

Name of Property Owner/Property Management Company	<b>FOR OFFICE USE ONLY</b>		Request no.
			Person no.
			Appointment no.
			CPIC JEIN
Location (full address)			

1. Legal last/family name of applicant	Legal first name(s)	Legal second name(s)	Legal former name, maiden name, Aliases etc.
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Street no. street name or Lot	Apt. no.	Email Address
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City, Town, Village, R.R.	Postal code	Residence phone no.	Work phone no.
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2. Do you presently hold a position with Peace Officer status in Nova Scotia or any other province, state or country?  Yes  No  
 If yes, give details. **Note: restrictions for employment may apply.**

**3. The following information is required for a police records background check.**

<input type="checkbox"/> Male	Date of birth (y/m/d)	Place of Birth	Distinguishing marks	Height	Weight	Eye colour	Hair colour
<input type="checkbox"/> Female	/ /						

4. Driver License No.	Province/State of Issue	Or government issued photo identification and type

5. List place of residence for the Past 5 years. Exclude Present address (Street number, name or lot, apt. no., city, village, R.R., postal code)	Year From	Year To

6 (a) Have you been convicted of an offence under any federal, provincial or territorial statutes for which you have not received a pardon? (For example: Criminal Code of Canada, Controlled Drugs and Substances Act, Liquor Control Act, Youth Criminal Justice Act )	<input type="checkbox"/> yes <input type="checkbox"/> no
(b) Are you currently under a probation or parole order or conditional sentence, or peace bond?	<input type="checkbox"/> yes <input type="checkbox"/> no
(c) Have you pled guilty or been found guilty of any offence for which you have been absolutely discharged or conditionally discharged?	<input type="checkbox"/> yes <input type="checkbox"/> no
(d) Have you been charged with any offence which is still pending?	<input type="checkbox"/> yes <input type="checkbox"/> no
(e) Do you have any outstanding fines in default?	<input type="checkbox"/> yes <input type="checkbox"/> no
(f) Have you been charged with any criminal code offence with a final disposition date in the past 3 years?	<input type="checkbox"/> yes <input type="checkbox"/> no

**An answer of "yes" may require further information but does not necessarily affect the granting of an appointment**  
**If you answered yes to any of the above, GIVE ALL details.** (If space insufficient, complete on separate sheet and attach.)

Offence	Date	Place	Police Department	Sentence

**7. Current and previous record of employment for the past 5 years. (If space is insufficient, complete on separate sheet and attach.)**

Employer's Name and Address	Type of Work and Department	Period Employed		Reason for leaving
		From (M/Y)	To (M/Y)	

**Declaration and Authority for Release of Information**

By signing this application:

- I consent to a police records and background check.
- I consent to the disclosure of the results of a police records and background check, and authorize any police service that is requested to perform such a check to disclose any or all information obtained by the police records background check, to the appropriate authority or any person authorized by them.
- I consent to the sharing of this information in other provinces, states, or countries for use consistent with this application.
- I understand that the decision of this application will be communicated to my prospective employer.
- I agree that if an appointment is granted pursuant to this application, this authorization and consent by me shall remain in force for the duration of the period for which the appointment is issued.
- I will promptly report to my employer and the Department of Justice, Policing and Victim Services Division-Security Programs, any charge or conviction for a provincial and/or federal offence that occurs after the date I sign this authorization.
- I understand that pursuant to Section 90(3) of the *Police Act*, before entering upon my duties as a special constable, I must take and subscribe such oath or affirmation as is prescribed by regulation.

**I certify that**

- I have read and understand all parts of this application form, and
- the information provided by me in this application is true and correct to the best of my knowledge and belief.

**Caution**

- It is an offence to knowingly furnish false information in any application under the Act. In addition, the appointment may be refused.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

**TO BE COMPLETED BY EMPLOYER (IF APPLICABLE)**

\_\_\_\_\_  
Employer's signature (if applicable)

\_\_\_\_\_  
Name of employer

\_\_\_\_\_  
Phone number

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Position

\_\_\_\_\_  
Date

**TO BE COMPLETED BY THE PROPERTY OWNER/PROPERTY MANAGEMENT COMPANY**

This appointment is for the enforcement of Parking Regulations under the *Motor Vehicle Act*, and/or parking by-laws. Please provide SPECIFIC DUTIES and JURISDICTION/CIVIC ADDRESS. Failure to provide this information may result in the return of the application.

\_\_\_\_\_  
Signature of property owner/management company

\_\_\_\_\_  
Name of company

\_\_\_\_\_  
Phone number

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Position

\_\_\_\_\_  
Date

**TO BE COMPLETED BY HALIFAX REGIONAL MUNICIPALITY - PARKING ENFORCEMENT**

Approved by the Halifax Regional Municipality, Parking Enforcement, that this application for an appointment as a Special Constable is required and recommended.

\_\_\_\_\_  
Approved by (signature)

\_\_\_\_\_  
Position

\_\_\_\_\_  
Phone number

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Date

**The following supporting documents must be submitted with this application:**

- 1 current full-face photograph of the applicant
- immigration papers, Canadian citizenship papers or work visa (if not born in Canada)
- copy of government issued photo identification (e.g. driver's license)

Any questions relating to this appointment may be directed to:

Department of Justice, Public Safety Division  
PO Box 7 Halifax, NS B3J 2L6  
Phone: (902)424-2905 Fax: (902)424-4308

**Comments:**