



**UCCM
ANISHNAABE
POLICE**

Constable Application

Checklist of Mandatory Application Documents

Surname: _____

First Name: _____

Middle Name(s): _____

The following list of documents **must** be included with your application package. Applications received missing **any** of the documents indicated below will not be accepted. You will be required to re-submit the **entire** completed package. This checklist **must** be submitted with your application package as well. **Please do not submit binders or folders or hard copy applications.**

	Completed Checklist of Mandatory Application Documents (<i>this page</i>)
	Cover Letter and Resume
	Completed Police Constable Application Form
	McNeil Report (<i>Experienced Constables Only</i>)
	Completed Vision and Hearing Forms (<i>the forms must be notarized by a licensed practitioner</i>)
	Three (3) letters of reference - 2 work related and 1 character reference
	Copy of Emergency or Standard First Aid Certificate and CPR Level "C" Certificate
	Copy of Driver's Licence
	Proof of successful completion of four (4) years of Ontario Secondary School Education or Equivalency (<i>copies of diploma or transcripts required</i>)
	Proof of any Post-Secondary Education or Equivalency (<i>copies of diploma or transcripts required</i>)
	Completed Authorization for Release of Information (<i>the final four pages of this document</i>)



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APPLICATION Position of Constable or Recruit

IMPORTANT

1. Carefully review and follow application instructions included in this application form.
2. Please print clearly, complete fully, and use additional paper if space is insufficient.
3. Forward completed application form to the UCCM Anishnaabe Police Service, 5926 Highway 540, M'Chigeeng, ON P0P 1G0, Attention Human Resources or email to recruitment@uccmpolice.com

Personal Information

Legal Last Name	Legal Given Name (1)	Given Name (2)	
Complete Address (including Number, Street, Apt. Number, Lot, Concession, Rural Route #)			
City or Town	Province	Postal Code	
Phone Number			
Email Address			

	YES	NO
Are you at least 18 years of age?		
Have you successfully completed at least 4 years of secondary school or equivalent?		
Are you legally eligible to work in Canada?		
Are you a Canadian Citizen or permanent resident of Canada?		
Do you possess a valid "G" driver's licence that permits you to drive an automobile in Ontario with full driving privileges?		
Have you ever been convicted of any criminal offence for which a pardon has not been granted or issued? (This means any fine, period of imprisonment, or period of probation offered by the court.)	N/A	
If you were previously convicted under a federal statute, have you been granted or issued a pardon; or in the event of a discharge related to a finding of guilt, have the records been sealed by the R.C.M.P.?	N/A	
Do you possess a valid C.P.R. certificate? If yes , please provide the expiry date. If no , please provide date of scheduled training.		
Do you possess a valid first aid certificate? If yes , please provide the expiry date. If no , please provide date of scheduled training.		

Education

Secondary School Attended	Highest Grade or Level Completed <i>(If applicable, attach equivalency certificate)</i>
Type of Certificate or Diploma Obtained	

Business, Trade or Technical School Attended		
Course Name	Length of course in years	Number of years completed
Licence, Certificate or Diploma Awarded Yes <input type="checkbox"/> No <input type="checkbox"/>	Type of Award <i>(i.e., Certificate – Medical Receptionist)</i>	

Community College Attended		
Program Name	Length of program in years	Number of years completed
License, Certificate or Diploma Awarded Yes <input type="checkbox"/> No <input type="checkbox"/>	Type of Award <i>(i.e., Ontario College Diploma – Police Foundations)</i>	

University Attended		
Major Area of Study	Length of program in years	Number of years completed
Degree Awarded Yes <input type="checkbox"/> No <input type="checkbox"/>	Type of Degree Awarded <i>(i.e., Bachelor of Arts – Geography)</i>	

Other relevant Courses, Workshops, Seminars, Training, Licences, Certificates or Degrees

Employment History

1. Beginning with your most recent employer and continuing in reverse time order, list and describe every position you have held since the beginning of your work experience. If you have held two or more positions with the same employer, list and describe each position separately. Include military, part-time and summer employment (attached additional sheets as required).
2. Is your current employer(s) aware you are seeking employment? Please be advised they may be contacted at a later point in the selection process.

Present or Previous Employer		Full-Time
		Part-Time
Telephone Number	Date Employed: From	To:
Complete Mailing Address <i>(Include Postal Code)</i>		
Supervisor's Name and Title		Applicant's Position/Title
Brief Description of Duties		
Reason for Leaving		
Present or Previous Employer		Full-Time
		Part-Time
Telephone Number	Date Employed: From	To:
Complete Mailing Address <i>(Include Postal Code)</i>		
Supervisor's Name and Title		Applicant's Position/Title
Brief Description of Duties		
Reason for Leaving		
Present or Previous Employer		Full-Time
		Part-Time
Telephone Number	Date Employed: From	To:
Complete Mailing Address <i>(Include Postal Code)</i>		
Supervisor's Name and Title		Applicant's Position/Title
Brief Description of Duties		
Reason for Leaving		

Community Involvement

Note: List all activities that you have volunteered for (did not receive compensation) and where, by volunteering, you gave of your time for a purpose or a cause that benefited a particular individual, group, or community (attach additional sheets as necessary).

Present or Previous Organization			
Your Position		Dates	From:
			To:
Hours	Total Volunteer Hours		Currently Active
Per: <input type="text"/> Week <input type="text"/> Month			Yes <input type="checkbox"/> No <input type="checkbox"/>
Contact Person for verification		Name:	
		Phone Number:	
Brief Description of Duties			
Reason for Leaving			
Present or Previous Organization			
Your Position		Dates	From:
			To:
Hours	Total Volunteer Hours		Currently Active
Per: <input type="text"/> Week <input type="text"/> Month			Yes <input type="checkbox"/> No <input type="checkbox"/>
Contact Person for verification		Name:	
		Phone Number:	
Brief Description of Duties			
Reason for Leaving			
Present or Previous Organization			
Your Position		Dates	From:
			To:
Hours	Total Volunteer Hours		Currently Active
Per: <input type="text"/> Week <input type="text"/> Month			Yes <input type="checkbox"/> No <input type="checkbox"/>
Contact Person for verification		Name:	
		Phone Number:	
Brief Description of Duties			
Reason for Leaving			

Have you ever applied to any other police service(s)?		YES	NO
If yes, complete the following:			
Name of Service	Date(s)	Is your application currently active?	
1.		YES	NO
2.		YES	NO
3.		YES	NO
4.		YES	NO
<p>Declaration: I hereby declare that the foregoing information is true and complete to the best of my knowledge. I understand that a false declaration may disqualify me from further consideration for employment or result in dismissal should I be appointed as a police constable / recruit. It is understood and accepted that I am involved in a competitive process and that I may be declined at any stage of the process.</p>			
Applicant's Signature:		Date:	

Please Note: personal information which may include academic, employment, medical, physical, financial, character and other personal data is being collected during the recruitment process under the authority of the police services act sections 38, 43 and 53, for the purpose of assessing your suitability for employment.

Questions about this collection should be directed to the Human Resources Department, UCCM Anishnaabe Police Service, 5926 Highway 540, M'Chigeeng, Ontario, P0P 1G0, (705) 377-7135 or email at recruitment@uccmpolice.com



**UCCM
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CONSENT AND RELEASE OF LIABILITY FORM

LAST NAME, First Name

Please read the following form carefully.

The purposes of parts A and B of this form are to authorize the UCCM Anishnaabe Police Service and other individuals, and entities noted below to **collect, to use and to disclose personal information** about you for the purpose of assessing your abilities to be an employee of the UCCM Anishnaabe Police Service.

The purpose of part C of this form is **to release any of the individuals or entities named on this form from liability** that might arise as a result of the collection, use, or disclosure of your personal information in accordance with parts A and B.

A. CONSENT/ASSESSMENT

I hereby authorize the UCCM Anishnaabe Police Service to which I have submitted an application to be hired for employment, to request and obtain personal information about me as set out in Page 2 from any or all the following individuals or entities:

- The Ontario and National Sex Offender Registries.
- The Ontario Ministry of Transportation, which maintains driving records of Ontario residents.
- Ontario Police Service or law enforcement agencies, which may hold personal information about me.
- The Canadian Police Information Centre, which is owned by the RCMP, and which maintains a computerized system to provide law enforcement agencies with information on individuals with criminal records.
- The Office of the Independent Review Director, which is an independent civilian oversight agency that handles public complaints of police conduct in the province of Ontario, Canada.
- All health care practitioners (including without limitation, doctors, nurses, psychologists, and their agents) who have provided me with health care treatment, either as part of this Constable Selection process or otherwise.
- All previous employers who may hold personal information about me.
- One or more consumer reporting agencies, which maintains credit or other personal information about a consumer.
- 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 irrevocably authorize the above-noted individuals or entities to collect personal information about me from sources other than myself and I consent to their using this information as they require and/or as is described above, and I consent to the disclosure of such personal information to the UCCM Anishnaabe Police Service and to whom I have applied for employment.

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

- Academic records and transcripts.
- Employment records (Police Service and other), including performance evaluation / reviews, reference, 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
- Information from background and security checks (including OIPRD, CPIC, NCIC, Interpol, Vulnerable checks, NICHE, CBSA, YCJA & YOA records 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.
- Applicant survey information.
- Training records; and
- Social networking websites, blogs, chatrooms, email, or other online content.

B. CONSENT/RESEARCH

I understand that personal information about me may be required occasionally for research purposes, and in particular for documenting findings and trends, and for reviewing the validity and reliability of the hiring process. I hereby consent to any of the personal information collected about me, pursuant to this form or at any point while I am being trained to be an employee of the UCCM Anishnaabe Police Service, to be used and to be disclosed to a researcher or to the OACP/Ministry/TNT for these purposes. I understand that in providing this consent no personal information that identifies me shall ever be (unless by way of court order) published in a publication that is available to the general public.

C. RELEASE OF LIABILITY

By signing this form, I understand, acknowledge and irrevocably agree that in consideration for applying to be an employee of 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, 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 each of my heirs, administrators, executors, assigns.

I have read the 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.

Candidate's Name *(Please Print)*

Name of Witness *(Please Print)*

Candidate's Signature

Witness's Signature

Date of Signatures: _____

Personal information obtained through the completion of this form for employment as a police officer is collected pursuant to section 43 of the Police Service Act 1990 for the purpose of assessing qualifications and suitability for employment as a police officer. Information collected may be disclosed for the purpose for which it was obtained or for a consistent purpose.