

# WINNIPEG POLICE SERVICE NON-WPS MEMBER SECURITY CLEARANCE CHECK AND CONFIDENTIALITY AGREEMENT

NAME, TELEPHONE NUMBER AND BUSINESS ADDRESS OF EMPLOYER:	NAME & PHONE NUMBER OF CITY CONTACT PERSON IN CHARGE OF THE PROJECT REQUIRING THE SECURITY CLEARANCE CHECKS				
NATURE & LOCATION OF WORK BEING DONE FOR WINN	IPEG POLICE SERVICE:				
WARNING: ANY FALSE OR INCOMPLETE INFORMATION INCOMPLETE APPLICATION	ON MAY RESULT IN REJECTION OF THIS APPLICATION S WILL NOT BE PROCESSED				
EMPLOYEE INFORMATION					
LAST NAME:	GIVEN NAMES:				
BIRTH NAME OR OTHER NAME(S) USED:	erent from above)				
WALE FEMALE DATE OF BIRTH.	BIRTH PLACE:				
ADDRESS:	CITY: PROVINCE:				
	AL PHONE:				
AUTHORIZATION					
I, her	reby consent to the Winnipeg Police Service collecting				
my personal information from any public body, person, employer, or government institution for the purpose of conducting a security check in connection with my contract or association with the Winnipeg Police Service. This authorization, including a copy or facsimile thereof, is my consent to any public body, person, employer or government institution to release true copies of any records containing my personal information to the Winnipeg Police Service. (Security clearance checks expire after a period of one year).					
CONFIDENTIALITY AGREEMENT					
I,					
Signature of Witness Signature	of Applicant Date				
* If the applicant is under the age of 18 they must have a parent or guardian sign					
Name of Parent or Guardian Signature	of Parent or Guardian Date				
WINNIPEG POLICE SERVICE - FOR OFFICE USE ONLY  This personal information will be collected pursuant to The Freedom of Information and Protection of Privacy Act  C.C.S.M.cF175 (title, name, phone # of person who) can answer questions about the collection of this information.					
RESULT OF CHECK GRANTED	DENIED				
PROCESSED BY:	F Data				



## WINNIPEG POLICE SERVICE LEVEL 2 SECURITY CHECKS AND LEVEL 3 RENEWALS

#### \*\*\*APPLICATIONS WILL NOT BE CONSIDERED UNLESS THEY ARE COMPLETED IN FULL AND LEGIBLE\*\*\*

Please provide the following information in the following format:

<u>Part 1</u> - A list of names (including maiden names), addresses, dates of birth, phone numbers and occupations of all <u>immediate</u> family members (including parents) and their spouses / common law. Include your spouse / common-law, boyfriend, girlfriend and their family members. This includes stepbrothers and sisters and half-brothers and sisters.

<u>Part 2</u> -A list of names, dates of birth, addresses, phone numbers and occupations of at **least four (4) of your closest friends.** 

<u>Part 3</u> - The name of your immediate supervisor, their position within their organization, their phone number, mailing address and email address.

Part 4 - A list of all your past addresses and dates when resided.

<u>Part 5</u> - Photocopies of <u>two (2) valid pieces of government issued identification</u>:

- Primary (Photo) Identification must be one of the following:
  - o Driver's License
  - Passport
  - Permanent Resident Card
  - Aboriginal Status Card
  - Manitoba Public Insurance Identification Card
- Secondary identification must be one of the following:
  - Birth Certificate
  - o Social Insurance Card
  - Provincial Health Card
  - o Citizenship Card
  - o Firearms License
  - Immigration Papers
  - National Defense Card
  - Nexus Card
  - FAST CARD from Canada Border Services Agency

Part 6 - Security Check Clearance form P-608. Must be signed and dated.

All security clearances expire after a period of one (1) year from date of clearance or at the discretion of the WPS.

Level 2 - Contact the WPS Security Officer for further information on the security clearance process or on renewal procedures at <a href="mailto:wps-securityclearance@winnipeg.ca">wps-securityclearance@winnipeg.ca</a>

Level 3 - Contact the WPS Human Resources Recruiting Sergeant for further information on the security clearance process or on renewal procedures at WPS-HRRecruitingSgt@winnipeg.ca.

### PART 1 - COMPLETE LIST OF <u>ALL</u> IMMEDIATE FAMILY MEMBERS \*\*Please continue on another piece of paper if 15 spaces are not enough for ALL immediate family members.

	Name Surname / Given (Relationship)	Date of Birth YY/MM/DD	Address	Phone Number	Occupation / Employer
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					

### PART 2 - COMPLETE LIST OF AT LEAST 4 FRIENDS

	Name Surname/Given	Date of Birth YY / MM / DD	Address	Phone Number	Occupation / Employer
1.					
2.					
3.					
4.					
5.					

### **PART 3 – SUPERVISOR INFORMATION**

	Name Surname/Given	Date of Birth YY/MM/DD	Business Address	Email address and contact phone numbers	Occupation / Title
1.					

### PART 4 - COMPLETE LIST OF YOUR PAST ADDRESSES & DATES OF WHEN RESIDED

TART 4 COMM LETE LIGHT OF TOOK TAGET ADDRESSES & DATES OF WHEN RESIDED				
	Address	Dates Resided		
1.				
2.				
3.				
4.				
5.				
6.				

PART 5 - Photocopies of <u>two</u> pieces of government issued identification (ie. valid photo drivers' license, valid passport, birth certificate, etc)

PART 6 – WPS Security Check Clearance form P-608.