

CONSENT TO DISCLOSURE OF PERSONAL INFORMATION CANADIAN EMPLOYMENT SCREENING

PLEASE PRINT (To be completed by applicant)

Surname (Provide previous name/s prior to application if applicable)			First Name	Second [Middle] Name	
Maiden Name or Other Surnames Used (if applicable):			Place of Birth (If other than Canada, please also note date of entry to Canada):		
Date of Birth (YY-MM-DD)	Sex	Phone #	Driver's Licence Number	SIN	
Number	Street	Apt / Unit	City/Province/Country		Postal Code

*** Note: Provide previous addresses if you did not reside at the above address for more than five years**

Number	Street	Apt/Unit	City/Province/Country	Postal Code
Number	Street	Apt/Unit	City/Province/Country	Postal Code

Note: Information is Collected and Disclosed According to Section 29(1) & 32 of the MFIPPA as well as PIPA & PIPEDA

<p>RELEASE AUTHORIZATION AND WAIVER</p> <p><u>AUTHORIZATION TO RELEASE INFORMATION</u></p> <p>I certify that the information set out by me in this application is true and correct to the best of my ability. I consent to the release of a Credit Report and/or Driver's Abstract to Canadian Employment Screening and its partner.</p>	<p>SEARCH AUTHORIZATION</p> <p>I HEREBY CONSENT TO THE SEARCH AND RELEASE OF:</p> <p>A. Credit Report B. Driver's Abstract</p> <p>Signed this _____ day of _____, 20____</p> <p>_____</p> <p style="text-align: center;">(Signature of Applicant)</p>
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