



# UCCM Anishnaabe Police Service Police Constable Application Form



Pursuant to S. 39(2) of the Freedom of Information and Protection of Privacy Act, you are hereby notified that information about you, including academic, employment, medical, physical, financial, character and personal data is being collected during the recruitment process for the purpose of assessing your qualifications in relation to your applications in relation to your applications for employment. Please address any questions concerning the collection of this information to the Chief of Police, UCCM Anishnaabe PS, 5926 Highway #540, PO Box 332, M'Chigeeng First Nation, Ontario, P0P 1G0 or contact directly at (705) 377-7135.

SURNAME	GIVEN 1	GIVEN 2
ADDRESS (Street, P.O. Box, Lot/Concession)	CITY	POSTAL CODE
D.O.B.:    _____	Driver's License No.: _____	
M          D          Y		
HOME PHONE	CELLULAR PHONE	BUSINESS PHONE
EMAIL ADDRESS		

**Briefly explain why you would like to be a member of the UCCM Anishnaabe Police Service:**

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Are you a Canadian citizen or permanent resident?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you possess a valid driver's license that permits you to drive an automobile in Ontario with full driving privileges, and do you have no more than 6 (six) demerit points?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you at least 18 years of age?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you successfully completed four years of secondary school education and do you possess an O.S.S.D.?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been convicted (includes absolute and conditional discharges) of any criminal offence for which a pardon was not granted?	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Are you able to meet the physical demands of police duty?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

**Education, Credentials, Involvements**

Secondary school:	Highest grade completed?	Diploma received?
College:	Name and length of program:	Diploma received?

University:	Name and length of program:	Diploma received?
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### Financial Position

Have you any loan, debt (including credit card), garnishee, wage assignment or judgement pending against you?					Yes <input type="checkbox"/>	No <input type="checkbox"/>
					(If yes, give details)	
Name and complete address of Creditor	Type: Debt, Garnishee, Judgement, etc.	When incurred	Original Amount	Present Amount	Monthly Amount	Amount Arrears

Have you ever been sued for non-payment of a debt? (If yes, give details) Yes  No

**NOTE:** Individuals who submit false information, or do not meet the requirements can be disqualified from further consideration for employment, or dismissed, if already employed.

Notice: Personal Information on this form is collected under the authority of the Police Services Act, S38, S43 & S53 and will be used to determine eligibility for employment. Questions about this collection of personal information should be directed to the address below.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**All applications must include:**

1. Completed UCCM Anishnaabe Police Service Application Form, including the Consent and Release of Liability Form
2. Resume, including:
  - Covering letter
  - Detailed employment history, along with Supervisor name and telephone number
  - Detailed education history (high school and post-secondary)
  - Detailed volunteerism history
3. Copy of OACP Certificate of Results (Constable applicants only)
4. Copies of formal education transcripts/diplomas
5. 4 letters of reference – 3 work-related, 1 character reference
6. Copies of Standard First Aid Certificate and CPR (Level C) Certificate

Interested applicants should forward their complete package to:

**Confidential:**  
 UCCM Anishnaabe Police Service – Police Constable Position  
 5926 Highway 540, P.O. Box 332  
 M'Chigeeng, ON P0P 1G0



# Consent and Release of Liability Form

## CONSENT/ASSESSMENT:

I authorize the UCCM Anishnaabe Police Service, to which I have submitted an application to be hired as a Police Constable, to request and obtain personal information about me as described below from any or all of the following individuals or entities:

- The Ontario Ministry of Transportation, which maintains driving records of Ontario residents;
- Any Ontario police service or law enforcement agency, which may hold personal information about me;
- The Canadian Police Information Centre (CPIC), which is owned by the RCMP, and which maintains a computerized system to provide law enforcement agencies with information on individuals with criminal records;
- Any health care practitioner (including doctors, nurses, psychologists and their agents) who have provided me with health care treatment, either as part of this constable selection process or otherwise;
- Any previous employer who may hold personal information about me;
- Any consumer reporting agency, which maintains credit or other personal information about a consumer;
- The Ontario and National Sex Offender registry;
- Any educational institution in which I have been, or am currently, enrolled and which has information about me, including my grade or performance results; and,

I further acknowledge that any of the above-noted individuals or entities may disclose information to the UCCM Anishnaabe Police Service, to which I have submitted an application any or all of the following records, including any parts of the following records:

- Academic records and transcripts;
- Employment records (Police Service and other), including performance evaluation / reviews, discipline, complaint and attendance information;
- Police records and history of law involvement, including criminal and provincial reports and convictions, and intelligence information;
- Police service applications;
- Medical information;
- Background and security checks (including CPIC, NCIC, Interpol, etc.);
- Financial information, including credit bureau check;
- Driving record;
- Physical, psychological, visual, aptitude and other employment-related tests, including but not limited to MMPI-2 -questions, answers and scores, and the interview notes, summaries, opinions, assessments and evaluations of psychologists;
- Social networking sites;
- Applicant survey information; and,
- Training records.



## Consent and Release of Liability Form

I understand this information will be used to assess my suitability in relation to my possible employment with the UCCM Anishnaabe Police Service. I understand that all information about me that is obtained during the background and security clearance investigation may be disclosed by the UCCM Anishnaabe Police Service, to those involved in my employment decision, for the purpose of making a decision with respect to my background and security clearance, or for a consistent purpose.

I understand that any information released by any police service, employer (previous or current), organization, business or person to whom a signed copy, facsimile transmittal or a photocopy of this authorization thereof is delivered will be held in strictest confidence, that it will be viewed only by those involved in my employment decision, and that neither I nor anyone else not so involved will have the right to see the information.

### **RELEASE OF LIABILITY:**

By signing this form, I agree that in consideration for applying to be a Police Constable with the UCCM Anishnaabe Police Service, I hereby release and forever discharge all of the individuals, entities, and classes of individuals and entities referred to on this form, and their agents, licensees, employees, directors, officers, and subcontractors, including but not limited to Her Majesty the Queen in Right of Ontario, UCCM Anishnaabe Police Services Commission, the United Chiefs and Council of Mniidoo Mnising and their respective agents, licensees, employees, directors, officers, and subcontractors, from any and all actions, causes of action, claims, demands, and remedies, for any and all damages, losses, injuries and expenses of any nature or kind howsoever arising, which hereafter may be sustained by me in connection with the collection, use, and disclosure of information about me in accordance with the consents provided by me in this form, and from the use or reliance upon information about me obtained in accordance with these consents.

And, I further agree that this Release of Liability shall apply to and be binding on my heirs, administrators, executors, and assigns and each of them.

I have read all pages of this Consent and Release of Liability Form, and by signing below, I certify that I understand its content, agree to its terms, and am at least eighteen (18) years of age.

Lastly, I confirm that I am signing this Consent and Release of Liability Form, voluntarily.

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Candidate's Name (Please Print)

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Signature of Candidate

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Name of Witness (Please Print)

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Signature of Witness

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Date