



THIS FORM MUST BE COMPLETED IN ORDER TO RECEIVE A COPY OF THE ADULT CRIMINAL CONVICTIONS AND ASSOCIATED INFORMATION FROM THE RCMP NATIONAL REPOSITORY OF CRIMINAL RECORDS

LAST NAME		FIRST NAME		MIDDLE NAME(S)			
MAIDEN NAME OR OTHER NAMES USED			GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		DATE OF BIRTH Y Y M M D D		
CURRENT ADDRESS (NUMBER, STREET, APT / UNIT,			CITY		PROVINCE		POSTAL CODE

DECLARATION OF CRIMINAL RECORD

- DOES NOT CONSTITUTE A CERTIFIED CRIMINAL RECORD BY THE RCMP
- MAY NOT CONTAIN ALL CRIMINAL RECORD CONVICTIONS

DO NOT DECLARE:

- ABSOLUTE DISCHARGES OR CONDITIONAL DISCHARGES, PURSUANT TO THE CRIMINAL CODE, SECTION 730.
- ANY CHARGES FOR WHICH YOU HAVE RECEIVED A PARDON, PURSUANT TO THE CRIMINAL RECORDS ACT.
- ANY OFFENCES WHILE YOU WERE A "YOUNG PERSON" (TWELVE YEARS OLD BUT LESS THAN EIGHTEEN YEARS OLD), PURSUANT TO THE YOUTH CRIMINAL JUSTICE ACT.
- ANY CHARGES FOR WHICH YOU WERE NOT CONVICTED, FOR EXAMPLE, CHARGES THAT WERE WITHDRAWN, DISMISSED, ETC.
- ANY PROVINCIAL OR MUNICIPAL OFFENCES.
- ANY CHARGES DEALT WITH OUTSIDE OF CANADA.

NOTE: A CERTIFIED CRIMINAL RECORD CAN ONLY BE ISSUED BASED ON THE SUBMISSION OF FINGERPRINTS TO THE RCMP NATIONAL REPOSITORY OF CRIMINAL RECORDS.

OFFENCE	DATE OF SENTENCE	LOCATION

APPLICANTS SIGNATURE