Request for Vulnerable Screening Check

TO BE COMPLETED BY REQUESTING ORGANIZATION

Reason for Request	☐Employment	☐Volunteer

Name of Organization	

Name of Contact at Organization		**Telephone #**	

Name of Applicant	
Position Being Applied For:	

In which Vulnerable Sector will the Applicant be Working?

According to the Criminal Records Act, Section 5.3, "vulnerable persons" means person who, because of their age, a disability or other circumstances, whether temporary or permanent:

a) Are in a position of dependence on others; or

b) Are otherwise at a greater risk than the general population of being harmed by persons in a position of authority or trust relative to them.

☐Children Under the Age of 18	☐Elderly	☐Disabled	☐Other Circumstance

Please specify the circumstances that require a Vulnerable Sector Check:

Signature of Organization Representative

Date