



CONSENT AND RELEASE OF LIABILITY FORM

Print first and last name above	Print your SIN above
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Please read the following form carefully. The purposes 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 First Nation Constable under the Ontario First Nation Policing Agreement, and 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.

CONSENT/ASSESSMENT

I hereby authorize the Police Governing Authority or Band Council of the Community who receives their policing arrangement through the Ontario First Nation Policing Agreement (ONFPA) in conjunction with the Ontario Provincial Police who are the administrators of the OFNPA, to which I have submitted an application to be hired as a First Nations 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 other 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;
- the Ontario and National Sex Offender Registries;
- any health care practitioner (including doctors, nurses, psychologists and their agents) who has 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;
- any educational institution in which I have been, or am currently, enrolled and which has information about me, including my grade or performance results;
- any volunteer organization who may hold personal information about me, and

I 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 as is described above, and I consent to the disclosure of such personal information to the requesting OFNPA Police Service, Chief and Council of the First Nation Employer, or their authorized designate to whom I have applied for employment as a police officer.

I further acknowledge that any of the above-noted individuals or entities may disclose to the requesting OFNPA Police Service, Chief and Council of the First Nation Employer, or their authorized designate 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 or volunteer 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 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;
- applicant survey information;
- training record; and
- social networking websites, blogs, chatrooms, email or other online content.

RELEASE OF LIABILITY

By signing this form, I agree that in consideration for applying to be a First Nations Constable within the OFNPA, 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, The Chief and Council of the First Nations community police service, 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 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.

Name of Candidate (Please Print)

Name of Witness (Please Print)

Signature of Candidate

Signature of Witness

Date of Signatures:
