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# 2018 VOLUNTEER APPLICATION FORM

The Pas

Volunteer No. :

VOLUNTEER IDENTIFICATION		Last name		Surname at birth		First Name		Middle name		Sex F <input type="checkbox"/> M <input type="checkbox"/>		
Civic number		Street		Apt.		City		Province		Postal code		
Telephone (home)			Telephone (cell)			Telephone (work)			Extension		Date of birth (YYYY/MM/DD)	
Email				Driver's Licence No. (File No.)				Expiry date (YYYY/MM/DD)				
Do you drive standard Yes <input type="checkbox"/> No <input type="checkbox"/>		Do you have any licence restrictions ? No <input type="checkbox"/>		Province issuing license		Group/Company organizing your evening with Operation Red Nose, if applicable						
Name of your insurance company (mandatory for escort drivers)				Policy No.				Expiry date (YYYY/MM/DD)				
VOLUNTEER DUTIES YOU ARE INTERESTED IN <input type="checkbox"/> Escort driver <input type="checkbox"/> Driver <input type="checkbox"/> Navigator <input type="checkbox"/> Other: _____												

## DECLARATION

### CRIMINAL OFFENCE(S)

- I have not been convicted of a criminal offence in Canada or elsewhere or, if I have been convicted of a criminal offence, I have obtained a pardon.
- I have been convicted, in Canada or elsewhere, of one or more criminal offences.

### PENDING CHARGE(S)

- I am not subject to any pending charges for a criminal offence in Canada or elsewhere.
- I am subject to one or more pending charges, in Canada or elsewhere, for one or more criminal offences.

### COURT ORDER(S)

- I am not subject to any court order made against me in Canada or elsewhere.
- I am subject to one or more court orders made against me in Canada or elsewhere.

If any of your responses to the statements given in the self-declaration are affirmative, please provide details in the space provided below.

OFFENCE / CHARGE / ORDER	DATE	PLACE OF THE EVENT

I authorize Operation Red Nose (ORN) and any police service with jurisdiction over any or all parts of the province in which I reside to conduct a criminal record check to ensure that I meet the selection criteria set out by ORN that appear on the back of this form. However, only judicial antecedents that ORN deems to be incompatible with the volunteer's assignment will be taken into account. If my assignment requires the driving of a road vehicle, I authorize ORN and any police force to check the validity of my driver's licence. I also give my consent to the police force to forward the results of the background checks to ORN. A false declaration will result in the refusal of the application. Furthermore, between the time I submit this form and the time I participate as a volunteer, I will inform ORN of any new charge(s) against me relating to an offence and any conviction(s) in connection with such an offence. In accordance with the relevant legislation, ORN and its representative agree to protect the confidentiality of all information and data about the organization's clients and volunteers. Any declaration form that has not been signed or that contains unanswered questions will be considered incomplete and returned to sender. **I also agree to comply with the volunteer commitment set out on the back of this form, which I have read and understood. I certify that the information provided in this declaration is accurate and complete.**

DATE \_\_\_\_\_ Signature (mandatory) \_\_\_\_\_ X \_\_\_\_\_

\* This volunteer application form is valid for the 2018 campaign only. It is subject to approval and can be revoked at any time.

- By checking this box, I consent to the use of my name, image and likeness in the form of photographs for promotional purposes by Operation Red Nose, its partners, affiliates, agents, employees, representatives, licensees and assigns, without notification or compensation.
  - I do not wish to be contacted by Operation Red Nose for the 2019 campaign.
- Have you participated in Operation Red Nose in the past? Yes  No

RESERVED FOR POLICE CHECK		ORN COMMITTEE		Please return this form as soon as possible to :	
Checked by (name and registration no.)	Meets the criteria yes <input type="checkbox"/> no <input type="checkbox"/>	Approved by (name)	The volunteer has provided a criminal record check <input type="checkbox"/>		
	Cannot be a driver <input type="checkbox"/>	Reason			
Comments	Cannot be an escort driver <input type="checkbox"/>	Date	Final result		
	Cannot be a navigator <input type="checkbox"/>	Date	Accepted <input type="checkbox"/> Refused <input type="checkbox"/>		



## ADDITIONAL INFORMATION

### Selection Criteria

<b>Incompatible offences if committed within the last five years</b>	<b>Sex</b> : prostitution (solicitation) <b>Violence</b> : assault, trespassing at night, uttering threats, intimidation, harassment, indecent telephone calls, mischief, arson causing damage to property, firearms (possession, omission)	<b>Theft, fraud</b> : impersonation <b>Drugs</b> : possession <b>Other</b> : breach of condition or probation, obstructing a peace officer, other criminal charges
<b>Incompatible offences at all times</b>	<b>Sex</b> : sexual assault or assault with a weapon, indecent acts, procuring, child pornography, corrupting children, bawdy house, rape <b>Violence</b> : kidnapping, attempted murder, homicide, aggravated assault, confinement, extortion, arson with disregard for human life, firearms (unauthorized use, trafficking) with disregard for human life, firearms (unauthorized use, trafficking)	<b>Theft, fraud</b> : breaking and entering, robbery, corruption <b>Driving</b> : offence causing death or bodily harm <b>Drugs</b> : trafficking, importing, cultivating <b>Other</b> : arrest warrant
<b>Offences resulting in limited acceptance</b>	<b>Theft, fraud</b> : theft, fraud (accepted as an escort driver during sanction)	<b>Driving</b> : flight, dangerous operation of a motor vehicle, refusal to comply with demand, operation while impaired (accepted as a navigator during prohibition), unpaid tickets (tickets must be paid before volunteering)

## VOLUNTEER COMMITMENT

### I agree to :

→ take all necessary precautions to ensure the safety of my team and of Operation Red Nose clients by complying with, among others, the traffic laws in my province (speed limits, use of seatbelts, signage, parking, etc.). Operation Red Nose is not responsible for any ticket received during the course of my volunteer duties.

→ comply with the Operation Red Nose code of ethics.

- **Sobriety** : I must not consume any alcohol or cannabis on the day I work with Operation Red Nose.
- **Confidentiality** : All information about Operation Red Nose clients and volunteers that is disclosed to me will remain confidential and will not be used for any purpose other than to fulfill the mandate conferred upon me. I will also not discuss any details with other volunteers that could be used to identify a client or volunteer.
- **Courtesy** : I will show patience and courtesy toward clients at all times.
- **Free service** : Operation Red Nose is a free service. I will never solicit donations, but if clients wish to make a donation, I will thank them.
- **Fatigue** : Operation Red Nose volunteers must often deal with fatigue, and its effects at night must not be underestimated. Therefore, I will not overestimate my capabilities and, if necessary, I will take a nap before reporting for duty as an Operation Red Nose volunteer.
- **Mutual respect** : All Operation Red Nose volunteers, whether they work in the headquarters or on the road, deserve my full respect and consideration.

→ return to Operation Red Nose all amounts given to me (donations, tips, gifts, etc.)

**If I do not honour my commitment, Operation Red Nose reserves the right to terminate my participation as a volunteer for the current and future campaigns. The decision of Operation Red Nose is final.**

## DESCRIPTION OF DUTIES

For office duties, please contact your local Operation Red Nose organization.

<p><b>Escort driver</b> Person who escorts the driver and the navigator in his or her own vehicle.</p> <p>Must be 18 years of age or older Must have a valid Class 5 driver's licence and a vehicle</p> <ul style="list-style-type: none"> <li>• Please carefully complete the <i>Driver's Licence</i> and <i>Insurance Company</i> sections on the reverse.</li> <li>• Operation Red Nose only provides insurance coverage to escort drivers whose vehicles are insured against damage.</li> <li>• You must carry your proof of insurance and your driver's licence with you on the night of your shift with Operation Red Nose.</li> </ul>	<p><b>Driver</b> Person who drives the client's vehicle.</p> <p>Must be 21 years of age or older Must have a valid Class 5 driver's licence</p> <ul style="list-style-type: none"> <li>• Please indicate your driver's licence file number on the reverse.</li> <li>• You must carry your driver's licence with you on the night of your shift with Operation Red Nose.</li> </ul>	<p><b>Navigator</b> Person who rides with the driver in the client's vehicle.</p> <p>Must be 18 years of age or older Driver's licence not mandatory, but indicating the number on the reverse will speed up the processing of your application.</p>
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<p><b>Completed forms may be dropped off at our local RCMP office. They will also have a criminal records check for you to complete.</b></p> <p><b>Please circle dates of operation you would be available to volunteer:</b> <b>November 30, December 1, 7, 8, 14, 15, 21, 22, 31</b></p> <p><b>The Wescana Inn will serve as headquarters and the hours of operation will be 9:00 PM to 3:00 AM Drivers should arrive at 8:45 PM.</b></p> <p><b>Tara Poulin</b> <b>ORN Chairperson</b> <b>204-620-5646</b> <b>t-poulin@hotmail.com</b></p>	<p><b>THANK YOU FOR JOINING YOUR EFFORTS WITH</b></p> <p><b>Operation Red Nose to help make roads safer in your community!</b></p> <p>On the night of your shift with Operation Red Nose, don't forget to bring the following items with you :</p> <ul style="list-style-type: none"> <li>• a photo ID;</li> <li>• your valid Class 5 driver's licence (for escort drivers and drivers);</li> <li>• your proof of insurance (for escort drivers).</li> </ul>
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### Consent for the Release of Police Information

Applicant Information			
Last Name		Given Name 1	Given Name 2
Gender <input type="radio"/> Male <input type="radio"/> Female	Date of Birth (yyyy-mm-dd)	Current Address	
City	Province	Postal Code (A9A 9A9)	Telephone Number (include area code)
Place of Birth	Usual First Name or Alias		Maiden Name or any Other Last Name
Name at Birth	Previous Names or Legally Changed Names		

#### Previous Addresses

Provide previous addresses if less than 5 years at current address.

Address	City	Province	Postal Code (A9A 9A9)

#### Consent

**Important - Informed Consent (provided by the individual):** As an individual providing informed consent to have these sources of police information reviewed and disclosed, it is important that you understand the nature of the information that may be contained in them. By agreeing to allow your personal information to be disclosed to a prospective employer or organization, you acknowledge that your suitability could be determined based on the information disclosed. The suitability criteria are established and controlled by the employer or the organization - not the police agency or authorized body conducting the checks. The police agency or authorized body is not involved with, or responsible for, decisions that are made by the employer or organization.

#### Signature of Applicant

I consent to a search of all records and information available at the time the search is conducted, including non-conviction information, charges before the courts, findings of guilt or convictions and court orders registered in my name in the National Repository of Criminal Records and local records available to the police service. I understand that if information or a possible record exists, it will not be disclosed until identification has been confirmed by either myself or by fingerprints.

Signature	Date of Consent (yyyy-mm-dd)
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#### Requesting Organization

<input type="checkbox"/> Record Check results will be picked up in person by the applicant			Fingerprint For card scan submissions only.
Identity of the organization that is requesting and should receive the results of the record checks.			
Name of Person or Organization	Address		
City	Province	Postal Code (A9A 9A9)	

#### Waiver for Consent of Release of Information to Third Party

I consent to the release of any and all information from available records to the authorized person of the above indicated Organization/Company/Firm.

Signature	Date (yyyy-mm-dd)	Finger
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#### Type of Record Check Required

To be completed by the applicant (initial type of record check being requested).

Type	Description	Additional Requirements	Initial
<b>Name-Based Criminal Record Check</b>	A query, based on name and date of birth, of active criminal files in the RCMP National Repository of Criminal Records. Used to determine the possible existence of a criminal record. Generally used as a preliminary search only to determine if a Fingerprint-based Criminal Record Check may be required. The query may also include a search of court records and a query of records management systems in other police agencies' jurisdictions through the Police Information Portal (PIP) or other data sharing systems.	N/A	
<b>Fingerprint-Based Criminal Record Check</b>	A fingerprint-based search of the RCMP's national repository of fingerprints and criminal record information. The results of the search will produce a document that includes criminal record information where the identity of the applicant has been verified by fingerprints.	N/A	
<b>Vulnerable Sector Check</b>	A Vulnerable Sector Check is the most comprehensive type of check. It includes a query based on name and date of birth of a local police agency's records management system, commonly referred to as a local indices's check, in addition to queries of CPIC Identification, Investigative, and Intelligence Data Banks. The query may also include a search of court records and a query of records management systems in other police agencies' jurisdictions through the Police Information Portal (PIP) or other data sharing systems.	<input type="checkbox"/> Form 3923 completed and attached	
<b>Declaration of Criminal Records</b>	This will result in the RCMP detachment providing a list of all of the criminal convictions and related information that are included on the criminal record on CPIC. This may only be provided by the detachment where the applicant lives.	<input type="checkbox"/> Form 8359 completed and attached	

#### Identification Provided

To be completed by the RCMP employee.

Applicant Identification Type 1	Applicant Identification Type 2	RCMP Employee Name	HRMIS Number
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