



Archdiocese of Regina

CRIMINAL RECORD AND VULNERABLE SECTOR CHECK REQUEST

Date: _____

To Whom It May Concern:

_____ (Parish Name)

_____ (Parish Complete Address)

_____ (Ministry/Ministries)

_____ is a volunteer, who we are requesting obtain:
(Volunteer's Name)

Please initial all boxes that apply:

(Both volunteer and representative of the parish who is requesting the information should initial.)

- ☐ A Criminal Record Check and Vulnerable Sector Check as during their volunteer activities the individual will have contact with children under the age of 18 years of age. The individual will either be working as a leader and/or an assistant during the activity and have direct contact with the children.
- ☐ A Criminal Record Check and Vulnerable Sector Check as during their volunteer activities the individual will be working with vulnerable seniors, individuals who have experienced emotional trauma and/or have physical and cognitive challenges.
- ☐ A Criminal Record Check as the volunteer activities require the individual to handle money and financial transactions and/or have a key to the facility allowing access to the facility at all times.

The Volunteer's date of birth is _____.
YYYY/MM/DD

Thank you.

Sincerely yours,

(Name and Parish Title/Position)

- ☐ I agree to the completion of a Criminal Record Checks and/or Vulnerable Record Checks search.

(Signature and date of Volunteer)

Section Three
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