

Date: \_\_\_\_\_

Attention: Ontario	Provincial Police Service	
RE: REQUES	T FOR POLICE VULNERABLE SECTOR CHECK	
As the authorized	d representative of St. Clair College responsible for the well- being of one or	
more children or	vulnerable persons, in long-term care, acute care, community care facilities,	
childcare, daycar	re, or schools as defined in section 6.3(1) of the Criminal Records Act, I hereb	у
request that Onta	ario Provincial Police Service conduct a Police Vulnerable Check, pursuant to	
section 6.3 of the	Act, with respect to the following individual. In addition, vulnerable sector	
screening is requ	rired, as the Cardiovascular Technology student may be accessing client	
charts, and provide	ding direct client care to newborns, children, and elderly patients.	
☐ Paid Position Name:	☐ Volunteer ☐ Student/Other	
Address:		
Date of birth:		
Name/Title:	Corrin Primeau, Chair School of Nursing	
Signature		
Signature	Biagio Lattuca, Chair School of Community Studies	
Signature	Dr. Stephanie De Franceschi, Chair School of Health Sciences	
Agency:	St. Clair College 2000 Talbot Road West Windsor, Ontario N9A 6S4	