

Instructions for Security Clearance Form TBS 330-60E



- All applicants, unless advised otherwise, will be cleared at a "Site Access Clearance" level.
- Government documents must not be altered (e.g., do not: write outside margins, draw lines through the sections or use whiteout).
- IF space provided is not sufficient, PRINT OFF an additional sheet of Form TBS 330-60E and ATTACH it to your application.
- TYPE or PRINT in block letters - use blue or black ink.
- FILL IN your Surname, Given Name and Birthdate on the **top of each page**.
- PROVIDE original signed forms. Faxed or scanned copies will not be processed.
- **Any expenses incurred during the security clearance process are the sole responsibility of the applicant, and will not be reimbursed by Bruce Power.**

Site Access

Applicants that have 5 years or more of Continuous Service with Bruce Power

Applicants renewing their clearance are required to complete Form TBS/SCT #330-60E Sections B to P with the exception of Sections E & M.

Applicants that have a Break in Service > 30 days in the last 5 years, Your Clearance has Expired OR you are a New Hire

Applicants renewing or applying for their clearance are required to complete Form TBS/SCT #330-60E Sections B to P with the exception of Section E.

Proof of Education, Employment and Current Address are required.

Level 2 Clearances require additional information:

You will have been notified if you are required to complete a Level 2 Clearance.

All Level 2 clearances require the approval of the Section Manager, Security Clearances in order to be processed. E-mail: SectionManagerSecurityClearance@brucepower.com

All sections must be completed (A-P). For Section H and Section I, provide 10 years of history.

Level 2 clearances are required to undergo a Credit Check.

Legal Name Change:

Individuals must inform the Security Clearance and Identification Office of a legal name change. Forms to be completed are: Form TBS/SCT #330-23E, and Form TBS/SCT #330-60E Sections B, D, H and P, including Birth Certificate, Driver's Licence and Marriage Certificate (if applicable).

Certificate Transfer:

Applicants transferring security clearance from another Canadian nuclear facility to Bruce Power are required to complete: Form TBS/SCT #330-23E, and Form TBS/SCT #330-60E Sections B to P with the exception of Section E, including two pieces of valid government issued photo identification.

Employment/Education verification is not required for Certificate Transfers.

Certificate Transfers are not valid for any applicant applying for a permanent Bruce Power position.

Instructions for Personnel Screening, Consent and Authorization

Form TBS 330-23E

SECTION B: BIOGRAPHICAL INFORMATION (continued)

IF you are unable to provide all criminal history, you must OBTAIN at your own expense a Criminal Record Name Check, and PROVIDE Bruce Power with an original and current document. If space is not sufficient, include information on a separate sheet.

Fingerprinting may be required to verify identity or to fulfil further risk assessment criteria.

Criminal History Checks for outside Canada:

IF you have spent six (6) months or more out of country, or at a Security Clearance Specialists discretion, you must PROVIDE a Criminal Record Name Check for that country:

1. United States: Identity History Summary Checks from the Federal Bureau of Investigation (F.B.I.) or National Background Check Channelling link <http://www.nationalbackgroundcheck.com>
2. United Kingdom: Contact New Scotland Yard, or obtain information through a third party vendor such as Creative Services
Telephone 020 71613500 or <http://content.met.police.uk/Site/infomationaboutyourself>
The Criminal Records Office can be reached via email at:
customer.services@acro.pnn.police.uk
3. For all other countries: Contact a third party vendor authorized to provide Criminal Record Checks, such as:

CREATIVE SERVICES, INC.

Attention: International 64 Pratt Street Mansfield, MA 02048-1927

Phone: (508) 339-5451 Fax: (508) 339-2352

international@creativeservices.com

CANADIAN EMBASSY

www.cic.gc.ca/english/information/security/police-cert

SECTION C: CONSENT AND VERIFICATION

Ensure your Surname, Given name and Birthdate are on the top of Page 2.

Using a blue or black ink pen, place a check mark in the box and initial under applicant's initials in the following locations:

1. **Date of Birth**
2. **Criminal Record Check**
3. **Credit Check - (Required for Level 2 Security Clearance)**
4. **Loyalty**
5. **Other - (Not required)**

SECTIONS D and E: REVIEW AND APPROVAL

Sections D & E - leave blank.

Instructions for Personnel Screening, Consent and Authorization Form TBS 330-23E



Completed Form TBS 330-23E **must** accompany the Security Clearance Form TBS 330-60E - See TBS 330-60E instructions for submitting forms to Bruce Power upon completion.

PROVIDE a clear photocopy of your Driver's Licence or Photo Identification card **and** one of the following:

Birth Certificate, Passport, landed immigrant paperwork, permanent residence card, or proof of Canadian citizenship (Health cards not accepted).

TYPE or legibly PRINT in block letters using blue or black pen

Any expenses incurred during the security clearance process are the sole responsibility of the applicant, and will not be reimbursed by Bruce Power.

SECTION A: ADMINISTRATIVE INFORMATION

- ENSURE a Bruce Power Contract Manager signs-off in the Name of Official field.
- INCLUDE your Bruce Power employee number (if applicable).

The rest of Section A will be completed by Security.

SECTION B: BIOGRAPHICAL INFORMATION (To be completed by the applicant)

INCLUDE an **active** and **legible** email address in Section B (print only).

- PROVIDE 5 years of your Residential history for Site Access Security Clearance.
- PROVIDE 10 years of your Residential history for Level 2 Security Clearance.

Note:

If applicants have a **Criminal History** and have not received a pardon or record suspension, then check "YES" and include details of criminal convictions. Bruce Power may deny your clearance application based on criminal history or failure to provide full disclosure.

Between clearances, any new criminal charges must be reported to:
SectionManagerSecurityClearance@brucepower.com

Instructions for Security Clearance Form TBS 330-60E

Instructions:

Section A: **ADMINISTRATIVE INFORMATION** - FILL IN your Bruce Power employee number, if applicable. The rest of Section A will be completed by Security.

Section B: **BIOGRAPHICAL INFORMATION** - to be completed by applicant in full.

Section C: **SECURITY SCREENING** - to be completed by applicant in full.

Section D: **MARITAL STATUS/COMMON-LAW PARTNERSHIP** - to be completed by applicant in full.

- Section D1 - Married or Common Law - COMPLETE section (provide maiden name).
- IF spouse is a homemaker, unemployed or retired, INDICATE on forms (do not leave blank).
- Section D2 - Separated, Widowed or Divorced within the last 5 years - COMPLETE section.

Section E: **IMMEDIATE RELATIVES** - to be completed by **Level 2 Security Clearance applicants only**.

- FILL IN all children 18 years and over that you and your spouse or common law partner have a parental relationship with.
- FILL IN your father, mother, brothers, and sisters. Include half or step relatives in this category.
- FILL IN your current spouse's or common-law partner's mother and father.
- IF any person is deceased, FILL IN date of death and last address while living.

Section F: **CRIMINAL CONVICTIONS IN AND OUTSIDE OF CANADA** - to be completed by applicant.

Reference FORM-10379, Instruction for Personnel Screening, Consent and Authorization Form TBS 330-23E for instruction on completing this section.

Section G: **FOR COMPLETION BY PERSONS BORN OUTSIDE CANADA OR BORN IN CANADA HOLDING DUAL CITIZENSHIP** - to be completed by applicant in full.

Section H: **RESIDENCE** - to be completed by applicant in full.

Note for rural areas, FILL IN civic/fire number, and lot and concession number or street number (no Rural Route numbers).

Site Access

5 continuous years of residential information - INCLUDE phone numbers.

Level 2

10 continuous years of residential information - INCLUDE phone numbers.

Instructions for Security Clearance Form TBS 330-60E

Section I:

EMPLOYMENT - to be completed by applicant in full.

This Section may include Employment, unemployment, and Educational information.

Site Access

5 continuous years of employment information.

Level 2

10 continuous years of employment information.

Verification

All verification documents must be translated to English or French.

Current Employment:

- PROVIDE a current letter on company letterhead, verifying employee name and duration of employment (YYYY/MM to YYYY/MM) signed and dated by a company official.

All Other Employment - PROVIDE one of the following:

- Copy of Record of Employment (ROE);
- Copy of T4 slips for each year worked at that job (*Financial information can be blacked out*);
- Letter of company letterhead, verifying employee name and duration of employment (YYYY/MM to YYYY/MM) signed and dated by a company official.

Unemployment/Retirement - PROVIDE one of the following:

- Copy of T4Es or T4As;
- Printout of "My Current Claims" report;
- If you are unemployed and not receiving Employment Insurance (EI) Benefits, a letter dated and signed stating your name and period of time you were unemployed (YYYY/MM to YYYY/MM) and home address at time of unemployment.

Self Employed:

- Name of Company - provide business name; and
- Provide a copy of your Business Licence or Articles of Incorporation.

Education:

- If you were attending a school during this time, a Dean or Faculty member is your Supervisor's name while in school. Include school phone number and copy of your transcripts.

Section J:

FOREIGN EMPLOYMENT - to be completed by applicant in full.

All verification documents must be translated for any foreign employment.

Section K:

TRAVEL - to be completed by applicant (excluding US and Mexico).

FILL IN countries visited within the last five years for personal travel other than Canada.

Section L:

FOREIGN ASSETS - to be completed by applicant in full.

Section M:

CHARACTER REFERENCES - to be completed by applicant in full.

Character references must be people who have known you well for three years or more.

Relatives **cannot** be used as Character References.

If character references are retired or homemakers, please indicate on the form.

Neighbourhood references must have known you for 6 months at your present or previous residence.

A character reference **cannot** also be used as a neighbourhood reference.

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Section N: **EDUCATION** - to be completed by applicant in full.

Content in **Section N** must match the education proof you provide.

INCLUDE one of the following as proof of education:

- Certification of Qualification.
- Transcript.
- Letter (must include name, student ID# and dates attended - dated and signed).
- Photocopy of original diploma verified by a trusted third party (non-family member) stating it is a true copy of the original document signed and dated).

Section O: **MILITARY SERVICE** - to be completed by applicant in full.

IF not covered in employment section, FILL IN last or current unit and dates of total service in the Armed Forces.

Section P: **CERTIFICATION** - to be completed by applicant in full.

Provide signature, date, contact telephone numbers.

Contractors must **SEND** completed forms to their Bruce Power Contract Manager, or Union for approval **prior to** submission to the Bruce Power Security Clearance Office.

Forward completed forms, in a sealed envelope to:

Bruce Power
177 Tie Road
Tiverton, ON N0G 2T0
C/O Security Clearance Office - B06

OR leave in the drop box (located by the mail desk in the lobby of Bruce Power Building B06).

Please direct any questions to: Bnpdsecurityclearancesext4581@brucepower.com



**PERSONNEL SCREENING,
CONSENT AND AUTHORIZATION FORM**

OFFICE USE ONLY		
Reference number	Department/Organization number	File number

NOTE: For Privacy Act Statement refer to Section C of this form and for completion instructions refer to attached instructions.
Please typewrite or print in block letters.

A ADMINISTRATIVE INFORMATION (To be completed by the Authorized Departmental/Agency/Organizational Official)

<input type="checkbox"/> New	<input type="checkbox"/> Update	<input type="checkbox"/> Upgrade	<input type="checkbox"/> Transfer	<input type="checkbox"/> Supplemental	<input type="checkbox"/> Re-activation
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The requested level of reliability/security check(s)

☐ Reliability Status ☐ Level I (CONFIDENTIAL) ☐ Level II (SECRET) ☐ Level III (TOP SECRET)

☐ Other _____

PARTICULARS OF APPOINTMENT/ASSIGNMENT/CONTRACT

☐ Indeterminate ☐ Term ☐ Contract ☐ Industry ☐ Other (specify secondment, assignment, etc.) _____

Justification for security screening requirement _____

Position/Competition/Contract number	Title		Group/Level (Rank if applicable)
Employee ID number/PRI/Rank and Service number (if applicable)	If term or contract, indicate duration period ▶	From	To
Name and address of department / organization / agency	Name of official	Telephone number ()	Facsimile number ()

B BIOGRAPHICAL INFORMATION (To be completed by the applicant)

Surname (Last name)		Full given names (no initials) underline or circle usual name used		Family name at birth			
All other names used (i.e. Nickname)		Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of birth Y M D	Country of birth	Date of entry into Canada if born outside Canada Y M D		
RESIDENCE (provide addresses for the last five years, starting with the most current) Home address			Daytime telephone number ()		E-mail address		
1	Apartment number	Street number	Street name		Civic number (if applicable)	From Y M	To present
	City		Province or state	Postal code	Country	Telephone number ()	
2	Apartment number	Street number	Street name		Civic number (if applicable)	From Y M	To Y M
	City		Province or state	Postal code	Country	Telephone number ()	
Have you previously completed a Government of Canada security screening form? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, give name of employer, level and year of screening. _____ Y				

CRIMINAL CONVICTIONS IN AND OUTSIDE OF CANADA (see instructions)

Have you ever been convicted of a criminal offence for which you have not been granted a pardon? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, give details. (charge(s), name of police force, city, province/state, country and date of conviction) ▼	
Charge(s)	Name of police force		City
Province/State	Country	Date of conviction ▶ Y M D	



PERSONNEL SCREENING,
CONSENT AND AUTHORIZATION FORM

PROTECTED (when completed)

Surname and full given names	Date of birth
	Y M D

C CONSENT AND VERIFICATION (To be completed by the applicant and authorized Departmental/Agency/Organizational Official)

Checks Required (See Instructions)	Applicant's initials	Name of official (print)	Official's initials	Official's Telephone number
1. <input type="checkbox"/> Date of birth, address, education, professional qualifications, employment history, personal character references				()
2. <input type="checkbox"/> Criminal record check				()
3. <input type="checkbox"/> Credit check (financial assessment, including credit records check)				()
4. <input type="checkbox"/> Loyalty (security assessment only)				
5. <input type="checkbox"/> Other (specify, see instructions)				()

The Privacy Act Statement

The information on this form is required for the purpose of providing a security screening assessment. It is collected under the authority of subsection 7(1) of the *Financial Administration Act* and the Government Security Policy (GSP) of the Government of Canada, and is protected by the provisions of the *Privacy Act* in institutions that are covered by the *Privacy Act*. Its collection is mandatory. A refusal to provide information will lead to a review of whether the person is eligible to hold the position or perform the contract that is associated with this Personnel Screening Request. Depending on the level of security screening required, the information collected by the government institution may be disclosed to the Royal Canadian Mounted Police (RCMP) and the Canadian Security Intelligence Service (CSIS), which conduct the requisite checks and/or investigation in accordance with the GSP and to entities outside the federal government (e.g. credit bureaus). It is used to support decisions on individuals working or applying to work through appointment, assignment or contract, transfers or promotions. It may also be used in the context of updating, or reviewing for cause, the reliability status, security clearance or site access, all of which may lead to a re-assessment of the applicable type of security screening. Information collected by the government institution, and information gathered from the requisite checks and/or investigation, may be used to support decisions, which may lead to discipline and/or termination of employment or contractual agreements. The personal information collected is described in Standard PIB PSU 917 (Personnel Security Screening) which is used by all government agencies, except the Department of National Defence PIB DND/PPE 834 (Personnel Security Investigation File), RCMP PIB CMP PPU 065 (Security/Reliability Screening Records), CSIS PIB SIS PPE 815 (Employee Security), and PWGSC PIB PWGSC PPU 015 (Personnel Clearance and Reliability Records) used for Canadian Industry Personnel. Personal information related to security assessments is also described in the CSIS PIB SIS PPU 005 (Security Assessments/Advice).

I, the undersigned, do consent to the disclosure of the preceding information including my photograph for its subsequent verification and/or use in an investigation for the purpose of providing a security screening assessment. By consenting to the above, I acknowledge that the verification and/or use in an investigation of the preceding information may also occur when the reliability status, security clearance or site access are updated or otherwise reviewed for cause under the Government Security Policy. My consent will remain valid until I no longer require a reliability status, a security clearance or a site access clearance, my employment or contract is terminated, or until I otherwise revoke my consent, in writing, to the authorized security official.

Signature Date (Y/M/D)

D REVIEW (To be completed by the authorized Departmental/Agency/Organizational Official responsible for ensuring the completion of sections A, B and C)

Name and title	Telephone number
Address	Facsimile number

E APPROVAL (To be completed by authorized Departmental/Agency/Organizational Security Official only)

I, the undersigned, as the authorized security official, do hereby approve the following level of screening.

Reliability Status	
<input type="checkbox"/> Approved Reliability Status	<input type="checkbox"/> Not approved
_____ Name and title	
_____ Signature	
_____ Date (Y/M/D)	
Security Clearance (if applicable)	
<input type="checkbox"/> Level I	<input type="checkbox"/> Level II
<input type="checkbox"/> Level III	<input type="checkbox"/> Not recommended
_____ Name and title	
_____ Signature	
_____ Date (Y/M/D)	
Comments	

PHOTO
(for Level III T.S.,
and/or upon request
- see instructions)



SECURITY CLEARANCE FORM

OFFICE USE ONLY		
Reference number	Department number	File number

The Privacy Act Statement

The information on this form is required for the purpose of providing a security assessment. It is collected under the authority of subsection 7(1) of the *Financial Administration Act* and the Government Security Policy (GSP) of the Government of Canada and is protected by the provisions of the *Privacy Act* in institutions that are covered by the *Privacy Act*. Its collection is mandatory. A refusal to provide information will lead to a review of whether the person is eligible to hold the position or perform the contract that is associated with this Personnel Screening Request. The information collected by the government institution may be disclosed to the Royal Canadian Mounted Police (RCMP) and the Canadian Security Intelligence Service (CSIS), which conduct the requisite checks and/or investigation in accordance with the GSP and to entities outside the federal government (e.g. credit bureaus). It is used to support decisions on individuals working or applying to work through appointment, assignment or contract, transfers or promotions. It may also be used in the context of updating, or reviewing for cause, the reliability status, security clearance or site access, all of which may lead to a re-assessment of the applicable type of security screening. Information collected by the government institution, and information gathered from the requisite checks and/or investigation, may be used to support decisions, which may lead to discipline and/or termination of employment or contractual agreements. The personal information collected is described in Standard PIB PSU 917 (Personnel Security Screening) which is used by all government agencies, except the Department of National Defence PIB DND/PPE 834 (Personnel Security Investigation File), RCMP PIB CMP PPU 065 (Security/Reliability Screening Records), CSIS PIB SIS PPE 815 (Employee Security), and PWGSC PIB PWGSC PPU 015 (Personnel Clearance and Reliability Records) used for Canadian Industry Personnel. Personal information related to security assessments is also described in the CSIS PIB SIS PPU 005 (Security Assessments/Advice).

Please typewrite or print in block letters.

NOTE: Level I and II must complete sections A to J inclusive and P.
Level III must complete all sections.

A ADMINISTRATIVE INFORMATION (To be completed by Department/Agency/Organization)		
<input type="checkbox"/> New <input type="checkbox"/> Update	<input type="checkbox"/> Upgrade <input type="checkbox"/> Transfer	<input type="checkbox"/> Supplemental <input type="checkbox"/> Re-activation
Level <input type="checkbox"/> I (CONFIDENTIAL) <input type="checkbox"/> II (SECRET)		<input type="checkbox"/> III (TOP SECRET) <input type="checkbox"/> other _____
Department/Agency/Organization	Employee ID number/PR/IR and Service number (if applicable)	Organization number

B BIOGRAPHICAL INFORMATION (To be completed by the applicant)		
1. Surname (Last name)	2. Full given names (no initials) underline or circle usual name used	3. Family name at birth
4. All other names used (i.e. Nickname)	5. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	6. Date of birth Y M D
7. Place of birth (city)	Province/State	Country
8. Name change (other than marriage)	From	To
9. Place of change (city, province or state, and country)	10. Method (authority)	

C SECURITY SCREENING	
1. Have you previously completed a Government of Canada security screening form? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, give name of department/agency/organization, and the year and level of clearance. Y

D MARITAL STATUS/COMMON-LAW PARTNERSHIP	
Current status <input type="checkbox"/> Married <input type="checkbox"/> Common-Law Partnership <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Single	
1 A) CURRENT SPOUSE/COMMON-LAW PARTNER: Surname, given names B) Maiden Name (if applicable) C) Present citizenship of current spouse/common-law partner D) Date of marriage/common-law partnership Y M D E) City, province or state, and country of marriage/common-law partnership F) City, province or state, and country of birth G) Date of birth Y M D H) Present address (apartment number, street number, street name, civic number (if applicable), city, province or state and country) I) If separated, widowed or divorced, specify date Y M D J) Name and address of employer (job title)	
2 A) PREVIOUS SPOUSE/COMMON-LAW PARTNER: Surname, given names (cover only the past five years) B) Present citizenship of former spouse/common-law partner C) Date of marriage/common-law partnership Y M D D) City, province or state, and country of marriage/common-law partnership E) Date of divorce/separation/deceased Y M D F) City, province or state, and country of divorce G) Country of Birth (if known) H) Date of birth Y M D	

E IMMEDIATE RELATIVES (including those living outside Canada) (see instructions)	
NOTE: Do not use initials	
1 A) Full name (surname and all given names, including maiden name) B) Relationship C) City, province or state, and country of birth D) Date of birth Y M D E) Present address (apartment number, street number, street name, civic number (if applicable), city, province or state and country) F) Date of death (if applicable) Y M D G) Name and address of employer H) Job title	

Surname and full given names	Date of birth	Y	M	D
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E IMMEDIATE RELATIVES (continued)

NOTE: Do not use initials

2	A) Full name (surname and all given names, including maiden name)	B) Relationship
	C) City, province or state, and country of birth	D) Date of birth
	E) Present address (apartment number, street number, street name, civic number (if applicable), city, province or state and country)	F) Date of death (if applicable)
	G) Name and address of employer	H) Job title
3	A) Full name (surname and all given names, including maiden name)	B) Relationship
	C) City, province or state, and country of birth	D) Date of birth
	E) Present address (apartment number, street number, street name, civic number (if applicable), city, province or state and country)	F) Date of death (if applicable)
	G) Name and address of employer	H) Job title
4	A) Full name (surname and all given names, including maiden name)	B) Relationship
	C) City, province or state, and country of birth	D) Date of birth
	E) Present address (apartment number, street number, street name, civic number (if applicable), city, province or state and country)	F) Date of death (if applicable)
	G) Name and address of employer	H) Job title
5	A) Full name (surname and all given names, including maiden name)	B) Relationship
	C) City, province or state, and country of birth	D) Date of birth
	E) Present address (apartment number, street number, street name, civic number (if applicable), city, province or state and country)	F) Date of death (if applicable)
	G) Name and address of employer	H) Job title
6	A) Full name (surname and all given names, including maiden name)	B) Relationship
	C) City, province or state, and country of birth	D) Date of birth
	E) Present address (apartment number, street number, street name, civic number (if applicable), city, province or state and country)	F) Date of death (if applicable)
	G) Name and address of employer	H) Job title
7	A) Full name (surname and all given names, including maiden name)	B) Relationship
	C) City, province or state, and country of birth	D) Date of birth
	E) Present address (apartment number, street number, street name, civic number (if applicable), city, province or state and country)	F) Date of death (if applicable)
	G) Name and address of employer	H) Job title

F CRIMINAL CONVICTIONS IN AND OUTSIDE OF CANADA (see instructions)

Have you ever been convicted of a criminal offence for which you have not been granted a pardon?		If yes, give details. (charge(s), name of police force, city, province/state, country and date of conviction)
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Charge(s)	Name of police force	City
Province/State	Country	Date of conviction

G FOR COMPLETION BY PERSONS BORN OUTSIDE CANADA OR BORN IN CANADA HOLDING DUAL CITIZENSHIP (see instructions)

1. Date of entry into Canada	2. Present citizenship
3. If you are a naturalized Canadian, give the certificate number and date of issue	4. If you are not naturalized, have you applied for Canadian citizenship? Please provide copy of Immigrant Visa or Record of Landing documentation
Certificate No. _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Do you maintain citizenship of a country other than Canada? If yes, please provide the name of the country and explain why.	6. Have you used a passport other than a Canadian one? If yes, explain why.
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
(If yes) Name of Country: _____ Explain: _____	(If yes) Explain: _____

Surname and full given names	Date of birth
	<div style="display: flex; justify-content: space-around;"> YMD </div> <div style="display: flex; justify-content: space-around;"> <div style="border-bottom: 1px solid black; width: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px;"></div> </div>

H RESIDENCE (there should be no gaps)**List addresses where you have lived during the last 10 years, starting with the most current. (Rural address to include lot and civic number.)**

1	Apartment number	Street number	Street name	Civic number (if applicable)	From Y M	To present
	City		Province or state	Postal code	Country Telephone number ()	
2	Apartment number	Street number	Street name	Civic number (if applicable)	From Y M	To Y M
	City		Province or state	Postal code	Country Telephone number ()	
3	Apartment number	Street number	Street name	Civic number (if applicable)	From Y M	To Y M
	City		Province or state	Postal code	Country Telephone number ()	
4	Apartment number	Street number	Street name	Civic number (if applicable)	From Y M	To Y M
	City		Province or state	Postal code	Country Telephone number ()	
5	Apartment number	Street number	Street name	Civic number (if applicable)	From Y M	To Y M
	City		Province or state	Postal code	Country Telephone number ()	

I EMPLOYMENT (last 10 years) (see instructions for self-employed and consultants) (there should be no gaps)

Would your employment be jeopardized if your current supervisor, below, is contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No								
If yes, provide the name of an alternate employment contact and telephone number.								
Were you dismissed or asked to resign from any position(s) as listed below? <input type="checkbox"/> Yes <input type="checkbox"/> No								
If yes, give name of employer, supervisor, and date.								
Name of employer		Supervisor		Position title		Date Y M		
1	A) Name of employer - do not use initials (department/organization/agency, if applicable)			B) From Y M		To present		
	C) Job-site address (street number, street name, city, province or state and country)							
	D) Job title/Description			E) Rank and service number (if applicable)				
	F) Supervisor's name in full			G) Supervisor's telephone number ()				
2	A) Name of employer - do not use initials (department/organization/agency, if applicable)			B) From Y M		To Y M		
	C) Job-site address (street number, street name, city, province or state and country)							
	D) Job title/Description			E) Rank and service number (if applicable)				
	F) Supervisor's name in full			G) Supervisor's telephone number ()				
3	A) Name of employer - do not use initials (department/organization/agency, if applicable)			B) From Y M		To Y M		
	C) Job-site address (street number, street name, city, province or state and country)							
	D) Job title/Description			E) Rank and service number (if applicable)				
	F) Supervisor's name in full			G) Supervisor's telephone number ()				
4	A) Name of employer - do not use initials (department/organization/agency, if applicable)			B) From Y M		To Y M		
	C) Job-site address (street number, street name, city, province or state and country)							
	D) Job title/Description			E) Rank and service number (if applicable)				
	F) Supervisor's name in full			G) Supervisor's telephone number ()				

Surname and full given names	Date of birth	Y	M	D
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J FOREIGN EMPLOYMENT

1. Are you now or have you ever been employed by or acted as a consultant for a foreign government, firm, or agency?

☐ Yes

☐ No

If yes, give details (country, organization, nature of work and dates) Include military (cadets), law enforcement and security intelligence employment

SECTIONS "K" TO "O" MUST ALSO BE COMPLETED FOR LEVEL III ONLY

K TRAVEL

List countries visited within the last five years for personal travel and/or non-Government business, other than Canada, the USA and Mexico.

Country	Purpose	From		To	
		Y	M	Y	M

L FOREIGN ASSETS

Do you have any business, financial or personal assets outside Canada?

☐ Yes

☐ No

If yes, list the relevant countries (exclude stocks and mutual funds purchased in Canada)

M CHARACTER REFERENCES IN CANADA (see instructions)

List three character references (non-family members) and one neighbourhood reference

1	Name in full (no initials)	Relationship	Period known
	Complete home address		Telephone Number ()
	Complete title and business address		Business Telephone Number ()
2	Name in full (no initials)	Relationship	Period known
	Complete home address		Telephone Number ()
	Complete title and business address		Business Telephone Number ()
3	Name in full (no initials)	Relationship	Period known
	Complete home address		Telephone Number ()
	Complete title and business address		Business Telephone Number ()
Neighbourhood reference (see instructions)			
Name in full (no initials)			Telephone Number ()
Complete home address			Business Telephone Number ()

N EDUCATION

1. Name of the last school or university you attended full time	2. Student ID number (if known)	3. Location of institution	4. Period of attendance
			From Y M To Y M
5. Field of study (Diploma or degree obtained)			

O MILITARY SERVICE

Military service in the Canadian Armed Forces: Regular, Reserves and Sea, Army and Air Cadets (from the period since your 16th birthday).

1. Name and last location	2. Rank and Service no.	3. Period of service
		From Y M To Y M

P CERTIFICATION

I hereby certify that the information set out by me in this document is true and correct to the best of my knowledge and belief.

1. Signature	2. Date Y M D	3. Telephone (Home)	3. Telephone (Business)
		()	()

ALL INFORMATION SUPPLIED IS SUBJECT TO VERIFICATION BY INVESTIGATION