

# CRIMINAL RECORD CHECKS

The Criminal Records Review Act ensures that people who work with or may have potential for unsupervised access to children or vulnerable adults undergo a criminal record check by the Criminal Records Review Program (CRRP).

### Q: Who needs a criminal record check in the Abbotsford School District?

A: Any employee/contractor/volunteer who comes near or works around children and/or vulnerable adults must complete a criminal record check through the Criminal Records Review Program (CRRP), regardless of the time spent working near or around students, i.e., 1 hour or 1 month.

### Q: What is the difference between a Criminal Record Check (CRC) and a Police Information Check (PIC)?

A: A Criminal Record Check is through the Ministry of Public Safety and Solicitor General in Victoria, BC, and includes a vulnerable sector (children and vulnerable adults) search and focuses on criminal files associated with sexual offences. The Ministry of Public Safety and Solicitor General determines if an employee/volunteer has clearance to work for our School District.

A Police Information Check is through a local RCMP/Police Detachment office and focuses on offences and conviction information. WE DO NOT ACCEPT THESE.

#### Q: How long does a Criminal Record Check clearance last?

**A:** A CRC is valid for 5 years.

\*If a volunteer or employee is charged or convicted of an offence within the 5-year period, they are required to report those changes and/or convictions immediately to their supervisor. You would then need to complete a new criminal record check consent form.

#### Q: How much does a Criminal Record Check cost?

A: A volunteer CRC is free of charge. When an employee is first hired by the district, the cost of the first CRC will be deducted from the employee's first pay cheque. All subsequent CRC's will be paid for by the district.

#### Q: Do volunteers need to get a CRC done for every different school or department they work in?

A: No, once a CRC is done and there is clearance, the volunteer can work with children and vulnerable adults in any school/department within the Abbotsford School District.

#### Q: What if I have a Criminal Record Check from another organization?

**A:** If the organization that you have an existing criminal record check with is apart of the Criminal Record Review Program, we can give you a *Sharing Consent Package*. This form will give us permission to request a copy of the existing CRC you have on file with the CRRP. To be eligible to use the sharing program, your CRC must have been completed within the last 5 years and it has been screened with the "works with children and vulnerable adults" category. For all the details on the CRRP's sharing program, please see link below.

https://www2.gov.bc.ca/gov/content/safety/crime-prevention/criminal-record-check/sharing-results

## The Criminal Record Check Process

1.) To obtain a CRC you will need go to the Abbotsford School District Office during operating hours.

\*\*Important: Please bring 2 pieces of valid ID. \*\* (See <u>below</u> for a list of approved primary and secondary identification.)

#### We are located at:

2790 Tims st. Abbotsford, BC V2T 4M7

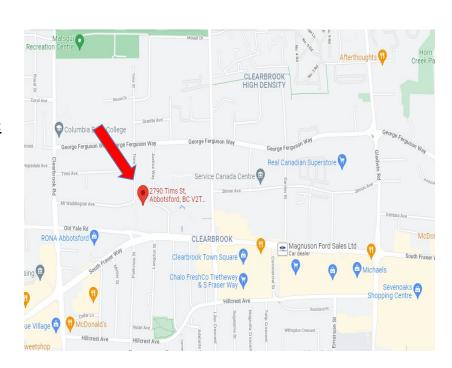
Phone: (604)859-4891 Fax: (604)852-8587

#### Regular Hours of Operation:

Monday to Friday (excluding holidays) 8:00am - 4:00pm

Summer/Winter Break/ Spring Break Hours of Operation:

Monday to Friday (excluding holidays) 8:00am – 3:30pm



Once the form is complete, the Abbotsford School District's authorized contact submits the form to the Criminal Records Review Program for processing.

**Volunteers:** You will then be entered into our district's Volunteer CRC spreadsheet as "PENDING". (Meaning you have handed in your paperwork and provided ID for processing)

#### Q: How long does it take to process and receive a clearance?

**A:** Employee and Volunteer CRC's take approximately 4-6 weeks to process. CRCs requested using the *Sharing Consent Package* have a processing time of 10 business days. \**Volunteers:* Due to the high volume of CRC's, it is recommended that you come in at least 6 weeks prior to the date you are expected to volunteer.

#### Q: Will I need to provide my fingerprints?

**A:** The CRRP conducts a check on every employee and volunteer processed through the program; however, only those who share a similar combination of name, gender, or date of birth as a record suspended sex offender are requested to provide fingerprints. If the individual is flagged for fingerprinting, the CRRP issues a Fingerprint Request Letter directly to the applicant. The applicant's organization is not notified of the fingerprint request.

The Fingerprint Request Letter directs the applicant to attend their local police or RCMP detachment to complete the fingerprint requirement. Note: Police and RCMP detachments have varying requirements for completing and submitting fingerprints. If an applicant has indicated that they require fingerprinting for a criminal record check, please have them contact their local police or RCMP detachment prior to attending.

3.) The district's authorized contact receives the CRC results back from the CRRP.

#### Q: How will I be notified when my criminal record check has cleared?

**A: Volunteers:** You will then be entered into our district's Volunteer CRC spreadsheet as "CLEARED". (Meaning we have received a children and vulnerable adult clearance from the CRRP, and you are now able to volunteer in the Abbotsford School District's schools.) You can call the school you are hoping to volunteer at after 6 weeks to find out if you have clearance. **Employees:** Your clearance will be entered into our employee database.



#### Q: Can I get a copy of my criminal record check?

A: As per the Criminal Records Review Program we cannot hand out copies of the criminal record checks. If another organization that is apart of the CRRP is requesting a copy of your CRC, you can ask them to provide you a Sharing Consent Package. The CRRP will provide a copy directly to that organization's authorized contact at no charge. Please note: This does not include Police Information Checks; that is a separate program.

\*Please see link below for all the details on the CRRP's sharing program. https://www2.gov.bc.ca/gov/content/safety/crime-prevention/criminal-record-check/ sharing-results

## **Acceptable Primary Identification**

- B.C. Driver's Licence or learner's licence (must have your photo)
- BCID
- BC Services Card (must have photo)
- · Canadian birth certificate
- Passport
- · Canadian Citizenship Card
- Permanent Resident Card
- Canadian Record of Landing/Canadian Immigration Identification Record

## **Acceptable Secondary Identification**

- School Identification Card (student card)
- Bank card (only if applicant's name is on the card)
- Credit card (only if applicant's name is on the card)
- Foreign birth certificate (a baptismal certificate is not acceptable)
- Canadian or U.S. driver's licence
- Naturalization certificate
- Canadian Forces identification
- Police identification
- Foreign Affairs Canada or consular identification
- Vehicle registration (only if applicant's signature is shown)
- Picture employee ID card
- Canadian Firearms Licence (PAL)
- Social Insurance Card (new style without signature strip not acceptable)
- BC Care Card
- BC Services Card (with or without photo)
- Secure Certificate of Indian Status
- Parole Certificate Identification
- Correctional Service Conditional Release Card
- ✓ One piece of identification must be government-issued and include the applicant's name, date of birth, signature, and photo.
- ✓ The applicant's primary and secondary ID are in their original form, are valid and unexpired.



# VOLUNTEER - CONSENT TO A CRIMINAL RECORD CHECK COVER PAGE

# THIS FORM MUST BE SIGNED BY THE VOLUNTEER ORGANIZATION AUTHORIZED CONTACT AND SUBMITTED WITH THE VOLUNTEER CONSENT FORM

#### **SECTION 1: FOR AUTHORIZED CONTACT USE**

CO	NSENT TO A CRIMINAL RECORD CHECK - VOLUNTEER ORGANIZATION CHECKLIST
	The volunteer has provided my organization with the original, completed and signed consent form to submit to the Criminal Records Review Program (CRRP). <b>FORMS SUBMITTED BY APPLICANTS DIRECTLY TO THE CRRP WILL NOT BE PROCESSED.</b>
	My organization will submit a copy of the consent form to the CRRP and will retain the original consent form for 5 years.
	My organization will verify the volunteer's I.D. in person and ensure that the information provided on the consent form(s) is accurate.
	My organization has reviewed the "works with" category and has completed that portion of the form.
ΑU	THORIZED CONTACT SIGNATURE REQUIREMENT - ACCOUNTABILITY AND ACKNOWLEDGEMENTS
	I acknowledge the need for proper I.D. verification for the CRRP to conduct a complete risk assessment, and the critical importance of my organization diligently carrying its duties in this regard. Any false statements or deliberate omissions on a consent form filed with the CRRP may result in the inability of the CRRP to accurately determine whether the applicant poses a risk to children or vulnerable adults.
	On behalf of the organization, I confirm that the volunteer's/applicant's primary and secondary I.D. have been verified.
AU	THORIZED CONTACT NAME: SIGNATURE:
SEC	TION 2: FOR VOLUNTEER USE
CC	NSENT TO A CRIMINAL RECORD CHECK - VOLUNTEER CHECKLIST
	I have completed the attached consent form truthfully, clearly and legibly, and signed and dated it.
	My volunteer organization has verified my I.D. in person to confirm my identity and ensure that the information on my consent form is accurate.
	My organization will retain the original consent form and will forward a copy to the CRRP on my behalf.
	I have read and understand the Consent for Release of Information and Acknowledgements (below) and information regarding the Freedom of Information and Protection of Privacy Act (FOIPPA) on Page 2.
CO	NSENT FOR RELEASE OF INFORMATION AND ACKNOWLEDGMENTS
<u>PU</u>	RSUANT TO THE BC CRIMINAL RECORDS REVIEW ACT:
	I hereby consent to a check of criminal charges and convictions to determine whether I have a conviction or outstanding charge for any relevant or specified offence(s) under the Criminal Records Review Act. I understand that providing my Driver's Licence number or BCID number pursuant to this criminal record check authorization will facilitate identification requirements; and, in accordance with Sections 32(b) and 33.1(1)(b) of the <i>Freedom of Information and Protection of Privacy Act</i> (FOIPPA), I hereby consent to the release of my Driver's Licence number or BCID number, name, date of birth and gender to the Insurance Corporation of British Columbia by the CRRP for ID verification purposes.
	I hereby consent to a check of all available law enforcement systems, including any local police records.
	I hereby consent to a Vulnerable Sector search to check if I have been convicted of and received a record suspension (formerly known as a pardon) for any sexual offences as per the <i>Criminal Records Act</i> . For more information on Vulnerable Sector searches, please visit the RCMP website: http://www.rcmp-grc.gc.ca/en/faqs-about-vulnerable-sector-checks
	I understand that as part of the Vulnerable Sector search, I may be required to submit fingerprints to confirm my identity.
	I hereby authorize the release to the Deputy Registrar any documents in the custody of the police, the courts, corrections, and crown counsel relating to any outstanding charges or convictions of any relevant or specified offence(s) as defined under the <i>Criminal Records Review Act</i> or any police investigations, charges, or convictions deemed relevant by the Deputy Registrar.
	Where the results of a check indicate that a criminal record or outstanding charge for a relevant or specified offence(s) may exist, I agree to provide my fingerprints to verify any such criminal record.
	My organization and I will be notified that I have an outstanding charge or conviction for a relevant of specified offence(s), and that the matter has been referred to the Deputy Registrar for review.
	The Deputy Registrar will determine whether or not I present a risk of physical or sexual abuse to children and/or physical, sexual, or financial abuse to vulnerable adults as applicable; the determination will include consideration of any relevant or specified offence(s) for which I have received a record suspension (formerly known as a pardon).

 $\begin{tabular}{lll} \textbf{Website:} & \textbf{https://www2.gov.bc.ca/gov/content/safety/crime-prevention/criminal-record-check Phone:} & \textbf{1-855-587-0185} & \textbf{(Option 2)} \\ \end{tabular}$ 



#### **VOLUNTEER CONSENT TO A CRIMINAL RECORD CHECK**

IMPORTANT: Please read information and instructions on Page 1. To avoid processing delays, ensure all relevant fields are complete and the form is dated and signed. Providing your Driver's Licence Number or BCID number may expedite the process.

Your organization must complete the 'WORKS WITH' category portion of the form.

WORKS WITH (choose one): ch	ildren	vulnerable a	•			and vulnera	ble a	dults
PART 1: APPLICANT INFORMATION		Valificiable 8	addits		or migrori	ana vamora	010 0	
Legal Surname / Last name:		Legal Given / First Name:			Legal Middle Name:			
Date of Birth:	Sex:	M	Birthp	lace:				
Additional Names (Alias, Maiden Name	. etc.):							
Surname / Last Name:		•			Middle Name:			
Mailing Address:		City:	P	rovince:	Country: Pos		ostal Code:	
Residential Address (If different from at	City:		Province:		country:	P	ostal Code:	
Contact Area Code & Phone No.	Driver's Lice			nce or BCID #:				
DART 2: VOLUNTEER ORGANIZATIO	NUNEODI	MATION						
PART 2: VOLUNTEER ORGANIZATION To be completed by Authorized Cont		WATION						
Volunteer Organization Name:	act.							
Authorized Contact Name and Title								
Tradition 200 Contact Name and This								
ID Number (Provided to the organization from the C	CRRP):							
Mailing Address:		City:		Provinc	e: Country:			Postal Code:
Office Area Code & Phone No:								
PART 3: POSITION WITH VOLUNTEE	R ORGAN	NIZATION						
Volunteer's position/Job Title with volun								
PART 4: CONSENT FOR RELEASE O								
I have read and understand the Consent for Releby my signature below:	ase of Inform	nation and Acknowled	dgemen	ts on Page	1. I hereby	consent to the	se ten	ms as indicated
Applicant Signature			Date Signed YYYY / MM / DD				YYYY / MM / DD	
FREEDOM OF INFORMATION AND PROTECTION OF P section 4(1) and section 26(c) of the Freedom of Informatic Records Review Act for the release of criminal records infocontact the Policy Analyst, Criminal Records Review Progr	on and Protection from acco	n of Privacy Act (FOIPPA) rdance with the FOIPPA.	). The info If you hav	ormation provi ve questions a	ided will be us about the colle	ed to fulfil the requetion of your perso	uiremen onal info	ts of the Criminal

**Website:** https://www2.gov.bc.ca/gov/content/safety/crime-prevention/criminal-record-check **Phone:** 1-855-587-0185 (Option 2)