ATTESTATION – SCREENING DISCLOSURE FORM



Name					
	First Name	Middle Na	ame	ast Name	
Other Names Used					
Current Permanent					
Address	Iress Street Name		City	Province	Postal Code
Club / PSO affiliation			Email		
(if applicable)					
Date of Birth			Gender		

	d the loss of volunteer responsibilities or oth	•		entional omission
1.	Have you been convicted of a crime?	Yes	No	
	If so, please complete the following informa	ition for eac	h conviction. Attach	additional pages as
	necessary.			
	Name or Type of Offense:			
	Name and jurisdiction of Court/Tribunal:			
	Year Convicted:			
	Penalty or Punishment Imposed:			
	Further Explanation:			
2.	Have you ever been disciplined or sanctione	d by a sport	governing body or b	y an independent
	body (e.g. private tribunal, government ager	ncy, etc.) or	dismissed from a co	aching or volunteer
	position? Yes No			
	If so, please complete the following informa	tion for eac	h disciplinary action	or sanction. Attach
	additional pages as necessary.			
	Name of disciplining or sanctioning body:			
	Date for discipline, sanction or dismissal:			
	Reasons for discipline, sanction or dismissal			
	Penalty or Punishment Imposed:			

Further Explanation:



3.	Are criminal charges or any other sanctions, including those from a sport body, private tribunal or government agency, currently pending or threatened against you? Yes No							
	If so, please complete the following information for each pending charge or sanction. Attach							
	additional pages as necessary.							
	Name of Type of offense:							
	Name and jurisdiction of Court/Tribunal:							
	Name of disciplining or sanctioning body:							
	Further Explanation:							
PF	RIVACY STATEMENT							
	By completing and submitting this Screening Disclosure Form, I consent and authorize Dive Ontario to collect, use and disclose my personal information. including all information provided on the Attestation - Screening Disclosure Form as well as my Enhanced Police Information Check and/or Vulnerable Sector Check (when permitted by law) for the purposes of screening, implementation of the Screening Policy, administering membership services, and communicating with National Sport Organizations, Provincial/Territorial Divisions, Clubs , and other organizations involved in the governance of sport. Dive Ontario does not distribute personal information for commercial purposes.							
CE	ERTIFICATION							
	I hereby certify that the information contained in this Attestation - Screening Disclosure Form is accurate, correct, truthful and complete.							
	I further certify that I will immediately inform Dive Ontario of any changes in circumstances that would alter my original responses to this Attestation - Screening Disclosure Form. Failure to do so may result in the withdrawal of volunteer responsibilities or other privileges and/or disciplinary action.							
	NAME: DATE:							

SIGNATURE: