

For more information or to request alternate formats of this form for accessibility, please contact HS@durhamcollege.ca

This form is an Informed Consent for the release of personal information regarding a Vulnerable Sector Check (VSC), also known as a Level 3 check, conducted by your local police department. The police department jurisdiction you select to complete your on-line VSC application, must match your home address or drivers license address. A VSC includes a Criminal Reference and a Judicial Matters Check.

Once completed, this form and all supporting documents are to be completed and uploaded to your student profile on Verified.

Durham College has no authority or control on how the host protects the information.

Student Personal Identification

First Name:

Last Name:

Student Banner Number:

Program:

Consent Declaration

I understand that the information in my Vulnerable Sector Check is personal and will be handled with confidentiality.

I understand that Durham College requires each student to upload a copy of their Vulnerable Sector Check documents to their student profile on Verified as a requirement for my Electronic Requirements Verification appointment and my practicum host.

I understand and agree to release my Vulnerable Sector Check documents to Durham College and hereby give Durham College the authority to provide confirmation that my Vulnerable Sector Check has been completed to my practicum host who makes a request for it or requires it for practicum purposes.

I understand that I am responsible for keeping all of the original documents provided as part of the Vulnerable Sector Check in order to provide the document to my practicum host upon request.

I will not hold Durham College responsible for the practicum employers' actions. I have read, understood and consent to the above.

Student Signature

Date Submitted:

Notice of Collection

In accordance with Section 39(2) of the Freedom of Information and Protection of Privacy Act, 1990, the personal information collected on this form is collected under the legal authority of the Ontario Colleges of Applied Arts and Technology Act, 2002 and may be used and/or disclosed for academic placement by the Faculty of Health Sciences. Your personal information may also be used for various administrative, statistical and/or research purposes of the College and/or ministries and agencies of the Government of Ontario and the Government of Canada. If you have any questions about the collection, use and disclosure of your personal information by the College, please contact the Freedom of Information and Protection of Privacy Coordinator, 2000 Simcoe Street North, Oshawa, ON, L1G 0C5, 905.721.2000 ext. 3292.