



YORK REGIONAL POLICE

Police Constable

Checklist of Mandatory Application Documents

APPLICANT INFORMATION	
Surname:	
Given Name(s):	

- The following list of documents must be included with your application package in the order shown below.
- This checklist must be submitted with your application package as the first page.
- Please do not submit binders or folders with hard copy applications.
- Check or initial the boxes to indicate you have included the documents in your application package.
- We will accept forms typed with electronic signature, or handwritten in **black ink only**.

<input type="checkbox"/>	Completed Checklist of Mandatory Application Documents
<input type="checkbox"/>	Cover Letter and Resume
<input type="checkbox"/>	Completed Police Constable Application Form
<input type="checkbox"/>	A listing of all volunteer work/community service completed during the past five years, on the form provided – <i>Include name of volunteer organization(s) (phone number & address), duties, years of service, and contact information of supervisor(s)</i>
<input type="checkbox"/>	Copies of a valid Ontario Association of Chiefs of Police (OACP) Certificate of Results and any updates (ATS with valid PATI, or TNT certificate accepted) – <i>Include Fitness Logs and valid Hearing and Vision results (must meet standard)</i>
<input type="checkbox"/>	Copy of Emergency or Standard First Aid Certificate and CPR Level "C" Certificate – <i>these certifications must remain valid throughout the Constable Selection Process</i>
<input type="checkbox"/>	Proof of successful completion of four years of Secondary School Education, or Equivalency certificate if education was obtained outside of Canada. Include copies of both your diploma AND transcripts – <i>If you do not have your high school diploma and it cannot be replaced, we will accept correspondence on official letterhead from either your School Board or High School indicating your name, dates attended and diploma awarded, in addition to your transcript.</i>
<input type="checkbox"/>	Proof of successful completion of Canadian Post-Secondary Education, or Equivalency certificate if education was obtained outside of Canada – include copies of both your diploma(s) AND transcripts – <i>If degree or diploma is pending, please indicate anticipated date of receipt:</i>
<input type="checkbox"/>	Completed Authorization for Release of Information
<input type="checkbox"/>	Confidential Applicant Survey Form



Police Officer Application Form

IMPORTANT:

This application package is to be submitted with the Police Service you choose to apply to. Please verify if Police Services require you to complete this form. Many Police Services utilize their own individual form.

Section 1. Personal Information

Last Name	Given Name	Middle Name(s)	
Complete Address (including Number, Street, Apt. Number, Lot, Concessions, Rural Route #)			
City or Town	Province	Postal Code	
Business or Day Phone Number:	Cell Phone Number:		
Home or Evening Phone Number:	E-Mail Address:		
		Yes	No
Are you at least 18 years of age?		<input type="checkbox"/>	<input type="checkbox"/>
Are you legally eligible to work in Canada?		<input type="checkbox"/>	<input type="checkbox"/>
Are you a Canadian citizen or a permanent resident of Canada?		<input type="checkbox"/>	<input type="checkbox"/>
Do you possess a valid driver's license that permits you to drive an automobile in Ontario with full driving privileges, and do you have six or fewer demerit points?		<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been convicted of any criminal offence under a federal statute for which a pardon has not been granted or issued? (This means any fine, period of imprisonment, or period of probation offered by the court)		<input type="checkbox"/>	<input type="checkbox"/>
If you were previously convicted under a federal statute (this does not involve a finding of guilt under the YCJA or the YOA, or a finding of delinquency under the JDA), have you been granted or issued a pardon? If yes, please provide details of the circumstance:		<input type="checkbox"/>	<input type="checkbox"/>
or in the event of a discharge relating to a finding of guilt (this does not involve a finding of guilt under the YCJA or the YOA, or a finding of delinquency under the JDA), have the records been sealed by the R.C.M.P.?		<input type="checkbox"/>	<input type="checkbox"/>
Will you possess a valid CPR and First Aid Certificate by the time a job offer is given?		<input type="checkbox"/>	<input type="checkbox"/>

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Section 2. Education

Secondary School Attended		Highest Grade or Level Completed (If applicable, attach equivalency certificate)	
Type of Certificate or Diploma Obtained			
Business, Trade or Technical School Attended			
Course Name		Dates and number of years attended	
Specify License, Certificate or Diploma Awarded			
Community College Attended			
Program Name		Dates 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	Honours
Other relevant Courses, Workshops, Seminars, Training, Licenses, Certificates or Degrees:			



Section 3. Employment History

- Notes:**
1. 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)
 2. 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		
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		
Present or Previous Employer		
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		
Present or Previous Employer		
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(s): Yes No

If yes, complete the following:

Name of Service(s)	Application Date(s)	Is the application currently active?	
1.		Yes <input type="radio"/>	No <input type="radio"/>
2.		Yes <input type="radio"/>	No <input type="radio"/>
3.		Yes <input type="radio"/>	No <input type="radio"/>
4.		Yes <input type="radio"/>	No <input type="radio"/>
5.		Yes <input type="radio"/>	No <input type="radio"/>
6.		Yes <input type="radio"/>	No <input type="radio"/>
7.		Yes <input type="radio"/>	No <input type="radio"/>
8.		Yes <input type="radio"/>	No <input type="radio"/>

Declaration:

I hereby declare that the foregoing information is true and complete to the best of my knowledge. I understand that a false statement or omission may disqualify me from further consideration for employment, or result in dismissal should I be appointed as a police constable / cadet. It is understood and accepted that I am involved in a competitive process, and that I may be declined at any stage of the process.

Personal information obtained through the completion of this form is collected pursuant to section 43 of the Police Services Act 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 collection or disclosure of this information should be addressed to:

TNT Justice Consultants
 10 Milner Business Court, 3rd Floor
 Toronto, ON M1B 3C6
 Tel: 647-777-8313
 Email: Support@oacpcertificate.ca

Applicant's Signature:

Date:

Clear Entire Form

VOLUNTEER / COMMUNITY SERVICE WORK
(WITHIN THE LAST 5 YEARS)

Present or Previous Volunteer Organization:	
Telephone Number:	Date of Volunteer Service: From To
Complete Mailing Address of Organization (including Postal Code):	
Supervisor's Name and Title:	Position Title:
Brief Description of Duties:	
Reason for Leaving (if applicable):	
Present or Previous Volunteer Organization:	
Telephone Number:	Date of Volunteer Service: From To
Complete Mailing Address of Organization (including Postal Code):	
Supervisor's Name and Title:	Position Title:
Brief Description of Duties:	
Reason for Leaving (if applicable):	
Present or Previous Volunteer Organization:	
Telephone Number:	Date of Volunteer Service: From To
Complete Mailing Address of Organization (including Postal Code):	
Supervisor's Name and Title:	Position Title:
Brief Description of Duties:	
Reason for Leaving (if applicable):	

Use the Volunteer / Community Service Work template to add extra pages for all additional positions, if required



CONSTABLE SELECTION SYSTEM

CONSENT AND RELEASE OF LIABILITY FORM

_____ / _____ / _____
Last Name, First Name (*Please Print*)

3rd/6th/9th digits of SIN Number

Home Address: _____

Please read the following form carefully.

Parts A and B of this form is authorize police services and other individuals and entities noted below to **collect, use and 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.

Part C of this form **releases any of the individuals and/or entities named in this form from liability** that might arise from the collection, use, or disclosure of your personal information in accordance with parts A and B.

A. CONSENT TO ASSESSMENT

I hereby authorize any police service in Ontario to which I have submitted an application to be hired as a constable, and all other licensed members of the Constable Selection System, to collect my personal information as set out in Page 2 from any or all of the following individuals and 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 2588232 Ontario Inc., operating under the business name, TNT Justice Consultants, (“TNT”), which provides assessment services on behalf of the OACP and RCMP, and which collects assessment results as well as the personal information required for Constable Selection System registration;



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 have 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; and,
- Any educational institution in which I have been, or am currently, enrolled and which has information about me, including my grade or performance results.

I irrevocably authorize the above-noted individuals and entities to collect personal information about me from sources other than myself and I consent to their using and disclosing this information as they require and/or as is described above and/or in the www.oacpcertificate.ca privacy policy.

I further consent to the disclosure of such personal information to a police service that is a licensed member of the Constable Selection System and to whom I have applied for employment as a police officer.



CONSTABLE SELECTION SYSTEM

I **acknowledge** that any of the above-noted individuals and entities may disclose to the requesting police service to which I have submitted an application which may include any or all of the following records, including any parts of the following record:

- | | |
|--|---|
| <ul style="list-style-type: none">• Academic records and transcripts; Employment 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, Vulnerable checks, NICHE, CBSA, YCJA & YOA records etc.); | <ul style="list-style-type: none">• 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;• Pre-Screening Test Scores• Applicant survey information; and,• Training record.• Social networking websites, blogs, chatrooms, email or other online content. |
|--|---|

B. CONSENT TO RESEARCH

I understand that my personal information as described herein may be required occasionally for research and analytics 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 or all 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/or disclosed to a researcher or to the OACP/RCMP/ Ministry/2588232 Ontario Inc., operating under the business name, TNT Justice Consultants, ("TNT"), for these purposes. I understand that in providing this consent that my personal information shall never be published in a publication that is available to the general public, unless in accordance with applicable laws or in connection with a legal proceeding.



CONSTABLE SELECTION SYSTEM

C. WAIVER AND RELEASE OF LIABILITY

FOR GOOD AND VALUABLE CONSIDERATION, including the opportunity to submit my application for consideration to a police service, I, on my own behalf and on behalf of my assigns, insurers, personal representatives, agents, attorneys, estate, and heirs, release and forever discharge, Her Majesty the Queen in Right of Ontario, Her Majesty the Queen in Right of Canada, the OACP/RCMP/2588232 Ontario Inc., operating under the business name, TNT Justice Consultants, ("TNT"), and any Ontario police services board, and their respective assigns, insurers, licensees, representatives, agents, employees, subcontractors, attorneys, partners, subsidiaries, officers, directors, shareholders, associates, and affiliates (hereinafter collectively referred to as the "Releasee") from any and all actions, causes of action, suits, debts, dues, accounts, bonds, covenants, contracts, claims and demands whatsoever which I have ever had, now have or may hereinafter have against the Releasee, 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.

I AGREE AND UNDERTAKE:

- (a) That if I makes any claim, demand or complaint or take any action or proceeding whatsoever against the Releasee arising out of the matters described above in this Release shall be deemed to be a complete defence and bar to any such claim, demand, complaint, action or proceeding;
- (b) Not to make any claim or take any proceeding against any other person or entity which might result in a claim for contribution or indemnity being made against the Releasee;
- (c) To indemnify and save harmless the Releasee from any costs, expenses, losses or damages whatsoever incurred by the Releasee in connection with or in any way related to defending or responding to any action or other proceeding brought by any other person or entity against the Releasee for contribution or indemnity or any other claim over as a result of any action or other proceeding brought by me.



CONSTABLE SELECTION SYSTEM

I have read all five 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.

THIS WAIVER AND RELEASE SHALL BE INTERPRETED AND THE RIGHTS OF THE PARTIES DETERMINED UNDER THE LAWS OF THE PROVINCE OF ONTARIO. THE ONTARIO COURTS SHALL HAVE EXCLUSIVE JURISDICTION FOR ANY DISPUTE ARISING UNDER, OR PERTAINING TO, THIS WAIVER AND RELEASE.

I have carefully read this Waiver and Release and fully understand its contents. I am aware that this is a release of liability and a binding contract between myself and the persons and entities mentioned above and I sign it of my own free will. I understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing this Waiver and Release freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law. I have read the information in this form thoroughly, that I fully understand it, and that by signing below, I have the capacity to provide consent, and that I am providing consent freely and voluntarily.

The information provided is collected under the authority of Section 11 of the *Private Security and Investigative Services Act, 2005* for the purpose of issuing a licence under the Act.

Candidate's Name (Please Print)

Name of Witness (Please Print)

Candidate's Signature

Signature of Witness

Date of Candidate Signature

Date of Witness Signature

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 Justice Consultants Administrator.

5. Which one of the following do you consider yourself to be:

- Indigenous (i.e. First Nations, Inuit, Metis)
- White (i.e. Caucasian – British, French, Eastern or Western European, Russian, Ukranian, Mediterranean)
- Racial Minority (status is based on race or skin colour, not place of birth or nationality – see Additional Information below for a list of categories which belong to “racial minority”)

6. If you consider yourself a member of a racial minority, indicate which one of the following best describes your race or colour, regardless of your place of birth (see “Additional Information” below):

- | | |
|---|--|
| <input type="checkbox"/> Black | <input type="checkbox"/> Visible Minority Central or South American |
| <input type="checkbox"/> Filipino | <input type="checkbox"/> Oceanic |
| <input type="checkbox"/> Korean | <input type="checkbox"/> South Asian (Indo-Pakistan) |
| <input type="checkbox"/> South East Asian | <input type="checkbox"/> Visible Minority West Asian or North African |
| <input type="checkbox"/> Japanese | <input type="checkbox"/> Mixed Race or Colour (including one of the above) |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Other (specify): _____ |

7. Do you consider yourself to be a person with a disability?

Person with a disability means a person with a permanent physical, mental or medical condition that limits the kind or amount of activities of daily living the person can do, and the kind or amount of work the person can do.

- Yes – Go to Question 8 No – Go to Question 9

8. Do you feel that your disability will require some form of job accommodation?

- Yes No

If you have answered “yes” to the above, the assessing police service or OACP-licensed assessment firm will assess your needs in consultation with you.

9. To assist with future recruitment activities, please indicate how you heard about the constable opportunities:

- Newspaper or Social Media (specify) _____
- Posting on yrp.ca/careers website
- Recruiting Presentation (specify location) _____
- Community Contact / Agency
- School / College / University Guidance
- Other (specify) _____

10. What attracted you to apply:

ADDITIONAL INFORMATION

Indigenous Person: Other terms that are widely used to describe Indigenous people include Aboriginal or First Peoples. Indigenous persons include people living on and off reserves, plus Status, Non-Status, or a First Nations Person with Status under the Indian Act. Indigenous people from Latin America and East Indians should mark themselves as a racial minority.

Racial Minority Status: Racial minority status is based on race or colour, not nationality. Therefore, there are many persons who were born in Canada or who are Canadian citizens who would consider themselves to be a visible minority because of their race or colour. The listing of racial minority groups below is for guidance only. While some categories refer to both nationality and racial origin, it is racial origin, not nationality that should guide you. For example, if you are of Chinese origin but were born in South America, you would select “Chinese”.

<u>Black:</u>	Includes Canadian, African, American, West Indian and South American Black
<u>Oceanic:</u>	Includes Polynesian, Micronesian, Melanesian and Fijian
<u>South East Asian:</u>	Includes Burmese, Cambodian, Laotian, Thai and Vietnamese
<u>South Asian (Indo-Pakistan):</u>	Includes Bengali, Gujarati, Punjabi, Tamil, East Indian (including those born in the Caribbean or East Africa), Bangladeshi, Sinhalese and Sri Lankan
<u>Visible Minority Central or South American:</u>	Includes those from Central or South America who do not select one of the other racial minority groups
<u>Visible Minority West Asian and North African:</u>	Includes visible minorities who are Lebanese, Egyptian, Palestinian, Syrian, Iranian, Turk, Armenian, North African and Mauritian

Disability: The examples below provide a guide to the different types of disabilities that may limit a person in the kind of activities of daily living they can do and the kind or amount of work they can do.

<u>Visual/Sight Impairment:</u>	Blindness or other serious impairment, which is not readily subject to correction through glasses or contact lenses and requires job accommodation.
<u>Hearing Impairment:</u>	Deafness or serious hearing loss, which is not readily subject to correction through a hearing aid.
<u>Mobility/Dexterity Impairment:</u>	Due to any cause including paralysis, amputation or disease, and requiring the use of a wheelchair or other device, or which seriously limits your ability to walk or manipulate objects.
<u>Speech Impairment:</u>	Limited in the ability to speak and be understood from causes such as muteness.
<u>Learning Impairment:</u>	Includes dyslexia and other learning disabilities due to development impairments or brain injury.
<u>Emotional or Psychiatric Impairment:</u>	Includes serious psychiatric disorders such as manic or chronic depression, schizophrenia or any other serious disorders.
<u>Other Impairments:</u>	Epilepsy, diabetes and other permanent medical conditions, only if you consider that your opportunities for employment or progression are limited or affected by your condition.