

IDENTIFICATION VERIFICATION FORM FOR CRIMINAL RECORD CHECK

To be completed by the applicant (details must match the CRC application form). Provide two pieces of official identification, one must be a photo ID, along with this form to be officially verified, in person.

APPLICANT INFORMATION:				
Legal Surname / Last name:		Legal Given / First Name:		Legal Middle Name:
Date of Birth: _____ <small>YYYY MM DD</small>		Gender: M F		Birthplace:
Additional Names (Alias, Maiden Name, etc.):				
Surname / Last Name:		Given / First Name:		Middle Name:
Residential Address:		City:	Province:	Country:
				Postal Code:
Mailing Address (if different from above):		City:	Province:	Country:
				Postal Code:
Contact Area Code & Phone No.		E-mail Address (REQUIRED to receive your payment options):		Driver's Licence #:

Official verification may be done by any of the following: school representative, healthcare provider, or legal representative.

To be completed by the verifier:

I verify that the applicant provided, in person, two pieces of official identification matching the information above, one being a photo ID, as proof of identification.

Name of Verifier: _____
(Print name in full)

Signature: _____

Organization: _____

Date: _____

