

VOLUNTEER POLICE RECORD CHECK TEMPLATE

Please use this box to upload your agency letterhead

Applicant Name: Agency Name:		
Please select the type of police record check the applicant is to request.		
Criminal Record Check		
☐ Criminal Rec	ord & Judicial Matters Check	
☐ Vulnerable S	ector Check (if selected complete below)	
1 – Title or descri	ption of the volunteer position:	
2 – Details regard	ing the responsibilities towards children or vulnerable person(s):	
I represent the agency listed above and I certify the above applicant will be volunteering with our organization. Contact Name: Contact Number:		
A copy of this letter is required to be uploaded during the application process. To do so, save this document to your computer desktop or a folder you will remember. Please provide your agency email address for return record checks		