

To : **National Bank of Canada**  
 Fax No. : **1-888-307-2997**  
 Attention : **Partnership Branch**  
 Referred By :

Send original to :  
 National Bank of Canada  
 Partnership Branch  
 500 Place d'Armes, 22<sup>nd</sup> floor  
 Montreal, Quebec H2Y 2W3

**NOTE: National Bank of Canada will not accept Contact Forms from brokers/advisors who have not enrolled.**

MGA, MFDA/IIROC OR PM Firm Name

Name of Company (if Broker/Advisor is not an individual)  Insurance/MFDA/IIROC/PM Licence No.

Mr. Last Name  First Name   
 Mrs.

Date of Birth (Year/Month/Day)  Social Insurance Number (only the three first digits are required)  Telephone (home)

**BUSINESS ADDRESS**

Address (Street No., P.O. Box, Street, Unit / Apt. No.)  City

Province  Postal Code  Telephone (office)  Telephone (other: cell., pager)

Email Address  Fax number

**PERSONAL ADDRESS**

Address (No., Street)  City  Province  Postal Code

- By my signature below, I confirm that my personal information mentioned above is accurate and up to date. I authorize the Bank and any individual working for or with it, including service providers and agents, to collect and use the personal information on this form and any other information about me for the purpose of evaluating my integrity.
- In order for the Bank to complete this evaluation and to verify the accuracy of the information provided, I authorize the Bank to collect any reasonable information necessary for the evaluation of my enrolment, including my judicial record or credit record, when deemed necessary, from any public body or person likely to have information about me, such as the Royal Canadian Mounted Police, other investigative bodies, my MGA, MFDA/IIROC or PM Firm, personal information agents, credit reporting and assessment agencies, financial institutions, relevant securities commissions and insurance regulatory agencies, or any other public source. I authorize these bodies and persons to disclose to the Bank the information about me. I further consent that the information provided to the Bank, including, if applicable, my Social Insurance Number, be used to help identify me and to distinguish me from other people.
- I undertake to comply with the policies and procedures described within the applicable National Bank of Canada "Regulatory Information Guide".  
<https://nbcadvisor.com/en/banking-products/about-us/regulatory-information/>
- With respect to any applicants identification and all verification done by me on behalf of National Bank of Canada and sent to National Bank of Canada, I undertake:
  - To meet all applicants in person;
  - To view and validate all original identification documents as set out in the relevant Regulatory Information Guide;  
<https://nbcadvisor.com/en/banking-products/about-us/regulatory-information/>
  - Validate, within reason, that the applicants are not acting on behalf of a third party and if necessary, provide information on the third party;
  - To obtain and witness all signatures with respect to the Contact Form documentation.
- If necessary, I will allow National Bank of Canada to attend my place of business in order to examine and/or audit my compliance with the present agreement.
- I undertake to keep confidential all terms and conditions of agreements concluded with National Bank of Canada and also all personal information collected from the applicants.
- I agree to abide by all applicable Canadian laws in respect to my business relationship with National Bank of Canada including the *Personal Information Protection and Electronic Documents Act* and the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act*.
- I understand that the MGA, MFDA/IIROC or PM Firm mentioned above must have signed a Referral Agreement with National Bank of Canada prior to my enrolment.

Date (DD MM YYYY)

Broker/Advisor Signature

**Regional Sales Manager / Financing Solutions Specialist**

Verify the information on this form against the Broker/Advisor's original and valid identity documents. Pay particular attention to the spelling of the Broker/Advisor's first and last name, date of birth, photo and signature.

I verified the applicant information against two original identity documents.

Specify the identity documents (ex. driver's licence) 1.   
 2.

First Name and Last Name of RSM / FSS Telephone Number  Billing Transit

Date (DD MM YYYY) Signature of RSM / FSS

**FOR BANK USE ONLY – To be completed by Corporate Security**

- Positive – You may proceed
- Negative – Do not proceed
- Notified

Control No.  Confirmation date   
 Name

<b>A. Personal Information</b>					
Surname (last name):			Given names(s):		
Surname (last name) at birth:			Former name(s):		
Place of birth (City, Province/State, Country):					
Date of birth (YYYY-MM-DD):			Sex (check one) <input type="checkbox"/> Female <input type="checkbox"/> Male		
Phone number(s):			Email address:		
Current Home Address					
_____	_____	_____	_____	_____	_____
Number	Street	Apartment	City	Province/Territory/State	Postal/ZIP code
Previous Address(es) Within the Last 5 Years (attach additional page if necessary)					
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
<b>B. Reason for the Criminal Record Verification</b>					
Reason for Request (example: Employment – Employer – Job Title):					
Organization Requesting Search:					
Contact Name:			Contact Phone Number:		
<b>C. Informed Consent</b>					
<b>SEARCH AUTHORIZATION</b> – I HEREBY CONSENT TO THE SEARCH OF the RCMP National Repository of Criminal Records based on the name(s), date of birth and where used, the declared criminal record history provided by myself. I understand that this verification of the National Repository of Criminal Records is not being confirmed by fingerprint comparison which is the only true means by which to confirm if a criminal record exists in the National Repository of Criminal Records.					
<b>POLICE INFORMATION SYSTEM(S)</b> – I HEREBY CONSENT TO THE SEARCH OF police information systems, as part of a Police Information Check, which will consist of a search of the following systems (check applicable):					
<input checked="" type="checkbox"/> CPIC investigative Data Bank		<input checked="" type="checkbox"/> Police Information Portal (PIP)			
<input type="checkbox"/> OTHER:					
<b>AUTHORIZATION AND WAIVER</b> to provide a confirmation of criminal record or any police information.					
I certify that the information set out by me in this application is true and correct to the best of my ability. I consent to the release of the results of the criminal record checks to <u>Mintz Global Screening Inc. and _____</u> , located in <u>located in Toronto, Canada and _____</u> .					
		Company Name		City and Country	
I hereby release and forever discharge all members and employees of the processing Police Service and the Royal Canadian Mounted Police from any and all actions, claims and demands for damages, loss or injury howsoever arising which may hereafter be sustained by myself as a result of the disclosure of information by the <b>Cobourg Police Service</b> to <u>Mintz Global Screening Inc. and _____</u> , <u>Toronto, Canada and _____</u> .					
		Name of Processing Police Service		Company Name	
				City and Country	
Signature of Applicant		Date		Signed at	
		Year – Month - Day		City	
				Province/Territory	
<b>D. Identification Verification</b>					
			<input type="checkbox"/> Physical Identity Verification		<input type="checkbox"/> Electronic Identity Verification
Witnessing Agent's Name:			Identification Verified:		
Witnessing Agent's Signature:			Type of Photo ID Viewed (Government Issued) & Secondary ID		

Name and location of the company where information will be stored in Canada: \_\_\_\_\_.

**\*\*Information related to this criminal record check is collected, retained and disclosed in accordance with applicable privacy legislation. \*\***

**Declaration of Criminal Record**

*This form is required to be filled and attached to your Informed Consent Form for a Criminal Record Verification.*

Surname (last name) \_\_\_\_\_ Given name(s) \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
YYYY-MM-DD

Information is collected and disclosed in accordance with federal, provincial and municipal laws.

A Declaration of Criminal Record does not constitute a Certified Criminal Record by the RCMP and may not contain all criminal record convictions.

Applicants must declare all convictions for offences under Canadian federal law.

**Do not declare the following:**

- A conviction for which you have received a Record Suspension (formerly pardon) in accordance with the *Criminal Records Act*;
- A conviction where you were a “young person” under the *Youth Criminal Justice Act*;
- An Absolute or Conditional Discharge, pursuant to section 730 of the *Criminal Code*;
- An offence for which you were not convicted;
- Any provincial or municipal offence, and;
- Any charges dealt with outside of Canada.

**Note that a Certified Criminal Record can only be issued based on the submission of fingerprints to the RCMP National Repository of Criminal Records.**

Offence	Date of Sentence	Court Location

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date (YYYY-MM-DD)

Verified By:

\_\_\_\_\_  
Name of Police Agency Employee

\_\_\_\_\_  
Signature of Police Agency Employee

## IDENTITY VERIFICATION

All applicants for a criminal record check must provide government-issued identification prior to undergoing a name-based criminal record check. Legible copies of the identification must be included with the authorization form.

An applicant must provide copies of two (2) pieces of valid identification, one of which must be government-issued and include the applicant's name, date of birth, signature and photo of the applicant. Copies of the identification documents must be certified by a witness who will confirm that the applicant signing the informed consent is the individual on the government-issued identification. The witness verifying the identity of the applicant must compare the signature on the government-issued identification to the signature on the Informed Consent form.

### PHOTO IDENTIFICATION STANDARDS

*One of the provided pieces of identification must be one of the following:*

- Driver's Licence (issued by Canadian province or territory) or Nexus Card
- Foreign Driver's Licence
- Photo Health Card (except in Ontario, Manitoba or Prince Edward Island)
- Canadian Passport
- Foreign Passport
- Canadian Citizenship Card
- Permanent Resident (PR) Card
- Certificate of Indian Status
- Firearms Acquisition Certificate (FAC)
- Federal, Provincial or Municipal Identification Card
- Military Family Identification Card (MFID)

### SECONDARY IDENTIFICATION STANDARDS

*The second piece of ID can be another photo ID from the previous list or can be any of the following:*

- Birth Certificate
- Baptismal Certificate
- Hunting Licence
- Fishing Licence
- Outdoors Card
- Hospital Card
- Immigration Papers
- Canadian Blood Donor Card (only if date of birth indicated)
- Student Identity Card (as long as name is shown)

### WITNESS REQUIREMENTS

The witness must personally view the identification provided and ensure that it matches the person signing this form. The witness may be contacted as part of an audit of this process to verify that this occurred.

The witness must be one of the following:

- An employee of the company for which this background screening is being completed or;
- A duly authorized and licensed notary public or;
- An independent arms length witness. This is defined as a person who is not related by marriage or blood to the candidate or otherwise in an intimate relationship. The witness must be at least 18 years of age and have known the candidate personally for a minimum of 2 years. To know an applicant personally means that the witness is able to confirm aspects of the applicant's personal attributes such as name, approximate age, place of birth, physical description and some personal history.

**Note to Applicant:** *You may make a request for access to your personal information, a request for correction or any other request for information by sending a written request to Mintz (Mintz Global Screening 1303 William Street, Suite 200, Montréal, QC, H3C 1R4 to the attention of Privacy Officer. Mintz will answer your request for access, correction or information within thirty (30) days following its reception.*

## **INSTRUCTIONS – DECLARATION OF CRIMINAL RECORD**

Prior to undergoing a name-based criminal record verification, you can self-declare the content of your criminal record using the Declaration of a Criminal Record form available on the next page. The police will compare the data provided against their database and determine either the declaration is:

- **Complete:** there are no other criminal record convictions than the ones declared and the information provided is accurate or your declaration is considered by the police service a material representation of your criminal history.
- **Incomplete:** the information provided is inaccurate or it is not a complete listing of the applicant's criminal record.

The confirmation of a declaration of a criminal record does not constitute a Certified Criminal Record by the RCMP-GRC. A Certified Criminal Record can be only issued based on the submission of fingerprints to the RCMP National Repository of Criminal Records. Also note that the confirmation of a declaration of a criminal record may not contain all criminal record convictions.

### **DECLARATION PROCESS**

1. Using the form provided on the next page, enter your name and date of birth exactly as they appear on your background screening consent form.
2. Enter one criminal charge per line. If you were convicted for several counts at the same time, please use one line per count.
3. Identify the offence, date of conviction, and court location where the judgment was rendered.

### **DECLARE THE FOLLOWING INFORMATION:**

- All convictions for criminal offenses under federal law.

### **DO NOT DECLARE THE FOLLOWING:**

- Absolute discharges or conditional discharges, pursuant to the Criminal Code, section 730.
- Any charges for which you have received a record suspension ("pardon"), pursuant to the Criminal Records Act.
- Any offences while you were a "young person" (twelve years old but less than eighteen years old), pursuant to the Youth Criminal Justice Act.
- Any charges for which you were not convicted, for example, charges that were withdrawn, dismissed, etc.
- Any provincial or municipal offences, for example traffic infractions.
- Any charges dealt with outside of Canada.
- Any charges for which you received a stay of proceedings.