

APPENDIX 1 - SCREENING DISCLOSURE FORM AND PRIVACY STATEMENT

	NAME:		Middle	Last					
		HAVE HEED							
	OTHER NAMES YOU HAVE USED:								
	CURRENT PERMANENT ADDRESS:								
	Street	City	Province	Postal					
	DATE OF BIRTH:	GENDER							
		Month/Day/Year							
	ORGANIZATION:	TION:EMAIL:							
	intentionalomissiona	and subject to failure of sc		dbytheOrganization's ScreeningPolicy					
1.	Have you ever been convicted of a crime for which a pardon has not been granted?								
	YesNoIf yes, please describe below for each conviction:								
	Name or Type of Offense:								
	Name and Jurisdiction of Court/Tribunal:								
	YearConvicted:								
	Penalty or Punishment Imposed:								
	Further Explanation: _								
	agency,currentlypend	dingorthreatenedagains		-					
	s ves, please explain for e		0						
11 }	es, piease explain for e	each pending charge:							
	Name or Type of Offe	nse:							
	Name and Jurisdictio	n of Court/Tribunal:							
	Further Explanation:								

	Yes	_No	If yes, please describe each finding, judgment or ruling below:			
	Civil Court Finding		Out of Court Settlement:	Type Finding:		
	Year of Offense or	Settlement:	_			
	Penalty or Punishr	nent Impose	d:			
	Further Explanatio	n:				
4.	Have you ever been the subject of a decision of a court or tribunal that might reflect adversely on the profession of coaching, the sport of baseball, or any other sport? YesNoIf yes, please describe below:					
	Type of Offense: _					
	Year of Decision: _					
	Penalty or Punishment Imposed:					
	Further Explanatio	n:				
5.	·		from a position due to allegations ofIf yes, please describe below:	ethical or moral misconduct?		
	Name of applicabl	e Organizati	on:			
	Date of Dismissal:					
	Reason for Dismiss	sal:				
6.	Have you ever been disciplined or sanctioned by an international sport tribunal, by a National sport governing boo outside Canada, by a National Sport Organization within Canada, or by any other any other spo organization/Organization/Organization?					
	YesNo_	If y	es, please describe below:			
	Name of applicabl	e Organizati	on:			

Reason for Discipline or Sanction:		
For more than one conviction please at	tach additional page(s) as necessary.	
Certification		
that I will immediately inform the Organiza	ned in this application is accurate, correct, truthful and ation of any changes in circumstances that would alto o so may result in termination of membership and/or	er my original responses to
Signature:	_ Date:	Date:

Date of Discipline or Sanction:

PRIVACY STATEMENT

By completing and submitting this Screening Disclosure Form, you consent and authorize the Organization to collect, use and disclose your personal information, including all information provided on the Screening Disclosure Form, Police Record Check and/or Vulnerable Sector Check for the purposes of screening, implementation of the Organization's Screening Policy, administering membership services and communicating with other National Sport Organizations, Provincial Sport Organizations, Sport Organizations, and other organizations involved in the governance of the sport of baseball. The Organization does not distribute personal information for commercial purposes.