

TEACHER CERTIFICATION CONFIDENTIAL DISCLOSURE AND CRIMINAL RECORD CHECK AUTHORIZATION

All questions must be answered fully and precisely. A false declaration or omission may be grounds for the denial, suspension or cancellation of a teaching certificate. Despite your response to any of the questions below, on a random basis, you may be required to provide a criminal record check to the Registrar.

A. NAME/IDENTIFICATION:

Surname		Given Names In Full	
All Other Previous Names Used		Date Of Birth (YY-MM-DD)	
Address			
City/Town		Province	Postal Code
Telephone (Home)		Telephone (Business)	

B. SELF-DISCLOSURE

1. Have you ever been denied, or had suspended or cancelled any certificate, permit or license to teach, whether in Canada or in another country? NO YES

If yes, Place: _____
Date: _____
Details: _____

2. Are you currently charged with any offence under any statute, whether in Canada or in another country? NO YES

If yes, Offence: _____
Place: _____
Date: _____
Details: _____
Offence: _____
Place: _____
Date: _____
Details: _____

3. Have you ever been convicted or been pardoned under the Criminal Records Act of a criminal offence under any statute* whether in Canada or in another country? NO YES

*In Canada, any statute includes, but is not limited to the Criminal Code and the Controlled Drugs and Substances Act.
If yes, Offence(s)**: _____
Place: _____
Date: _____

B. SELF-DISCLOSURE (CONTINUED)

If yes, Offence(s)**: _____

Place: _____

Date: _____

If yes, please provide date of pardon: _____

**For each offense listed above, please provide all official notices of conviction directly from the Clerk of the Court of the jurisdiction of the conviction.

4. Have you ever been given a conditional discharge in respect to a criminal offence in Canada or in another country?
() NO () YES

If yes, please provide documentation that provides evidence showing the date of discharge and confirms whether the conditions of the discharge have been met.

Date of Discharge: _____

C. UNDERTAKING:

I understand that depending on the nature of my offence(s), I may be required to provide an official criminal record search document by fingerprint comparison. I understand that I am responsible for all costs involved in providing such documentation to the Registrar for the Teacher Development and Certification Branch of Alberta Education. I hereby undertake to provide, upon request, official police records when and as required.

D. AUTHORIZATION:

I hereby grant to the Registrar of Teacher Certification, Alberta Education full authority to conduct, at his discretion, a criminal record check or background check or enquiry from any police authority or other authority, organization or institution with regard to any criminal conviction or charge or any of the other matters referred to in Section B.

I further authorize and consent to the release of such details of convictions and outstanding charges by any law enforcement agency or authority to The Registrar of Teacher Development and Certification at Alberta Education.

I also consent to the release of confirmation of relevant convictions and outstanding charges to school authorities requesting such information.

E. DECLARATION:

I declare that the information provided on this form is true and complete and that no relevant information has been withheld or falsely represented.

Signature: _____ Date: _____

NOTE: The presence of a record of charges or convictions does not necessarily exclude you from certification. Each case will be reviewed to determine its relevance to the requirements of the teaching profession on an individual basis and in accordance with the Certification of Teachers Regulation.

THIS FORM MUST BE COMPLETED IN FULL AND RETURNED ATTACHED TO YOUR APPLICATION FOR RE-ISSUANCE OF ALBERTA TEACHING AUTHORITY.

The personal information collected as part of this application process for teacher certification is collected pursuant to the provisions of the *Certification of Teachers Regulation*, and 33 of the *Freedom of Information and Protection of Privacy Act* (FOIP Act). This information will be used for the purpose of processing your application to determine your eligibility for extension of your interim professional certificate. The personal information will be treated in accordance with the FOIP Act. Questions regarding the collection may be directed to the Director, **Teacher Development and Certification Branch, Alberta Education, 44 Capital Boulevard, 10044 - 108 Street, Edmonton, AB, T5J 5E6**. Telephone: (780) 427-2045 or toll free by dialling 310-0000.