

## Applicant Declaration for Check Documents

*Please read carefully before signing and submitting*

The academic program you applied to requires **submission of this Applicant Declaration form within 30 days** of applying. If you applied within 6 weeks of the start date of the academic program, submit this form within 5 days.

**Complete and submit this form only. Do not submit your check documents at this time.**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Student Number \_\_\_\_\_ Academic Program \_\_\_\_\_

### I, the above named applicant, declare:

- I understand I will be required to submit and I agree to submit the official check documents as listed in the academic program's Program Progression Requirements:
  - Adult Criminal Record Check including Vulnerable Sector Search (ACRVS). I understand an official Criminal Record Transcript must also be submitted if I have a record.
  - Child Abuse Registry Check (provincial)
  - Adult Abuse Registry Check (provincial)
- I agree to confirm which check documents are required for my academic program by referencing the Program Progression Requirements section of my program's Admission Requirements webpage at [www.rrc.ca/calendar](http://www.rrc.ca/calendar)
- I understand I **may not** be able to complete the academic program if I have a criminal record.
- I understand I **will not** be able to complete the academic program if I am listed on either the Child Abuse Registry or Adult Abuse Registry.
- I understand the above check documents are the College's requirement, and that work experience/practicum employers may have additional requirements I must meet.
- I understand the College requires the check documents to be recent, and recent is considered to be dated no earlier than the timelines indicated below. I agree to **begin the process of obtaining these documents** as per the timeline indicated for my program:
  - **No more than 6 months prior to my first day of classes**

<ul style="list-style-type: none"> <li>Bridging Program for Internationally Education Nurses</li> <li>Disability and Community Support</li> <li>Early Childhood Education</li> <li>Early Childhood Education – Workplace</li> <li>Health Care Aide</li> </ul>	<ul style="list-style-type: none"> <li>Legal Assistant</li> <li>Nursing</li> <li>Nursing – LPN to BN Pathway</li> <li>Power Engineering – 5<sup>th</sup> Class</li> </ul>
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  - **No more than 3 months prior to my first day of classes**

<ul style="list-style-type: none"> <li>Business Technology Teacher Education – Accelerated</li> <li>Community Development/Community Economic Dev</li> <li>Deaf Studies</li> <li>Diagnostic Cardiac Sonography – Echocardiography</li> <li>Diagnostic Medical Sonography – Ultrasound</li> <li>Health Unit Clerk</li> <li>Industrial Arts/Technology Teacher Education – Accelerated</li> </ul>	<ul style="list-style-type: none"> <li>MRI and Spectroscopy</li> <li>Medical Device Reprocessing Technician</li> <li>Medical Laboratory Sciences</li> <li>Medical Radiologic Technology Paramedicine</li> <li>Advanced Care Paramedicine Paramedicine</li> <li>Primary Care Paramedic</li> <li>Property and Casualty Insurance</li> <li>Technical Vocational Teacher Education</li> </ul>
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  - **No more than 2 weeks prior to my first day of classes**
    - Child and Youth Care
  - **After I start attending classes**

<ul style="list-style-type: none"> <li>Educational Assistant Certificate</li> <li>Health Information Management</li> <li>Library and Information Technology</li> </ul>	<ul style="list-style-type: none"> <li>Registered Nurse Refresher</li> <li>Therapeutic Recreation Facilitator for Older Adults</li> <li>Nurse Prescriber</li> </ul>
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- I agree to submit the check documents to the College when requested to do so. I understand if my check documents are not recent or if I do not obtain the check documents it may result in a delay in my participation in the work experience/practicum course which may delay completion of and graduation from the academic program.
- I understand I am responsible for any costs associated with obtaining these check documents.
- I understand my check documents will be reviewed by the academic program staff, and should the check documents indicate I have a criminal record:
  - I understand I am responsible for submitting an Official Criminal Record Transcript
  - I understand my Adult Criminal Record/Vulnerable Sector Check and Criminal Record Transcript will be forwarded to and reviewed by the College's Criminal Record Check Committee (CRCC). The CRCC will determine my eligibility or ineligibility to participate in the work experience/practicum course or the academic program.
  - If it is determined I am eligible to participate in the work experience/practicum course and the academic program, I understand the College cannot guarantee my criminal record will not affect my future employment, certification, or licensing opportunities.
  - If it is determined I am ineligible to participate in the academic program or the work experience/practicum course due to a criminal record or abuse registry listing, I understand 1) I will not be able to complete the academic program and may be required to withdraw from the program prior to completing theory courses, 2) I will not graduate, and 3) I will not be eligible for a refund outside of normal College refund policies.
- I understand future criminal charges, convictions, or registry listings obtained during my time in the academic program will necessitate an automatic review of my status in the program.

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

### ***Submission Instructions:***

#### **Electronic Submission**

If you applied online, you may scan and upload your signed Applicant Declaration form to your online application account:

- Scan your completed, signed, and dated form and save the file on your computer
- Go to [www.rrc.ca/apply](http://www.rrc.ca/apply) and sign in
- Click on Apply Online
- Find your submitted application
- Under Supplemental Items click View
- Find the Applicant Declaration for Check Documents supplemental item and click on Browse
- Find the file you saved to your computer and double click on it
- Click on Upload. The Submission Status should read Received.

#### **Fax**

Fax your completed, signed, and dated form to 204-697-0584

#### **Mail or In-Person**

Submit your completed, signed, and dated form to one of the following:

- [Student Service Centre](#), Notre Dame Campus, D101-2055 Notre Dame Ave., Winnipeg, MB, R3H 0J9
- [Student Service Centre](#), Exchange District Campus, P104-160 Princess St., Winnipeg, MB, R3B 1K9
- Your nearest [Regional Campus](#)