



BELLEVILLE POLICE SERVICE CONSTABLE SELECTION SYSTEM

Consent and Release of Liability Form

Last Name (Please Print): _____

First Name: _____ Middle Name: _____

D.O.B. _____

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 described below 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, 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;
- the Ontario Ministry of 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 Ministry of Transportation, which maintains driving records of Ontario residents;
- any other 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;
- any health care practitioner (including doctors, nurses, psychologists and their agents) who has provided me with health care treatment, either as part of this constable selection process or otherwise;
- any previous employer who may hold personal information about me;
- any consumer reporting agency, 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 further hereby authorize any of the above-noted individuals or entities to collect or use personal information about me as described above, and to disclose such personal information to a requesting police service as part of this 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:

- ✓ academic records and transcripts;
- ✓ employment records (Police Service and other), including performance evaluation / reviews, 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;
- ✓ 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, including but not limited to MMPI-2 -questions, answers and scores, and the interview notes, summaries, opinions, assessments and evaluations of psychologists;
- ✓ applicant survey information; and,
- ✓ training record.

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 an entity listed in Part A of this form for these purposes. I understand that in providing this consent no personal information that identifies me shall ever be published in a publication that is available to the general public.

C. RELEASE OF LIABILITY

By signing this form, I 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, the OACP, 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 my heirs, administrators, executors, and assigns and each of them.

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 about the candidate that is obtained through the OACP Constable Selection System process is collected under the authority of section 43 of the *Police Services Act*. Questions concerning the collection, use or disclosure of this information or concerning the Release of Liability should be addressed to: