



APPENDIX C – SCREENING RENEWAL FORM

FIRST NAME:

MIDDLE NAME:

LAST NAME:

STREET:

CITY:

PROVINCE:

POSTAL CODE:

DOB (mm/dd/yy):

GENDER IDENTITY:

EMAIL:

PHONE:

By signing this document below, I certify that there have been no changes to my criminal record since I last submitted an Enhanced Police Information Check and/or Vulnerable Sector Check and/or Screening Disclosure Form and/or Driver's Abstract ("Personal Document") to WCL. I further certify that there are no outstanding charges and warrants, judicial orders, peace bonds, probation or prohibition orders, or applicable non-conviction information, and there have been no absolute and conditional discharges.

I agree that any Personal Document that I would obtain or submit on the date indicated below would be no different than the last Personal Document that I submitted to WCL. I understand that if there have been any changes, or if I suspect that there have been any changes, it is my responsibility to obtain and submit a new Personal Document to the Screening Committee instead of this form.

I recognize that if there have been changes to the results available from the Personal Document and if I submit this form improperly, then I am subject to disciplinary action and/or the removal of volunteer responsibilities or other privileges at the discretion of the Screening Committee.

DATED:

NAME:

SIGNATURE:

