



RECORD CHECK TEMPLATE

Please use this box to upload your agency letterhead

Applicant Name:

Agency Name:

Please select the type of police record check the applicant is to request.

Criminal Record Check

Criminal Record & Judicial Matters Check

Vulnerable Sector Check (if selected complete below)

1 – Title or description of the volunteer position:

2 – Details regarding the responsibilities towards children or vulnerable person(s):

I represent the agency listed above and I certify the above applicant will be volunteering with our organization.

Contact Name:

Contact Number:

A copy of this letter is required to be uploaded during the application process. To do so, save this document to your computer desktop or a folder you will remember.

Please provide your agency email address for return record checks