

Date: _____

Attention: Sarnia Police Service		
RE: REQUES	T FOR POLICE VULNERABLE SECTOR CHEC	CK
As the authorized 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, daycare, or schools as defined in section 6.3(1) of the Criminal Records Act, I hereby		
request that Sarnia 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		
required, as the student may be accessing client charts, and providing direct client care to		
newborns, children, and elderly patients.		
☐ Paid Position Name:	☐ Volunteer	Student/Other
Address:	J	
Date of birth:		
Name/Title:	Corrin Primeau, Chair School of Nursing	
Signature		
Signature	Biagio Lattuca, Chair School of Community Studie Br. Stephanie De Franceschi, Chair School of Hea	
Signature	Wh. Stepheni Sestram che	
Agency:	St. Clair College 2000 Talbot Road West Windsor, Ontario N9A 6S4	