

| Date: | | | | |
|--|--|------------------|-------------------|------------------|
| Police Agency: | | | | |
| Unit: | | | | |
| Address: | | | | |
| City/Town: | | | | |
| Postal Code: | | | | |
| Position: Denta | ıl Assisting, Placeme | <u>ent</u> | | |
| To Whom It May | Concern: | | | |
| Vulnerable Sector Check) for unpaid | Dental Assisting progra or Check (which includ d student placement p able Sector Check: | des a Criminal l | Reference and J | Judicial Matters |
| Description of du Providing direct of | ties: dental care to patients | s of various age | es and abilities. | |
| Student Name: | Last Name | | First Name | |
| Student DOB: | Year Day | / Month | _ | |
| Student Addres | s: | | | |
| Thank you, | Dem | | | |

Gillian Dunn RDH, BPE

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