

3RD PARTY WAIVER CONSENT FORM – CARDSCAN
Consent to Release Personal Information to a third party

I _____
Full name of applicant

Born, _____, _____, _____ require criminal record verification in order to obtain
Month Day Year

a _____
Job (specify type), visa, border crossing card, etc...

I hereby authorize the Royal Canadian Mounted Police central repository of criminal records to release my Criminal Record Search Results to the following party.

Name of individual / agency: _____

Address: _____

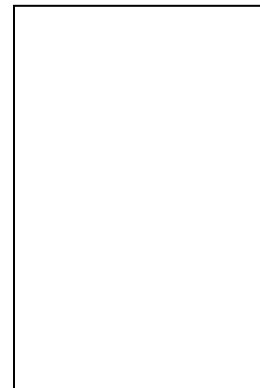
City/Prov: _____

Postal Code/Country: _____

I understand that I have the right to receive these results directly from the RCMP and that the assistance of a 3rd party is not necessary to obtain these results.

I have read and signed the Informed Consent document and understand my rights with regard to obtaining criminal record information.

**Please place fingerprint
HERE**



Applicant's Fingerprint

**Digit Printed
(Please "X")**

RIGHT	
Thumb	
Index	
Middle	
Ring	
Little	
LEFT	
Thumb	
Index	
Middle	
Ring	
Little	

Applicant Signature

This _____ day of _____, 20_____

******* Please print multiple copies of this form
and use different fingerprints in the box *******