



SCREENING DISCLOSURE FORM

GENERAL INFORMATION

In accordance with Equestrian Canada's Screening Policy the following form must be completed by all individuals seeking to hold a position of trust or authority within Equestrian Canada(EC), which may relate to at a minimum, supervision, young people, people with a disability, or finances.

Specifically, at a minimum, EC requires the following individuals to complete this screening declaration form:

- Members of EC's Board of Directors
- EC Staff
- Members of EC Committees
- All coaches and officials registered with Equestrian Canada
- Coach license applicants
- Personnel assigned to EC competition teams, training camps, and clinics

INSTRUCTIONS

1. Download this form to your computer
2. Complete this form and sign digitally OR print, sign and scan
3. Attach completed form as a document upload in eCampus identified as Screening Disclosure Form.

FAILURE TO DISCLOSE

Failure to disclose truthful information may be considered an intentional omission and warrant one of more of the following actions:

- the loss of volunteer responsibilities or other privileges
- the refusal of an application to fill a position
- the refusal of an application to register with or obtain a license from Equestrian Canada
- other sanctions in accordance with Equestrian Canada's Code of Conduct and Ethics



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Legal Names		
First name	Middle name(s)	Last name
All other names you have used:		
Current permanent address		
Street:	City:	
Province/Territory:	Postal Code:	
Country:		
Additional Information		
Date of birth:	Gender Identity:	
Email:	Phone number:	
EC Sport Licence #:		
Current facility (ies) (if applicable):		
Have you spent a significant amount of time (more than six consecutive months) living outside of Canada in the past 10 years?		
<input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please provide the following information.		
Country	From Date	To Date



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Criminal Record		
1. Do you have a criminal record?		
Yes No		
<i>If you answered yes, please complete the following information for each conviction . Attach additional pages, as necessary.</i>		
Name or Type of Offense:		
Name and Jurisdiction of Court/Tribunal:		
Year Convicted:		
Penalty or Punishment Imposed:		
Further Explanation:		
Name or Type of Offense:		
Name and Jurisdiction of Court/Tribunal:		
Year Convicted:		
Penalty or Punishment Imposed:		
Further Explanation:		



Criminal Allegations, Chargeable Offences, Judicial Orders Disclosure

2. Have you been arrested, convicted, had any chargeable offences, or judicial orders where you were not formally charged that may appear on a Criminal Record Check or Vulnerable Sector Search?

Yes No

If you answered yes, please complete the following information for each instance. Attach additional pages, as necessary.

Name or Type of Offense:

Name and Jurisdiction of Police Department/Court/Tribunal:

Year of Allegation, Offence, or Judicial Order:

Penalty or Punishment Imposed:

Further Explanation:

Name or Type of Offense:

Name and Jurisdiction of Court/Tribunal:

Year of Allegation, Offence, or Judicial Order:

Penalty or Punishment Imposed:

Further Explanation:

Initial



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Discipline or sanctions imposed by a sport governing body
<p>3. Have you ever been disciplined by or sanctioned by a sport governing body or by an independent body (e.g. private tribunal, government agency, etc.) or dismissed from a coaching or volunteer position?</p> <p>Yes No</p>
<i>If you answered yes, please complete the following information for each disciplinary action or sanction imposed. Attach additional pages, as necessary.</i>
Name of Disciplining or Sanctioning Body:
Date of Discipline, Sanction, or Dismissal:
Reasons for Discipline, Sanction, or Dismissal:
Penalty or Punishment Imposed:
Further Explanation:
Name of Disciplining or Sanctioning Body:
Date of Discipline, Sanction, or Dismissal:
Reasons for Discipline, Sanction, or Dismissal:
Penalty or Punishment Imposed:
Further Explanation:



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Pending Charges or Sanctions
4. 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
<i>If you answered yes, please complete the following information for each pending charge or sanction. Attach additional pages, as necessary.</i>
Name or Type of Offense:
Name and Jurisdiction of Court/Tribunal:
Name of Disciplining or Sanctioning Body:
Further Explanation:
Name or Type of Offense:
Name and Jurisdiction of Court/Tribunal:
Name of Disciplining or Sanctioning Body:
Further Explanation:



SCREENING DISCLOSURE FORM

Privacy Statement	
<p>By completing and submitting this <i>Screening Disclosure Form</i>, I consent and authorize EC to collect, use, and disclose my personal information, including all information provided on the <i>Screening Disclosure Form</i>, as well as my Enhanced Police Information Check and/or Vulnerable Sector Check (when permitted by law) for the purposes of screening, implementation of EC's <i>Screening Policy</i>, administering membership services, and communicating with National Sport Organizations, Provincial/Territorial Sport Organizations, Sport Clubs, Equestrian Facilities and other organizations involved in the governance of sport. EC does not distribute personal information for commercial purposes.</p>	
Certification	
<p>By signing this document below, I hereby certify that the information contained in this <i>Screening Disclosure Form</i> is accurate, correct, truthful, and complete.</p> <p>I further certify that there have been no changes to my criminal record since I last submitted an E-PIC and/or VSC to EC and that there are no outstanding charges and warrants, judicial orders, peace bonds, probation or prohibition orders, or applicable non- conviction information, and there have been no absolute and conditional discharges.</p> <p>I understand that if I have lived outside of Canada for an extended period of time, EC's may request that I submit relevant criminal record checks from the jurisdictions where I have lived in order to complete the screening process.</p> <p>I agree that any E-PIC and/or VSC and/or <i>Screening Disclosure Form</i> that I would obtain or submit on the date indicated below would be no different than the last E-PIC and/or VSC and/or <i>Screening Disclosure Form</i> that I submitted to EC. I understand that if there have been any changes, or if I suspect that there have been any changes, it is my responsibility to obtain and submit a new E-PIC and/or VSC and/or <i>Screening Disclosure Form</i> to EC instead of this form.</p> <p>I recognize that if there have been changes to the results available from the E-PIC and/or VSC and/or <i>Screening Disclosure Form</i>, and that if I submit this form improperly, then I am subject to disciplinary action and/or the removal of volunteer responsibilities or other privileges at the discretion of the Screening Committee.</p>	
Name (print):	Date:
Signature:	