

OFFENCE DECLARATION FORM

I **DECLARE**, that:

I have **no** convictions under the *Criminal Code of Canada* up to and including the date of this declaration for which a pardon has not been issued or granted under the *Criminal Records Act (Canada)*. I further declare that I have no charges currently before the court.

OR

I have the following convictions for offences under the *Criminal Code of Canada* for which a pardon under the *Criminal Records Act (Canada)* has not been issued or granted.

List of Offences

Date of Conviction	Nature of Offence	Penalty Imposed
_____	_____	_____
_____	_____	_____
_____	_____	_____

(USE ADDITIONAL PAGE IF NECESSARY)

I further agree to advise Grand River Hospital immediately in writing in the event that I am charged with any criminal offence after the declaration has been provided.

I agree to provide a copy of my Vulnerable Police Check immediately upon receipt.

DATED this _____ day of _____ /20_____

Name (Print)

Signature