TIMMINS POLICE SERVICE

CIVILIAN APPLICATION FORM

Given Name:

SECTION 1: PERSONAL INFORMATION

Last Name:

	Q P		3			
Complete Address (including Number,	Street, Apt <mark>. Number</mark> ,	Lot, Concessions, Rur	ral Route #)			
City or Town	Province	777	Postal	Code:		
			I AB			
Business or Day Phone Number:		Cell Phone Numl	ber:	17		
	17/3		177	MAN	<u> </u>	
Home or Evening Phone Number:	13	E-Mail Address:	BILL	The state of the s		
P. 1941				PM	7	
	8-11				50	
Question:					Yes	No
Are you at least 18 years of age?		6555		PA	177	
Are you legally <mark>eligible to work in C</mark> ana	da?	USA		PA		
Are you a Canadian citizen or a permar	ant resident of Cana	422		A		
Are you a canadian citizen of a perman	lent resident of Cana	uai		BL	79	
Do you possess a valid driver's license t		rive <mark>an automobil</mark> e i <mark>n</mark>	Ontario wit	:h full dr <mark>ivin</mark> g	737	
privileges and do you have six or fewer	demerit points?			144		
Have you ever been convicted of any c				11		
been granted or issued? (This means and the court)	ny fine, period of imp	orisonment, or period	of probatio	n offered by		
If you were previously convicted under	a <mark>federal statute (th</mark>	is does not involve a f	indi <mark>n</mark> g guilt	under the		
YCJA or the YOA, or a finding of delinqu		, have you been grant	ed or issued	d a pardon? If		
yes, please provide details of the circur	nstance:					
or in the event of a discharge relating t	o a finding of guilt (th	nis does not involve a	finding guil	t under the		
YCJA or the YOA, or a finding of delinqu	ency under the JDA)	, have the records bee	en sealed by	the		
R.C.M.P.?	id Cautificate by the	time a lab affault die	5			
Will you possess a valid CPR and First A	id Certificate by the	ume a job offer is give	an:			

SECTION 2: EDUCATION

SECONDARY SCHOOL ATTENDED	Highest Grade or Level Completed (if applicable, attach equivalency certificate)
Type of Certificate of Diploma Obtained	
BUSINESS, TRADE OR TECHNICAL SCHOOL ATTENDED	
Course Name	Dates and number of years attended
COMMUNITY COLLEGE ATTENDED	
Program Name	Date and number of years attended
Specify License, Certificate or Diploma Awarded	
UNIVERSITY ATTENDED	
Specify Major Area of Study	Dates and number of years attended
Degree Awarded	General
OTHER RELEVANT COURSES, WORKSHOPS, SEMINARS, TRAIN	NG, CERTIFICATES OR DEGREES
IOIMPE	IC//M/
SER	VICE

SECTION 3: EMPLOYMENT HISTORY

Please Note: Beginning with your present or previous 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. (**Please attach additional sheets as required**) Is your current employer(s) aware you are seeking employment? Please be advised they may be contacted at a further point in the selection process.

Present or Previous Employer	300000
Telephone Number	Date of Employment: From To:
Complete Mailing Address (include Postal Code)	
Supervisor's Name and Title	Y <mark>our Position</mark> Title
Brief Description of Duties	VI I I I I I I I I I I I I I I I I I I
Reason for Leaving	TO THE STATE OF TH
Present or Previous Employer	
Telephone Number	Date of Employment: From To:
Complete Mailing Address (include Postal Code)	23/6
Supervisor's Name and Title	Your Position Title
Brief Description of Duties	1 1 1 2 2
Reason for Leaving	
Present or Previous Employer	I
Telephone Number	Date of Employment: From To:
Complete Mailing Address (include Postal Code)	
Supervisor's Name and Title	Your Position Title
Brief Description of Duties	
Reason for Leaving	

SECTION 4: LIST ANY QUALIFICATIONS YOU HAVE WHICH YOU BELIEVE ARE RELEVANT TO THIS POSITION:

List Qualifications here:			
Have you ever applied to any other police service	?	Yes	No
If yes, complete the following:	1	20 18	<u>'</u>
Name of Service(s)	Date(s)	Is your applica	ation currently active?
1.		Yes	No
2.	130 X	Yes	No
3.	TO IV	Yes	No
4.		Yes	No
5.		Yes	No
6.	8	Yes	No
7.	23	Yes	No
3.	300	Yes	No
Did any member of the Timmins Police Service ref	fer to our	Yes	No
If yes, what is the name of the member? (Note: yo provide one name)	ou <mark>can o</mark> nly		July 1
Declaration: I hereby declare that the above information I understand that a false statement or omission employment or result in dismissal should I be a It is understood and accepted that I am involve stage of the process.	may disqualify r	ne from further co	onsideration for ice Civilian Staff member
Applicant's Signature:		Date:	



CONSTABLE SELECTION SYSTEM

CONSENT AND RELEASE OF LIABILITY FORM

Last Name, First Name (Please Print)	(date of birth: year, month, day)

Please read the following form carefully.

The purposes of parts A and B of this form are to authorize police services 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 a police constable under the Ontario Constable Selection System, and for related research, information and statistical tracking.

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 any police service in Ontario to which I have submitted an application to be hired as a constable, and that is a licensed member of the Constable Selection System, to request and obtain personal information about me as set out in Page 2 from any or all of the following individuals or entities:

- The Ontario Association of Chiefs of Police ("OACP"), which is licensed by the Ontario Government to operate the Constable Selection System, stores personal information belonging to police constable applicants in a secure electronic database, and uses this information to track demographic data and assessment results;
- The OACP Constable Selection System-licensed assessment firm "TNT" Inc, which
 provides assessment services on behalf of the OACP, and which collects assessment
 results as well as the personal information required for Constable Selection System
 registration;

OACP

CONSTABLE SELECTION SYSTEM

- The Ontario Ministry of Solicitor General responsible for the Community Safety and Correctional Services, which is the licensor of the Constable Selection System, and which conducts research using personal information to support the validity and reliability of the Constable Selection System;
- The Ontario and National Sex Offender Registries;
- The Ontario Ministry of Transportation, which maintains driving records of Ontario residents;
- All Ontario police service or law enforcement agency, 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;
- All health care practitioners (including without limitation, doctors, nurses, psychologists and their agents) who has 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 a police service that is licensed member of the Constable Selection System and to whom I have applied for employment as a police officer.



CONSTABLE SELECTION SYSTEM

I further acknowledge that any of the above-noted individuals or entities may disclose to the requesting 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;	☐ Financial information, including credit
□ Employment records (Police Convice	bureau check;
☐ Employment records (Police Service	
and other), including performance	☐ Driving record;
evaluation / reviews, reference, discipline,	But the state of t
complaint and attendance information;	☐ Physical, psychological, visual, aptitude
	and other employment- related tests,
☐ Police records and history of law	including but not limited to MMPI-2 -
involvement, including criminal and	questions, answers and scores, and the
provincial reports and convictions, and	interview notes, summaries, opinions,
intelligence information;	assessments and evaluations of
,	psychologists;
☐ Police service applications;	poyeneregiete,
	☐ Applicant survey information; and,
☐ Medical information;	
	☐ Training record.
☐ Information from background and	
security checks (including CPIC, NCIC,	☐ Social networking websites, blogs,
Interpol, Vulnerable checks, NICHE,	chatrooms, email or other online content.
CBSA, YCJA & YOA records etc.);	
,,	

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 Constable Selection System. 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 a constable, 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.



CONSTABLE SELECTION SYSTEM

C. RELEASE OF LIABILITY

By signing this form, I understand, acknowledge and irrevocably agree that in consideration for applying to be a constable pursuant to this Constable Selection System, 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, Her Majesty the Queen in Right of Canada, the OACP, TNT and any Ontario police services board, 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 each of my heirs, administrators, executors, assigns.

I have read both 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	Signature of Witness
Date of Signatures:	

Personal information obtained through the completion of this form 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. Questions concerning the collection or disclosure of this information should be addressed to OACP-TNT Administrator listed below in foot note.