Appendix B

Application and Screening Disclosure Form

Note: Participants who are applying to volunteer or work within certain positions with Bowls Alberta (BA) or a Member Club must complete this Screening Form. If the Participant is applying for a new position within BA, a new Form must be submitted. Failure to disclose truthful information below may be considered an intentional omission and result in the loss of volunteer responsibilities or other privileges.

NAME:	
OTHER NAMES USED:	
CURRENT PERMANENT ADDRESS	:
DATE OF BIRTH:	GENDER IDENTITY:
EMAIL:	PHONE:
POSITION SOUGHT:	
 Do you have a criminal record? If so, please complete the following information for each conviction. Attach additional pages as necessary. If not leave the boxes below blank. 	
Name or Type of Offense:	
Name and Jurisdiction of Court/Tribunal:	
Year Convicted:	Penalty or Punishment Imposed:
Further Explanation:	
2. Have you ever been disciplined or sanctioned by a sport governing body or by an independent body (e.g., private tribunal, government agency, etc.) or dismissed from a coaching or volunteer position? If so, please complete the following information for each disciplinary action or sanction. Attach additional pages as necessary. If not leave the boxes below blank.	
Name of disciplining or sanctioning body:	
Date of discipline, sanction or dismissal:	
Reasons for discipline, sanction or dismissal:	

Penalty or Punishment Imposed:	
Further Explanation:	
3. Are criminal charges or any other sanctions, including those from a sport body, private tribunal or government agency, currently pending or threatened against you? If so, please complete the following information for each pending charge or sanction, if not leave blank. Attach additional pages as necessary.	
Name or Type of Offense:	
Name and Jurisdiction of Court/Tribunal:	
Name of disciplining or sanctioning body:	
Further Explanation:	
PRIVACY STATEMENT By completing and submitting this Application and Screening Disclosure Form, I consent and authorize BA to collect, use and disclose my personal information, including all information provided on the Screening Disclosure Form as well as my Enhanced Police Information Check and/or Vulnerable Sector Check (when permitted by law and if required) for the purposes of screening, implementation of the Screening Policy, and communicating with Member Clubs as well as with National Sport Organizations, Provincial Sport Organizations, Sport Clubs, and other organizations involved in the governance of sport. BA does not distribute personal information for commercial purposes. CERTIFICATION	
I hereby certify that the information contained in this Form is accurate, correct, truthful and complete.	
I further certify that I will immediately inform BA of any changes in circumstances that would alter my original responses to this Screening Disclosure Form. Failure to do so may result in the withdrawal of volunteer responsibilities or other privileges and/or disciplinary action.	
I further agree to adhere to BA's policies and procedures, including but not limited to the <i>Code of Conduct and Ethics, Conflict of Interest Policy, Privacy Policy,</i> and <i>Screening Policy</i> . The Organization's policies are located at the following link: Policies.	
I recognize that I must pass certain screening requirements depending on the position sought, as outlined in the <i>Screening Policy</i> , and that the Screening Committee or Safe Sport Officer will determine my eligibility to volunteer or work in the position.	
NAME (print): DATE:	

SIGNATURE:

electronic / typed signature is acceptable for this document