**LETTERHEAD OR LOGO**

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| --- | --- |
| Date of Request: |  |

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| As the authorized representative of \_\_\_\_\_\_\_(state Agency or Organization)\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , I hereby request that the Thunder Bay Police conduct: |

Police Information Check (PIC)

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| As the authorized representative of a person or organization that is responsible for the well-being of one or more children or vulnerable persons as defined in Section 6.3(1) of the Criminal Records Act, I hereby request that the Thunder Bay Police conduct: |

Police Vulnerable Sector Check (PVSC)

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| --- | --- |
| Candidate: |  |
|  |  |
| Address: |  |

Who will be working in a paid position / volunteer position / other (circle one)

|  |  |
| --- | --- |
| Position requiring check: |  |

**Requests for Police Vulnerable Sector Checks Only**:

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| Part 2(1)(c) of the Criminal Records Regulation requires applications for VS checks to show how the position is one of trust or authority towards that child or vulnerable person. |

|  |  |
| --- | --- |
| Description of duties: |  |
|  |  |
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|  |  |
| --- | --- |
| Authorized Representative | Position Title |

|  |  |
| --- | --- |
| Signature | Phone # and Email |