If yes, please provide details:
- ☐ NO

Reason for Request:*

- ☐ Required For Volunteer Position
- ☐ Required For Employment
- ☐ Required by Statute or Regulation
- ☐ Required For License
- ☐ Other

Name of the organization requesting the Criminal Records Screening Certificate

Description of the paid or volunteer position

Organization Contact Information

Contact Person* _____

Contact Telephone* _____

Contact Mailing Address

Street Address* _____

Apt/Unit _____

City/Town* _____

Province* _____

Postal Code* _____

Consent

I hereby consent that a search of your records be conducted to determine if there are any criminal convictions or criminal findings of guilt related to me in your records. In making this application, I agree to allow the Police Service to extend the search to include current investigations and present and or pending charges. I acknowledge that the Royal Newfoundland Constabulary cannot guarantee that a search for criminal records and criminal findings of guilt will capture every conviction or finding of guilt. I agree that no liability attaches to the Royal Newfoundland Constabulary in relation to this search. I further agree that the Royal Newfoundland Constabulary is not responsible for any inaccuracies resulting from the search.

| | |
|-----------|-------|
| Signature | Date |
| _____ | _____ |

Privacy Statement: The personal information collected in this form will be used only for the administration of those programs provided by the Government of Newfoundland and Labrador for which the supplier is a participant. This information is being collected in accordance with section 61(c) of the Access to Information and Protection of Privacy Act, 2015 (ATIPPA, 2015). All information provided will be maintained in a secure manner and confidentiality will be protected, as required by the ATIPPA, 2015. For questions or comments related to the protection of your personal privacy, please e-mail RNCATIPP@rnc.gov.nl.ca.