

Surname: _____

Constable Application

Checklist of Mandatory Application Documents

First Name	e:
Middle Na	me(s):
he docum	ving list of documents must be included with your application package. Applications received missing any of nents indicated below will not be accepted. You will be required to re-submit the entire completed package. Elist must be submitted with your application package as well. Please do not submit binders or folders or hardications.
	Completed Checklist of Mandatory Application Documents (this page)
	Cover Letter and Resume
	Completed Police Constable Application Form
	McNeil Report (Experienced Constables Only)
	Completed Vision and Hearing Forms (the forms must be notarized by a licensed practitioner)
	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 (copies of diploma or transcripts required)
	Proof of any Post-Secondary Education or Equivalency (copies of diploma or transcripts required)
	Completed Authorization for Release of Information (the final four pages of this document)



IMPORTANT

APPLICATION Position of Constable or Recruit

- 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 POP 1G0, Attention Human Resources or email to recruitment@uccmpolice.com

Given Name (2)

Personal Information

Legal Last Name

Complete Address (including Number, Street, Apt. Number, Lot, Concession, Rural Route #)						
City or Town Province Pos			stal 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 sch						
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.?						
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 provide date of scheduled training.	ne expiry date. If no , pleas	e				

Legal Given Name (1)

Secondary School Attended		Highest Grad	de or Level Completed			
occondary outloor Acconded		_	e, attach equivalency certificate)			
Type of Certificate or Diploma O	btained					
Business, Trade or Technical Sch	ool Attende	d				
Course Name Lengt		th of course in years	Number of years completed			
Licence, Certificate or Diploma A	warded	Type of Award (i.e., Cert	tificate – Medical Receptionist)			
Yes 🗆 No 🗆						
Community College Attended						
Program Name		Length of program in year	rs Number of years completed			
icense, Certificate or Diploma A	warded	Type of Award (i.e., Ontario College Diploma – Police Foundations)				
Yes No						
University Attended						
Major Area of Study		Length of program in yea	nrs Number of years completed			
Degree Awarded		Type of Degree Awarded (i.e., Bachelor of Arts – Geography)				
Yes 🗆 No 🗆						

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:		То:		
Complete Mailing Address (Include Postal Code)					
Supervisor's Name and Title		Applicant's Position/	Title		
Brief Description of Duties					
Reason for Leaving					
Present or Previous Employer				Full-Time	
Telephone Number	Date Employed: From		То:	Part-Time	
Complete Mailing Address (Include Postal Code)					
Supervisor's Name and Title		Applicant's Position/Title			
Brief Description of Duties					
Reason for Leaving					
Present or Previous Employer				Full-Time	
Telephone Number	Date Employed: From		To:	Part-Time	
Complete Mailing Address (Include Postal Code)					
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 (<u>did not receive compensation</u>) 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			From:			
			Dates	To:		
Hours	Total Volunteer H	<u> </u>		Currently Active		
Per: Week Month				Yes	No	
	Name:					
Contact Person for verification	Phone Number:					
Brief Description of Duties						
Descen for Leaving						
Reason for Leaving						
Present or Previous Organization						
Ğ						
Your Position			Dates	From:		
			Dates	То:		
Hours	Total Volunteer H	ours		Currently Active	N	
Per: Week Month				Yes	No	
Contact Person for verification Name						
	Phone Number:					
Brief Description of Duties						
Reason for Leaving						
Present or Previous Organization						
Your Position			Dates	From:		
	I			То:		
Hours Per: Week Month	Total Volunteer H	ours		Currently Active Yes	No	
Tel. Week Month				103	110	
Contact Person for verification	Name:					
0.10	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		
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.					

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.

Date:

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

Developed: December 2020 Revised: October 2021

Applicant's Signature: