



## **WAIVER RELEASE**

### ***AUTHORIZATION for RELEASE of INFORMATION***

I, \_\_\_\_\_, the undersigned, hereby authorize any physician, psychologist, employer, organization or person to whom a signed copy of this authorization or a photocopy or fax thereof is delivered, to provide any information, opinion, reports, records, documents or copies thereof in any form which may be requested in connection with my application for employment with police services in Ontario, or any subsequent training and employment.

I understand that information about me will be used to assess my qualifications and suitability in relation to my application for employment as a police officer, as well as for research purposes. With regard to research, I understand that I will in no way be personally identifiable in any research document, and that data on me will be combined with data from candidates for the purpose of conveying general findings or trends.

- Academic records and transcripts
- Employment records
- Police records and history of law involvement
- Police service applications
- Medical information
- 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 and interview information provided during the selection process
- Applicant survey information
- Training records
- Police service performance review records

Personal information about me that is obtained during the selection process and during any subsequent training and employment may be disclosed for the purpose for which it was obtained or for a consistent purpose.

I further understand that any questions that I may have concerning the collection, use or disclosure of this information should be addressed to the Guelph Police Service Recruiting Supervisor.

I hereby acknowledge and declare that the terms of this authorization for release of information are fully understood by me.

\_\_\_\_\_  
(Candidate's Signature)

\_\_\_\_\_  
(Date)