



Court Security Checklist of Mandatory Application Documents

Surname: _____

First Name: _____

Middle Name: _____

Checklist of MANDATORY Application Documents

The following list of documents must be included with your application package. Failure to include any of the required documents will delay the processing of your application. This checklist must be submitted with your application package as well. **Please do not submit binders or folders.**

Initial the boxes when you have included the documents with your application package.

- Up-to-date resume
- Cover letter, including day and night phone numbers
- Proof of successful completion of four years of Secondary School Education or equivalency (copies of diploma and transcripts required).
- Proof of successful completion of Post-Secondary Education if applicable (copies of diploma and transcripts required).
**You must submit transcripts from any post-secondary institution you attended, whether you completed your course of study or not.*
- Completed Authorization for Release of Information (hand written in black ink or typed)
- Photocopy of valid Special Constable Test Results Profile OR Ontario Association of Chiefs of Police Certificate of Results, and any updates.
**OACP Certificates obtained prior to December 31, 2019 will be accepted.*
- Photocopy of Standard First Certificate or Emergency Aid Certificate and CPR Level "C" Certificate.
**These certifications must remain valid throughout the Selection Process*
- Confidential Applicant Survey Form (hand written in black ink or typed)
- Completed Civilian Application Form (hand written in black ink or typed)



YORK REGIONAL POLICE

APPLICATION FOR CIVILIAN POSITION

Personal information on this form is being collected pursuant to Section 29 of The Municipal Freedom of Information and Protection of Privacy Act and under the authority of the Police Services Act, for the purpose of processing your application for employment.

Any questions regarding this collection should be directed to:

Uniform Recruiting Unit

c/o York Regional Police
47 Don Hillock Drive
Aurora, ON L4G 0S7
905-830-0303 ext. 6720

Instructions

All of the information provided will be held in strict confidence within the York Regional Police.

- Applicants must meet the Service's Basic Requirements for the position.
- All sections of this form must be completed. If not applicable mark "N/A"
- Complete this form by printing in black ink
- If extra space is required, use back page

Position Applied For (Select one only):

<input type="checkbox"/>	Court Security Officer
<input type="checkbox"/>	Auxiliary Member

I Personal Information

Last Name	Given Name (1)	Given Name (2)	3rd, 6th & 9th digits of SIN #	
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?				
Are you legally eligible to work in Canada?				
Are you a Canadian citizen or a permanent resident of Canada?				
Do you possess a valid driver's licence that permits you to drive an automobile in Ontario with full driving privileges and do you have six or fewer demerit points?				
Have you ever been convicted of any criminal offence 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)				
If you were previously convicted under a federal statute, have you been granted or issued a pardon; or in the event of a discharge related to a finding of guilt, have the records been sealed by the R.C.M.P.?		N/A		
Do you possess a CPR certificate? (If Yes, please provide the expiry date. If no, please provide date of scheduled training.)				
Do you possess a first-aid certificate? (If Yes, please provide the expiry date. If no, please provide date of scheduled training.)				

II 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		Length of Course	
Licence, Certificate or Diploma Awarded			
Community College Attended			
Program Name		Length of Program	
Licence, Certificate or Diploma Awarded			
University Attended			
Major Area of Study		Length of Course	
Degree Awarded		General	Honours
Other relevant Courses, Workshops, Seminars, Training, Licenses, Certificates or Degrees			

III Employment History

- Note:** 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	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	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	Position Title
Brief Description of Duties	
Reason for Leaving	

IV List any qualifications you have which you believe are relevant to this position:

(ie. Languages, Special Skills, Specialized Training, Certifications)

Have you ever applied to any other police service(s) for any position	Yes <input type="checkbox"/>	No <input type="checkbox"/>
--	------------------------------	-----------------------------

If yes, complete the following:

Name of Service(s)	Position Applied for:	Date(s)	Is your application currently active?
1.			Yes <input type="checkbox"/> No <input type="checkbox"/>
2.			Yes <input type="checkbox"/> No <input type="checkbox"/>
3.			Yes <input type="checkbox"/> No <input type="checkbox"/>
4.			Yes <input type="checkbox"/> No <input type="checkbox"/>

Additional Information

If required, use the following space to provide, further information regarding any of the questions previously asked. Please indicate the question number when providing the information.

In the space provided below provide any information that you feel is relevant, such as personal achievements, awards, community service etc.

Candidate Declaration

I hereby declare that the foregoing information is true and complete to the best of my knowledge. I understand that a false statement 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.

Signature of Candidate: _____

Date: _____
(YYYY/MM/DD)

**Court Security Officer Selection
APPLICANT SURVEY FORM
CONFIDENTIAL**

PLEASE PRINT

First Name: _____ 3rd, 6th & 9th digits of SIN #

--	--	--

Last Name: _____

Date: _____

FOR OFFICE USE ONLY

Assigned No. _____

It is necessary to continually collect data to evaluate the **OACP Constable Selection System** for fairness and effectiveness. This type of data collection is a normal part of Selection System development and evaluation. The information in this survey is being gathered in accordance with the Police Services Act, Section 3. **Completion of this form is voluntary, and all information provided will be kept confidential.**

The information you provide on this form will not be used to assess your suitability for the position of an court security officer.

When you have completed this form, please **enclose it with your Applicant Registration Form** and return both forms to the assessing police service or to the OACP-licensed assessment firm. Please remember to include your name in the space provided.

Please note: In order for our records to be complete, please insert your name and return this survey, *whether or not* you have chosen to complete it.

If you have inquiries about this survey, please contact the assessing police service or the OACP-licensed assessment firm.

Please read each of the following questions carefully, and check the responses which apply to you. Mark answers with a check-mark. **Information which may assist you in responding to this survey is contained on pages 3 and 4.**

1. Please indicate your sex (tick box) and age (in years):

Male Female _____ Age

2. Please indicate (tick box) the highest level of education you have achieved:

- High school diploma (or equivalency)
- 2-year college diploma
- 3-year college diploma
- Bachelor's degree (e.g., B. A., B. Sc., B. Ed., B.S.W., etc.)
- Master's degree (e.g., M.A., M. Sc., M. Ed., M.S.W., etc.)
- Doctoral degree/ professional designation (Ph.D., Ed. D., M.D., P. Eng., LL.B., C.A., etc.)

3. Did you complete Police Foundations Training?

Yes-Proceed to Question 4. No-Proceed to Question 5.

4. At what institution did you take Police Foundations Training (tick box and specify name of institution)?

- Community college Specify _____
- Private college Specify _____
- University Specify _____
- Other Specify _____

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

- Aboriginal (e.g., a member of the Indian, Inuit or Metis people).
- White (e.g., Caucasian: British, French, East or Western European, Russian, Ukranian, Mediterranean).
- Racial Minority (Racial Minority status is based on race or skin colour, not place of birth or nationality; see below for a list of categories which belong to "Racial Minority").

ADDITIONAL INFORMATION

Aboriginal Person

Other terms that are widely used to describe aboriginal people include: North American Indian, First Nations People, Native People or Amerindian.

Aboriginal persons include people living on and off reserves plus Status, Non-Status, and Treaty Indians.

Aboriginals 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 minorities 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".

Racial Minority Groups

<u>Black:</u>	Includes Canadian, African, American, West Indian and South American Black.
<u>Oceanic:</u>	Includes Polynesian, Micronesian, Melanesian and Fijian.
<u>Other South East Asian:</u>	Includes Burmese, Cambodian, Laotian, Thai and Vietnamese.
<u>South Asian (Indo-Pakistani):</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 which 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.

Visual/Sight Impairment:

Blindness or other serious impairment which is not readily subject to correction through glasses or contact lenses and requires job accommodation.

Hearing Impairment:

Deafness or serious hearing loss which is not readily subject to correction through a hearing aid.

Mobility/Dexterity Impairment:

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.

Speech Impairment:

Limited in the ability to speak and be understood from causes such as muteness.

Learning Impairment:

Includes dyslexia and other learning disabilities due to development impairments or brain injury.

Emotional or Psychiatric Impairment:

Includes serious psychiatric disorders such as manic or chronic depression, schizophrenia or any other serious disorders.

Other Impairments:

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.



CONSTABLE SELECTION SYSTEM

CONSENT AND RELEASE OF LIABILITY FORM

Last Name, First Name (Please Print)	(date of birth: year, month, day)			

Please read the following form carefully.

The purposes of parts A and B 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 police constable under the Ontario Constable Selection System, and for related research, information and statistical tracking.

The purpose of part C of this form is **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 information in accordance with parts A and B.

A. CONSENT/ASSESSMENT

I hereby authorize any police service in Ontario to which I have submitted an application to be hired as a constable, and that is a licensed member of the Constable Selection System, to request and obtain personal information about me as set out in Page 2 from any or all of the following individuals or 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 “TNT” Inc, which provides assessment services on behalf of the OACP, 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 has 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;
- Any educational institution in which I have been, or am currently, enrolled and which has information about me, including my grade or performance results; and,

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



CONSTABLE SELECTION SYSTEM

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

- | | |
|--|--|
| <ul style="list-style-type: none"><input type="checkbox"/> Academic records and transcripts;<input type="checkbox"/> Employment records (Police Service and other), including performance evaluation / reviews, reference, discipline, complaint and attendance information;<input type="checkbox"/> Police records and history of law involvement, including criminal and provincial reports and convictions, and intelligence information;<input type="checkbox"/> Police service applications;<input type="checkbox"/> Medical information;<input type="checkbox"/> Information from background and security checks (including CPIC, NCIC, Interpol, Vulnerable checks, NICHE, CBSA, YCJA & YOA records etc.); | <ul style="list-style-type: none"><input type="checkbox"/> Financial information, including credit bureau check;<input type="checkbox"/> Driving record;<input type="checkbox"/> 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;<input type="checkbox"/> Applicant survey information; and,<input type="checkbox"/> Training record.<input type="checkbox"/> Social networking websites, blogs, chatrooms, email or other online content. |
|--|--|

B. CONSENT/RESEARCH

I understand that personal information about me may be required occasionally for research 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 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 to be disclosed to a researcher or to the OACP/Ministry/TNT for these purposes. I understand that in providing this consent no personal information that identifies me shall ever be (unless by way of court order) published in a publication that is available to the general public.



CONSTABLE SELECTION SYSTEM

C. RELEASE OF LIABILITY

By signing this form, I understand, acknowledge and irrevocably agree that in consideration for applying to be a constable pursuant to this Constable Selection System, 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, Her Majesty the Queen in Right of Canada, the OACP, TNT and any Ontario 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 each of my heirs, administrators, executors, assigns.

I have read both 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.

Candidate's Name (Please Print)

Name of Witness (Please Print)

Candidate's Signature

Signature of Witness

Date of Signatures: _____

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 Administrator listed below in foot note.