

Date: _____

Attention: Ontari	o Provincial Police Service
RE: REQUES	ST FOR POLICE VULNERABLE SECTOR CHECK
As the authorize	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, dayca	re, or schools as defined in section 6.3(1) of the Criminal Records Act, I hereby
request that Ont	ario Provincial Police Service conduct a Police Vulnerable Check, pursuant to
section 6.3 of the	e Act, with respect to the following individual. In addition, vulnerable sector
screening is req	uired, as the student may be accessing client
charts, and prov	iding direct client care to newborns, children, and elderly patients.
☐ Paid Positior Name:	□ Volunteer ⊠ Student/Other
Address:	
Date of birth:	
Name/Title:	Corrin Primeau, Chair School of Nursing
Signature	
	Biagio Lattuca, Chair School of Community Studies
Signature	3. Juliuro
	Dr. Stephanie De Franceschi, Chair School of Health Sciences
Signature	Wh. Stepheni destrance de
Agency:	St. Clair College 2000 Talbot Road West Windsor,