Screening Disclosure Form

NAME: First	Middle	Last	
FIISC	Midule	Last	
OTHER NAMES YOU	J HAVE USED:		
CURRENT PERMANI	ENT ADDRESS:		
Street	City	Province	Postal
DATE OF BIRTH: _		GENDER IDEN	ПТҮ:
	Month/Day/Year		
CLUB:	EMAIL:		
	close a conviction/sanction tional omission and subj		as not been granted may be g requirements.
	een convicted of a crime cking of an illegal substa		not been granted, including
Yes No_	If yes, please d	escribe below for each c	onviction:
Name or Type of O	ffense:		
Name and Jurisdicti	ion of Court/Tribunal:		
		Year Convicted	·
Penalty or Punishm	ent Imposed:		
Further Explanation	:		

Name of applicable Organization:
Yes No If yes, please describe below:
4. Have you ever been dismissed from a position due to allegations of ethical or moral misconduct?
Further Explanation:
Penalty or Punishment Imposed:
Year of Offense or Settlement:
Type of Offense or Finding:
Civil Court Finding: Out of Court Settlement:
Yes No If yes, please describe each finding, judgment or ruling below:
3. Has any civil court made a finding, judgment or ruling against you, or have you entered i an out of court settlement relevant to the profession of coaching, the sport or any other sport.
Further Explanation:
Name and Jurisdiction of Court/Tribunal:
Name or Type of Offense:
Yes No If yes, please explain for each pending charge:

5. Have you ever been disciplined or sanctioned by an independent body (sport body, private tribunal, government agency, etc.) for which a pardon has not been granted?
Yes No If yes, please describe below:
Name or Type of Offense:
Name and Independent Body:
Year Convicted:
Penalty or Punishment Imposed:
Further Explanation:
Certification I hereby certify that the information contained in this application is accurate, correct, truthful and complete.
I further certify that I will immediately inform the Organization of any changes in circumstances that would alter my original responses to this Screening Disclosure Form. Failure to do so may result in termination of membership and/or further discipline.
Signature: Date:
PRIVACY STATEMENT

By completing and submitting this Screening Disclosure Form, you consent and authorize the Organization to collect, use and disclose your personal information, including all information provided on the Screening Disclosure Form, Background Check and/or Vulnerable Sector Check for the purposes of screening, administering membership services and communicating with Provincial Sport Organizations, Host Societies, and other organizations involved in the governance of the sport. The Organization does not distribute personal information for commercial purposes.