



## Security Screening Application and Consent Form

This form is to be used to apply for a security screening status or clearance. Please read the following information carefully and complete only the sections required for the required type of status or clearance as indicated on page 4 of this application form.

### Notice on collecting information and privacy

The Government of Canada uses this form to collect personal information so that it can conduct security screening verifications, inquiries and assessments. The personal information is collected:

- under the authority of subsection 7(1) of the *Financial Administration Act*
- in accordance with the Government of Canada's *Policy on Government Security and Directive on Security Screening*
- in accordance with the provisions of the *Privacy Act*

Personal information is protected under the provisions of the *Privacy Act*.

Security screening may also be necessary for individuals who are not employees of the Government of Canada and may require security screening when the Government of Canada determines that there is a need to share or provide access to sensitive or classified information or assets, including information technology (IT) systems and facilities. Such access may be provided through arrangements such as, but not limited to, the following:

- contracts
- assignments
- information-sharing agreements
- volunteering

If you do not provide the necessary information, the security screening process will be cancelled. An incomplete form will not be processed and will be returned to you.

### Modifying an existing status or clearance

The information collected may also be used to update, upgrade, transfer or review for cause your security status or security clearance. The information will be disclosed to the Royal Canadian Mounted Police (RCMP) and to the Canadian Security Intelligence Service (CSIS) as necessary so that, in accordance with the [Directive on Security Screening](#) and/or the mandated responsibilities of the RCMP and CSIS, security screening inquiries, verifications and assessments can be conducted.

### Disclosure of other information

The information collected may also be disclosed to:

- other entities outside the Government of Canada, such as credit bureaus
- Government of Canada institutions (for example, when an individual temporarily or permanently transfers to a position in another Government of Canada institution)
- law enforcement agencies

The personal information collected for security screening is described in Standard Personal Information Bank (PIB) PSU 917 (Security Screening), which is used by most Government of Canada institutions. Personal information for Canadian industry personnel is described in Public Services and Procurement Canada (PSPC) PIB PWGSC PPU 015 (Industry Personnel Clearance and Reliability Records). The information collected and retained by CSIS for security screening is described in CSIS PPU 005 and SIS PPE 815.

### Collection of additional information

The Government of Canada may need to collect additional personal information during the security screening process to conduct inquiries, verifications and assessments. Additional information may be collected:

- to resolve doubt
- when there is a lack of sufficient Canadian residency to verify identity or biographical information

Such additional personal information may be obtained from:

- you (the applicant)
- foreign governments
- non-government entities

The additional information may include, but not be limited to, the following:

- your facial image
- letters of reference or other evidence to validate time spent abroad
- copies of academic credentials, professional designations and/or letters of reference
- information related to your identity, including your citizenship and criminal records (such as criminal record checks from foreign law enforcement organizations)

### Access to personal information and right to file a complaint under the *Privacy Act*

You may exercise your rights under the [Privacy Act](#) to access, correct or update your personal information. Consult [Information about programs and information holdings](#) (formerly known as Info Source) for:

- a detailed description of the personal information banks
- instructions on how to make a formal request for your personal information

You have the right to file a complaint with the Privacy Commissioner of Canada regarding the handling of your personal information.

### Decisions about status or clearance

The information collected on this form and the results of the security screening process will be used to support one of the following decisions about your reliability status or security clearance:

- grant or maintain the status or clearance
- grant or maintain the status or clearance with conditions
- deny the status or clearance
- revoke the status or clearance

Surname	Given name	Date of birth (yyyy-mm-dd)
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The decision will be recorded under "Record of decision" in section A of this form. For all applicants, except contractors, this decision will be made by the institution concerned. For contractors, the decision may be made by one of the following:

- the institution concerned when it is the contracting authority
- PSPC, in consultation with the institution concerned, in either of the following circumstances:
  - when PSPC is the contracting authority
  - when PSPC is providing security screening services to Government of Canada institutions within the context of contracting

Institutions that are not part of the Government of Canada do not have the authority to grant, deny, revoke, suspend or downgrade for cause a Government of Canada security screening status or clearance.

#### Information provided must be complete, adequate and accurate

To make a security screening decision, the Government of Canada needs to have adequate and complete information. Therefore, you must:

- fully disclose the information and documentation requested in the security screening application and consent form
- certify that the information and documentation are complete and accurate to the best of your knowledge and belief

The Government of Canada will take all reasonable measures to ensure that the personal information used for decision-making is as accurate, up to date and complete as possible. Such measures could involve one or more of the following:

- collecting the information from you or validating it directly with you
- using technology to identify errors and discrepancies
- collecting or validating the information indirectly, which may involve matching the personal information that you provided against authoritative records, including, but not limited to, the following:
  - those that pertain to your birth, immigration status and citizenship
  - your permits and licences
  - your credit report and criminal record from a jurisdictional or public authority

#### Applicant's declaration of understanding

I understand that if I provide misleading and/or incomplete information, my security screening application may be denied or the security screening process may be cancelled.

I understand that if it is determined that I provided incorrect information or withheld information on this application form, my reliability status and/or security clearance may be denied or a review for cause of my reliability status and/or security clearance may be initiated. A denial or review for cause may result in:

- my not being considered for appointment to a position in the Government of Canada
- the termination of my employment
- the termination of my contract
- other measures in accordance with relevant legislation, policies or arrangements

I understand that, in all cases, I must be officially granted the required type and level of security screening before I can be:

- assigned to a position
- assigned duties
- granted access to sensitive information, assets or facilities

I understand that:

- my security screening file will be retained for at least 2 years after my departure from the federal public service
- if my security screening is denied or revoked, my security screening file will be retained for at least 10 years after my departure from the federal public service

#### Applicant's declaration of consent

I affirm that:

- I have fully disclosed the information and documentation requested in this security screening application and consent form
- this form is complete, truthful and accurate to the best of my knowledge and belief

I consent to the use and disclosure of the personal information that has been collected in this form, and any additional information that may be collected during the security screening process, for the purposes of obtaining, revoking, updating, upgrading or reviewing for cause a reliability status and/or security clearance pursuant to the *Policy on Government Security* and the *Directive on Security Screening*.

In order to enable an assessment of my trustworthiness, my reliability, my loyalty to Canada and my reliability as it relates to my loyalty, with regard to any information and documentation provided by me in support of this security screening application, I consent to the use of this personal information by and its disclosure to:

- any authorized Government of Canada security screening official
- the RCMP, law enforcement agencies and police forces
- CSIS
- other entities, such as credit bureaus, that are internal or external to the Government of Canada

Without limiting the generality of the foregoing, my consent includes such personal information as my:

- name
- date of birth
- immigration and citizenship status in Canada
- residential history
- employment history
- educational credentials or professional designations
- fingerprints and facial image for identification purposes (as applicable)

Information about my spouse and any former spouses, relatives, roommates and cohabitants may also be shared with the RCMP, CSIS, or other law enforcement agencies and police forces when necessary to assess my reliability, my loyalty to Canada and my reliability as it relates to my loyalty.

**Security Screening Application and Consent Form****Protected B when completed**

Surname	Given name	Date of birth (yyyy-mm-dd)
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For the purpose of the security screening process, including any update, upgrade or investigation related to my security screening, I authorize any and all persons or organizations, including public, non-public, para-public, private or governmental institutions that have information about me, to release such information to the Government of Canada upon request. Information may be collected from sources such as:

- a previous employer or identified referee
- educational institution(s) that I have attended
- professional organizations that I belong to
- credit reporting agencies

I further authorize law enforcement agencies or police forces to check and release to the Government of Canada or the RCMP any other information about me contained in any accessible records and databases under their control as described in the *Directive on Security Screening*. This information may include my:

- criminal history
- charges
- court orders

I understand that this consent also authorizes law enforcement agencies and/or police forces to release to the Government of Canada or the RCMP any information about me or my associations to enable an assessment of my trustworthiness and reliability. I therefore give the RCMP permission to release to the Government of Canada, in whole or in part, the information it has collected about me in relation to the security screening level that this position requires.

This consent also applies if I permanently separate as an employee of the Government of Canada and subsequently register as a supplier or private sector contractor with PSPC within the retention period identified in PIB PSU 917 ([Security Screening](#)).

This consent will remain valid for conducting verifications, inquiries, assessments and investigations, including any subsequent verifications that are required as part of an update, upgrade or review for cause, until one of the following applies:

- I no longer require reliability status, security clearance, site access status or site access clearance
- I am no longer an employee of the Government of Canada
- the arrangement that requires me to have access to sensitive information is no longer in effect
- I revoke my consent to an authorized institutional security screening official using the appropriate electronic or written means



**Security Screening Application and Consent Form**

**Protected B when completed**

Surname	Given name	Date of birth (yyyy-mm-dd)
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**[A]Administrative information**

The designated institutional official will complete this section.

**[A1] Information about the appointment, assignment or contract**

<input type="checkbox"/> Indeterminate	<input type="checkbox"/> Term	<input type="checkbox"/> Reserves	<input type="checkbox"/> Contract	<input type="checkbox"/> Assignment	<input type="checkbox"/> Student	<input type="checkbox"/> Casual	<input type="checkbox"/> Volunteer
<input type="checkbox"/> Information-sharing agreement Specify		<input type="checkbox"/> Other Specify		If this application is <b>not</b> for an indeterminate position or a position in the Canadian Forces regular force or primary reserve, indicate the anticipated duration of the appointment, contract or assignment. From (yyyy-mm-dd) To (yyyy-mm-dd)			
Position, competition or contract no.	Title			Group, level or rank	Employee ID, personal record identifier (PRI) or service no.		
Hiring official or company security official's name			Work telephone no.	Work email			

**[A2] For security office use only:** The institutional official who has delegated authority to render a security screening decision must complete this section.

Reference no.		Department or organization no.		File no.	
New	Update Last screened (yyyy-mm-dd)	Upgrade Last screened (yyyy-mm-dd)	Transfer Last screened (yyyy-mm-dd)	Supplemental Last screened (yyyy-mm-dd)	Reactivation Last screened (yyyy-mm-dd)

**[A3] Record of decision:** The institutional official who has delegated authority to render a security screening decision must complete this section.

I, the undersigned, as the delegated official,  approve /  do not approve the required level of security screening.

<input type="checkbox"/> Reliability status	<input type="checkbox"/> Enhanced reliability status	<input type="checkbox"/> Site access status
<input type="checkbox"/> Secret security clearance	<input type="checkbox"/> Enhanced secret security clearance	<input type="checkbox"/> Site access status with additional inquiries
<input type="checkbox"/> Top secret security clearance	<input type="checkbox"/> Enhanced top secret security clearance	<input type="checkbox"/> Site access clearance
		<input type="checkbox"/> Site access clearance with additional inquiries

Name and title of security official

Signature	Date
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**[A4] Rationale and details of the decision:** A rationale and supporting details are required when a security screening is granted with waiver, denied, revoked, or administratively cancelled or when site access status or clearance is granted with additional inquiries.

**Security Screening Application and Consent Form**

**Protected B when completed**

Surname	Given name	Date of birth (yyyy-mm-dd)
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**[B] Background information**

All applicants must complete this section.

**[B1] Legal name and contact information**

Surname	All official given names (no initials)	Commonly used given name or nickname
Full legal name at birth (if different from current name) <input type="checkbox"/> Same as current name		
Surname	Given name(s) (no initials)	
Nickname(s) or alias(es) (also known as)	Date of birth (yyyy-mm-dd)	Gender <input type="checkbox"/> Woman <input type="checkbox"/> Man <input type="checkbox"/> Another gender
Preferred official language <input type="checkbox"/> English <input type="checkbox"/> French		
Daytime telephone no.	Personal email(s)	
Evening telephone no.	Work email(s)	

**[B2] All previous legal names**

In addition to the names listed above, do you have any additional legal names?  Yes  No

If the space provided is insufficient, attach an additional sheet and provide all the requested information.

<b>1</b>	Previous surname	Previous given name(s)		
	When did you use this name? From (yyyy-mm-dd) To (yyyy-mm-dd)	Location of change City or town	Province or equivalent	Country
	Was this name change recognized by a legal or governmental authority? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for change		
<b>2</b>	Previous surname	Previous given name(s)		
	When did you use this name? From (yyyy-mm-dd) To (yyyy-mm-dd)	Location of change City or town	Province or equivalent	Country
	Was this name change recognized by a legal or governmental authority? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for change		

**[B3] Citizenship(s)**

Place of birth City or town	Province or equivalent	Country
Are you a Canadian citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, what citizenship do you hold?	
Do you hold multiple citizenships? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list the country or countries that have granted you citizenship.	

**[B4] For applicants born outside of Canada**

Date of entry into Canada (yyyy-mm-dd)	Are you a naturalized Canadian citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, provide the following: Certificate no. <span style="float: right;">Date of issue (yyyy-mm-dd)</span>
If you are not naturalized, have you applied for Canadian citizenship? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, indicate whether you have: <input type="checkbox"/> Permanent resident status <input type="checkbox"/> Refugee status <input type="checkbox"/> A certificate or registration of birth abroad If applicable, attach a copy of your permanent resident status, landed documentation or refugee status to this form. If you were born abroad but have Canadian parents, attach a copy of your certificate or registration of birth abroad to this form.	
If you are not naturalized and you have not applied for Canadian citizenship, what is your status in Canada? <input type="checkbox"/> Work permit <input type="checkbox"/> Study permit <input type="checkbox"/> Protected person status <input type="checkbox"/> Visitor Visa <input type="checkbox"/> Other:		
<b>Attach copies of the documents that support your status declaration to this form.</b>		

**Security Screening Application and Consent Form**

**Protected B when completed**

Surname	Given name	Date of birth (yyyy-mm-dd)
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<b>[B5] Have you previously applied for or received a security screening?</b>				
Have you <b>previously applied</b> for a security status and/or clearance with: <ul style="list-style-type: none"> <li>• a Government of Canada institution</li> <li>• a foreign government</li> <li>• an international body (such as NATO*)</li> </ul> <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, provide the name of the Government of Canada institution, the foreign government or the international body, the year, and the level of security screening that was required in your most recent application. <table border="1"> <tr> <td>Institution, foreign government or international body</td> <td>Year</td> <td>Level of security screening</td> </tr> </table>	Institution, foreign government or international body	Year	Level of security screening
Institution, foreign government or international body	Year	Level of security screening		
Have you ever been <b>granted</b> a reliability status and/or security clearance by: <ul style="list-style-type: none"> <li>• a Government of Canada institution</li> <li>• a foreign government</li> <li>• an international body (such as NATO)</li> </ul> <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, provide the name of the Government of Canada institution, the foreign government or the international body, the year, and the level of your most recently granted security screening. <table border="1"> <tr> <td>Institution, foreign government or international body</td> <td>Year</td> <td>Level of security screening</td> </tr> </table>	Institution, foreign government or international body	Year	Level of security screening
Institution, foreign government or international body	Year	Level of security screening		
Has your security screening ever been <b>revoked or cancelled</b> by: <ul style="list-style-type: none"> <li>• a Government of Canada institution</li> <li>• a foreign government</li> <li>• an international body (such as NATO)</li> </ul> <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, provide the name of the Government of Canada institution, the foreign government or the international body, the year, and an explanation. <table border="1"> <tr> <td>Institution, foreign government or international body</td> <td>Year</td> <td>Explanation</td> </tr> </table>	Institution, foreign government or international body	Year	Explanation
Institution, foreign government or international body	Year	Explanation		
Have you ever been <b>denied a reliability status or security clearance</b> by: <ul style="list-style-type: none"> <li>• a Government of Canada institution</li> <li>• a foreign government</li> <li>• an international body (such as NATO)</li> </ul> <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, provide the name of the Government of Canada institution, the foreign government or the international body, the year, and an explanation. <table border="1"> <tr> <td>Institution, foreign government or international body</td> <td>Year</td> <td>Explanation</td> </tr> </table>	Institution, foreign government or international body	Year	Explanation
Institution, foreign government or international body	Year	Explanation		

<b>[C] Residence</b>					
All applicants must complete this section. Ensure that there are no gaps in the dates that you provide below.					
For <b>reliability status, enhanced reliability status, site access status and site access status with additional inquiries</b> , list all (including temporary) addresses where you have lived in the last <b>5 years</b> , beginning with your current address.					
For <b>secret security clearance, enhanced secret security clearance, top secret security clearance, enhanced top secret security clearance, site access clearance and site access clearance with additional inquiries</b> , list all (including temporary) addresses where you have lived in the last <b>10 years</b> , beginning with your current address.					
If the space provided is insufficient, attach an additional sheet and provide all the requested information.					
1	<table border="1"> <tr> <td>Address Unit no.    Street no.    Street name</td> <td>Dates From (yyyy-mm-dd)    To present</td> </tr> <tr> <td>City or town    Province or equivalent    Country    Postal code or equivalent</td> <td>Telephone no.</td> </tr> </table>	Address Unit no.    Street no.    Street name	Dates From (yyyy-mm-dd)    To present	City or town    Province or equivalent    Country    Postal code or equivalent	Telephone no.
	Address Unit no.    Street no.    Street name	Dates From (yyyy-mm-dd)    To present			
City or town    Province or equivalent    Country    Postal code or equivalent	Telephone no.				
2	<table border="1"> <tr> <td>Address Unit no.    Street no.    Street name</td> <td>Dates From (yyyy-mm-dd)    To(yyyy-mm-dd)</td> </tr> <tr> <td>City or town    Province or equivalent    Country    Postal code or equivalent</td> <td>Telephone no.</td> </tr> </table>	Address Unit no.    Street no.    Street name	Dates From (yyyy-mm-dd)    To(yyyy-mm-dd)	City or town    Province or equivalent    Country    Postal code or equivalent	Telephone no.
	Address Unit no.    Street no.    Street name	Dates From (yyyy-mm-dd)    To(yyyy-mm-dd)			
City or town    Province or equivalent    Country    Postal code or equivalent	Telephone no.				
3	<table border="1"> <tr> <td>Address Unit no.    Street no.    Street name</td> <td>Dates From (yyyy-mm-dd)    To (yyyy-mm-dd)</td> </tr> <tr> <td>City or town    Province or equivalent    Country    Postal code or equivalent</td> <td>Telephone no.</td> </tr> </table>	Address Unit no.    Street no.    Street name	Dates From (yyyy-mm-dd)    To (yyyy-mm-dd)	City or town    Province or equivalent    Country    Postal code or equivalent	Telephone no.
	Address Unit no.    Street no.    Street name	Dates From (yyyy-mm-dd)    To (yyyy-mm-dd)			
City or town    Province or equivalent    Country    Postal code or equivalent	Telephone no.				
Please explain the following: <ul style="list-style-type: none"> <li>• any and all residences that have overlapping dates</li> <li>• any periods of time outside of Canada</li> <li>• any periods of time when you had no associated address</li> </ul> When providing an explanation, provide sufficient context (dates, city or town, country) so that your explanation can be properly understood.					

\* NATO stands for North Atlantic Treaty Organization.

**Security Screening Application and Consent Form**

**Protected B when completed**

Surname	Given name	Date of birth (yyyy-mm-dd)
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**[D] Professional background**

All applicants must complete this section. List all employment or periods of education within or outside Canada, including:

- periods of self employment
- consultation for a firm, agency or foreign government
- periods of military service or work in law enforcement
- security intelligence employment and internships
- temporary assignments or co op terms
- any employment or consultation that took place concurrently
- any periods of unemployment or retirement

For **reliability status, enhanced reliability status, site access status and site access status with additional inquiries**, list your employment and education in the last **5 years**, or **from your 16th birthday**, beginning with your current employer or school.

For **secret security clearance, enhanced secret security clearance, top secret security clearance, enhanced top secret security clearance, site access clearance and site access clearance with additional inquiries**, list your employment and education in the last **10 years**, or **from your 16th birthday**, beginning with your current employer or school.

If the space provided is insufficient, attach an additional sheet and provide all the requested information.

<b>1</b>	Employment status <input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed			Dates From (yyyy-mm-dd)    To present		
	Name of current employer or educational institution		Job title or field of study		Group, level, rank or service no. (if applicable)	
	Describe the nature of your employment.					
	Work email(s)			Work telephone no.		
	Address of your work site or educational institution					
	Street no.		Street name	City or town	Province or equivalent	Country
	Supervisor's information					
	Name		Title			
	Work email		Work telephone no.			
	Did this employment involve working with a foreign government, firm or agency? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Were you dismissed or asked to resign from this position? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, provide a brief explanation.				
Would your employment be jeopardized if <b>this supervisor</b> were to be contacted for a professional reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, provide a brief description of why your employment may be jeopardized.				
If contacting this supervisor would jeopardize your employment, provide an alternative contact, preferably one who is at a supervisory level.						
Name		Title				
Work email		Work telephone no.				

**Security Screening Application and Consent Form**

**Protected B when completed**

Surname	Given name	Date of birth (yyyy-mm-dd)
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<b>2</b>	Employment status <input type="checkbox"/> Employed <input type="checkbox"/> Self-employed <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed		Dates From (yyyy-mm-dd)    To (yyyy-mm-dd)	
	Name of employer or educational institution		Job title or field of study	
	Group, level, rank or service no. (if applicable)			
	Describe the nature of your employment.			
	Work email(s)		Work telephone no.	
	Address of your work site or educational institution Street no.    Street name    City or town    Province or equivalent    Country			
	Supervisor's information Name		Title	
	Work email		Work telephone no.	
	Did this employment involve working with a foreign government, firm or agency? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Were you dismissed or asked to resign from this position? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, provide a brief explanation.	
Is there any reason why <b>this supervisor</b> should not be contacted for a professional reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, provide a brief description of why we should not contact this supervisor for a reference.		
If this supervisor should not be contacted for a reference, provide an alternative contact, preferably one who is or was at a supervisory level. Name    Title				
Work email		Work telephone no.		

**[E] Personal references**

All applicants must complete this section. Please list 2 personal references in Canada who:

- have known you for 3 years or longer
- are not your relatives
- are able to describe your activities outside work

References will be asked about all aspects of your conduct and character.

<b>1</b>	Surname		Given name(s)		Relationship	How long has this person known you?	
	Daytime telephone no.		Evening telephone no.		Personal email(s)		
	Current address	Unit no.	Street no.	Street name			
		City or town		Province or equivalent		Country	Postal code or equivalent
	Current employment or educational institution (if known)	Name of employer or educational institution (if retired, name of last employer)			Job title or field of study		
		Work telephone no.		Work email			
Address of work site or educational institution Street no.    Street name    City or town    Province or equivalent    Country							

**Security Screening Application and Consent Form**

**Protected B when completed**

Surname	Given name	Date of birth (yyyy-mm-dd)
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<b>2</b>	Surname		Given name(s)		Relationship	How long has this person known you?	
	Daytime telephone no.		Evening telephone no.		Personal email(s)		
	<b>Current address</b>	Unit no.	Street no.	Street name			
		City or town		Province or equivalent		Country	Postal code or equivalent
	<b>Current employment or educational institution (if known)</b>	Name of employer or educational institution (if retired, name of last employer)				Job title or field of study	
Work telephone no.		Work email					
Address of work site or educational institution Street no. Street name			City or town	Province or equivalent	Country		

**[F] Educational credentials and professional designations**

All applicants must complete this section.

**[F1] Educational credentials**

Do you have educational credentials?  Yes  No

If yes, provide the details below and provide copies of your credentials. If the space provided is insufficient, attach an additional sheet and provide all the requested information.

<b>1</b>	Name of educational institution attended		Student ID no. (if known)		When did you attend? From (yyyy-mm-dd) To (yyyy-mm-dd)	
	What type of credential did you receive? (e.g., certification, bachelor's or master's degree)					
	Address of institution Street name		City or town	Province or equivalent	Country	
<b>2</b>	Name of educational institution attended		Student ID no. (if known)		When did you attend? From (yyyy-mm-dd) To (yyyy-mm-dd)	
	What type of credential did you receive? (e.g., certification, bachelor's or master's degree)					
	Address of institution Street name		City or town	Province or equivalent	Country	

**[F2] Professional designations**

Do you have any professional designations?  Yes  No

If yes, provide the details below and attach a copy of your professional designation(s). If the space provided is insufficient, attach an additional sheet and provide all the requested information.

<b>1</b>	Name of institution that granted the designation			Registration ID no. (if applicable)		
	Type of designation (e.g., chartered accountant, lawyer, certified human resources professional, engineer)				Date the designation was granted (yyyy-mm-dd)	
	Address of institution Street name		City or town	Province or equivalent	Country	

**Security Screening Application and Consent Form**

**Protected B when completed**

Surname	Given name	Date of birth (yyyy-mm-dd)
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<b>2</b>	Name of institution that granted the designation	Registration ID no. (if applicable)
	Type of designation (e.g., chartered accountant, lawyer, certified human resources professional, engineer)	Date the designation was granted (yyyy-mm-dd)
	Address of institution Street name	City or town Province or equivalent Country

**[G] Criminal record**

All applicants must complete this section. Provide information on:

- any criminal convictions in Canada for any offence under an act of Parliament that is an indictable offence or punishable by summary conviction
- any conviction and criminal conviction outside Canada for any act that if committed in Canada would constitute an indictable offence or be punishable by summary conviction under an act of Parliament

Have you ever been convicted of a criminal offence in Canada or outside Canada for which you have not been granted a record suspension or pardon?

Yes  No

If yes, provide the details below. If the space provided is insufficient, attach an additional sheet and provide all the requested information.

<b>1</b>	Criminal record details	Name of law enforcement authority	
	Place of conviction City or town Province or equivalent Country	Date of conviction (yyyy-mm-dd)	
<b>2</b>	Criminal record details	Name of law enforcement authority	
	Place of conviction City or town Province or equivalent Country	Date of conviction (yyyy-mm-dd)	

**Certification of sections B to G (for applicants of reliability status or site access status):** To certify the information that you have provided, sign and date as indicated.

I hereby certify that the information that I have provided in this document is true and correct to the best of my knowledge.

Signature	Date (yyyy-mm-dd)
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**Note**

You must present the **originals** of any copies that you have attached to your application to a security official.

If you are applying for **reliability status** or **site access status**, you have **finished** filling out the form.

**Continue** to the next sections **only** if you are applying for one of the following:

- enhanced reliability status
- site access status with additional inquiries
- secret security clearance
- enhanced secret security clearance
- top secret security clearance
- enhanced top secret security clearance
- site access clearance
- site access clearance with additional inquiries

Surname	Given name	Date of birth (yyyy-mm-dd)
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**[H] Proactive notification**

This section is to be completed by applicants for:

- enhanced reliability status
- site access status with additional inquiries
- secret security clearance
- enhanced secret security clearance
- top secret security clearance
- enhanced top secret security clearance
- site access clearance
- site access clearance with additional inquiries

**Legal or judicial prohibition**

Are you currently under any legally issued prohibition that obliges you to abstain from specific actions or restricts you from possessing specific items?

Yes  No

If yes, provide details:

Examples may include:

- prohibitions against the use of firearms, drugs or alcohol
- prohibitions against gambling, lobbying, driving or going to specific locations
- prohibitions against employment or volunteer activities that involve minors or vulnerable persons
- peace bonds or restraining orders

**[I] Marital, common-law or conjugal partnership status**

This section is to be completed by applicants for:

- enhanced reliability status
- site access status with additional inquiries
- secret security clearance
- enhanced secret security clearance
- top secret security clearance
- enhanced top secret security clearance
- site access clearance
- site access clearance with additional inquiries

What is your current relationship status?

Married  Common-law or conjugal partnership  Widowed  Separated  Divorced  Single

If you are single, were you previously married or in a common-law relationship?  Yes  No

If applicable, provide the date of your separation or divorce or the date of your spouse's death. (yyyy-mm-dd)

If it has been less than **10 years** since your separation or divorce or since your spouse died, provide your previous spouse, common-law or conjugal partner's information in section I2 below.

**[I1] Current spouse, common-law or conjugal partner**

Your spouse, common-law or conjugal partner is a person who is:

- not an immediate relative as defined in section K of this form
- in a conjugal relationship with you

Your spouse, common-law or conjugal partner may be:

- cohabiting with you or not
- of any gender

Surname	Given name(s)	Surname at birth (if different from current surname)	Gender <input type="checkbox"/> Woman <input type="checkbox"/> Man <input type="checkbox"/> Another gender
Place of birth City or town	Province or equivalent	Country	Date of birth (yyyy-mm-dd)
Date of marriage or common-law partnership (yyyy-mm-dd)	Place of marriage or common-law partnership City or town	Province or equivalent	Country
			List all current citizenships

**Security Screening Application and Consent Form**

**Protected B when completed**

Surname	Given name	Date of birth (yyyy-mm-dd)
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<b>Current address</b>	Unit no.      Street no.      Street name
	City or town      Province or equivalent      Country      Postal code or equivalent
	Dates at this address From (yyyy-mm-dd)      To present      Telephone no.      Personal email
<b>Current employment or educational institution</b>	Name of employer or educational institution (if retired, name of last employer)      Job title or field of study
	Work telephone no.      Work email
	Address of work site or educational institution Street no.      Street name      City or town      Province or equivalent      Country

**[I2] Former spouse, common law or conjugal partner**

Your former spouse, common-law or conjugal partner is a person who:

- is not an immediate relative as defined in section K of this form
- was in a conjugal relationship with you

Your former spouse, common-law or conjugal partner may:

- have been cohabiting with you or not
- be of any gender

The duration of the relationship is not taken into account.

Surname	Given name(s)	Surname at birth (if different from current)	Gender <input type="checkbox"/> Woman <input type="checkbox"/> Man <input type="checkbox"/> Another gender
Place of birth City or town	Province or equivalent	Country	Date of birth (yyyy-mm-dd)      List all current citizenships
Date of marriage or common-law partnership (yyyy-mm-dd)	Place of marriage or common-law partnership City or town	Province or equivalent	Country      Date of separation or divorce or date of your spouse's death (yyyy-mm-dd)

<b>Current address (if known)</b>	Unit no.      Street no.      Street name
	City or town      Province or equivalent      Country      Postal code or equivalent
	Dates at this address From (yyyy-mm-dd)      To present      Telephone no.      Personal email
<b>Current employment or educational institution (if known)</b>	Name of employer or educational institution (if retired, name of last employer)      Job title or field of study
	Work telephone no.      Work email
	Address of work site or educational institution Street no.      Street name      City or town      Province or equivalent      Country

If you do not know any or all of the information requested in this section and you cannot obtain this information, explain why.

Surname	Given name	Date of birth (yyyy-mm-dd)
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**[J] Roommates or cohabitants**

This section is to be completed by applicants for:

- enhanced reliability status
- site access status with additional inquiries
- secret security clearance
- enhanced secret security clearance
- top secret security clearance
- enhanced top secret security clearance
- site access clearance
- site access clearance with additional inquiries

Your roommate or cohabitant is a person who is:

- over 18 years of age
- currently living at the same address as you in a non-conjugal relationship, including relatives and non-relatives
- not a former spouse or common-law partner listed in section I2

Ensure that you provide the legal names of all roommates and cohabitants. If you are a student living in residence, list only the person(s) with whom you share a dorm room or apartment.

Do you have roommates or cohabitants to declare?  Yes  No

If yes, provide details below. If the space provided is insufficient, attach an additional sheet and provide all the requested information.

1	Surname		Given name(s)		Surname at birth (if different from current)		
	Relationship (e.g., nanny, friend, boarder)		Dates at this address From (yyyy-mm-dd) To present		Date of birth (yyyy-mm-dd)	List all current citizenships	
	Place of birth City or town		Province or equivalent		Country		
	Daytime telephone no.		Evening telephone no.		Personal email(s)		
	Current employer or educational institution	Name of employer or educational institution (if retired, name of last employer)			Job title or field of study		
		Work telephone no.		Work email			
		Address of work site or educational institution Street no. Street name		City or town		Province or equivalent	Country
If you do not know any or all of the information requested in this section and you cannot obtain this information, explain why.							

**Security Screening Application and Consent Form**

**Protected B when completed**

Surname	Given name	Date of birth (yyyy-mm-dd)
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<b>2</b>	Surname		Given name(s)		Surname at birth (if different from current)		
	Relationship (e.g., nanny, friend, boarder)		Dates at this address From (yyyy-mm-dd)      To present		Date of birth (yyyy-mm-dd)	List all current citizenships	
	Place of birth City or town		Province or equivalent		Country		
	Daytime telephone no.		Evening telephone no.		Personal email(s)		
	<b>Current employer or educational institution</b>	Name of employer or educational institution (if retired, name of last employer)			Job title or field of study		
		Work telephone no.		Work email			
		Address of work site or educational institution Street no.      Street name		City or town		Province or equivalent      Country	
If you do not know any or all of the information requested in this section and you cannot obtain this information, explain why.							

**Certification of sections B to J (for applicants of enhanced reliability status or site access status with additional inquiries):** To certify the information that you have provided, sign and date as indicated.

I hereby certify that the information that I have provided in this document is true and correct to the best of my knowledge.

Signature	Date (yyyy-mm-dd)
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**Note**

You must present the **originals** of any copies that you have attached to your application to a security official.

If you are applying for **enhanced reliability status** or **site access status with additional inquiries**, you have **finished** filling out the form.

**Continue** to the next sections **only** if you are applying for one of the following:

- secret security clearance
- enhanced secret security clearance
- top secret security clearance
- enhanced top secret security clearance
- site access clearance
- site access clearance with additional inquiries

Surname	Given name	Date of birth (yyyy-mm-dd)
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**[K] Immediate relatives**

This section is to be completed by applicants for:

- secret security clearance
- enhanced secret security clearance
- top secret security clearance
- enhanced top secret security clearance
- site access clearance
- site access clearance with additional inquiries

Your immediate relatives include:

- all children 18 years of age and older with whom you and your spouse or common law partner have a parental relationship
- your father, mother and siblings
- your current spouse or common law partner's father and mother
- any "step" and "half" relatives that are considered in the above categories

If any person is deceased, include their date of death and last known address. Ensure that you provide the legal names of all immediate relatives. Do not use initials.

If you have declared an immediate relative in the "Roommates or cohabitants" section on page 14, there is no need to repeat their information in this section.

If the space provided is insufficient, attach an additional sheet and provide all the requested information.

1	Surname		Given name(s)		Surname at birth (if different from current)		
	Relationship		Date of birth (yyyy-mm-dd)		List all current citizenships		
	Date of death (yyyy-mm-dd)						
	Place of birth City or town		Province or equivalent		Country		
	Current address	Unit no.	Street no.	Street name			
		City or town		Province or equivalent		Country	Postal code or equivalent
		Dates at this address From (yyyy-mm-dd) To present		Telephone no.		Personal email	
	Current employer or educational institution	Name of employer or educational institution (if retired, name of last employer)			Job title or field of study		
		Work telephone no.		Work email			
		Address of work site or educational institution Street no. Street name		City or town		Province or equivalent	Country
If you do not know any or all of the information requested in this section and you cannot obtain this information, explain why.							

**Security Screening Application and Consent Form**

**Protected B when completed**

Surname	Given name	Date of birth (yyyy-mm-dd)
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<b>2</b>	Surname		Given name(s)		Surname at birth (if different from current)		
	Relationship		Date of birth (yyyy-mm-dd)		List all current citizenships		
	Date of death (yyyy-mm-dd)		Place of birth City or town		Province or equivalent		
	Country		Unit no.		Street no.		
	Street name		City or town		Province or equivalent		
	Country		Postal code or equivalent		Dates at this address From (yyyy-mm-dd)		
	To present		Telephone no.		Personal email		
<b>Current employer or educational institution</b>	Name of employer or educational institution (if retired, name of last employer)			Job title or field of study			
	Work telephone no.		Work email				
	Address of work site or educational institution Street no.		Street name		City or town		
Province or equivalent		Country		If you do not know any or all of the information requested in this section and you cannot obtain this information, explain why.			

<b>3</b>	Surname		Given name(s)		Surname at birth (if different from current)		
	Relationship		Date of birth (yyyy-mm-dd)		List all current citizenships		
	Date of death (yyyy-mm-dd)		Place of birth City or town		Province or equivalent		
	Country		Unit no.		Street no.		
	Street name		City or town		Province or equivalent		
	Country		Postal code or equivalent		Dates at this address From (yyyy-mm-dd)		
	To present		Telephone no.		Personal email		
<b>Current employer or educational institution</b>	Name of employer or educational institution (if retired, name of last employer)			Job title or field of study			
	Work telephone no.		Work email				
	Address of work site or educational institution Street no.		Street name		City or town		
Province or equivalent		Country		If you do not know any or all of the information requested in this section and you cannot obtain this information, explain why.			

**Security Screening Application and Consent Form**

**Protected B when completed**

Surname	Given name	Date of birth (yyyy-mm-dd)
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<b>4</b>	Surname		Given name(s)		Surname at birth (if different from current)		
	Relationship		Date of birth (yyyy-mm-dd)	List all current citizenships		Date of death (yyyy-mm-dd)	
	Place of birth City or town		Province or equivalent		Country		
	<b>Current address</b>	Unit no.	Street no.	Street name			
		City or town		Province or equivalent		Country	Postal code or equivalent
		Dates at this address From (yyyy-mm-dd)		To present	Telephone no.	Personal email	
	<b>Current employer or educational institution</b>	Name of employer or educational institution (if retired, name of last employer)			Job title or field of study		
		Work telephone no.		Work email			
		Address of work site or educational institution Street no.		Street name	City or town	Province or equivalent	Country
	If you do not know any or all of the information requested in this section and you cannot obtain this information, explain why.						

**Certification of sections B to K (for applicants of secret security clearance, site access clearance or enhanced secret security clearance):** To certify the information that you have provided, sign and date as indicated.

I hereby certify that the information that I have provided in this document is true and correct to the best of my knowledge.

Signature	Date (yyyy-mm-dd)
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**Note**

You must present the **originals** of any copies that you have attached to your application to a security official.

If you are applying for **secret security clearance, site access clearance or enhanced secret security clearance**, you have **finished** filling out the form.

**Continue** to the next sections **only** if you are applying for one of the following:

- top secret security clearance
- enhanced top secret security clearance
- site access clearance with additional inquiries

Surname	Given name	Date of birth (yyyy-mm-dd)
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**[L] Foreign travel**

This section is to be completed by applicants for:

- top secret security clearance
- enhanced top secret security clearance
- site access clearance with additional inquiries

Have you travelled outside of Canada, the United States of America or Mexico for personal reasons or non-government business in the last **5 years**?

Yes  No

If yes, provide details below. If the space provided is insufficient, attach an additional sheet and provide all the requested information.

1	Country	Purpose	Travel dates From (yyyy-mm-dd) To (yyyy-mm-dd)
2	Country	Purpose	Travel dates From (yyyy-mm-dd) To (yyyy-mm-dd)
3	Country	Purpose	Travel dates From (yyyy-mm-dd) To (yyyy-mm-dd)
4	Country	Purpose	Travel dates From (yyyy-mm-dd) To (yyyy-mm-dd)
5	Country	Purpose	Travel dates From (yyyy-mm-dd) To (yyyy-mm-dd)

**[M] Foreign passports**

This section is to be completed by applicants for:

- top secret security clearance
- enhanced top secret security clearance
- site access clearance with additional inquiries

Do any of the following situations apply to you?

- You hold a non-Canadian passport  Yes  No
- You have previously held a non-Canadian passport  Yes  No
- You have applied for a non-Canadian passport  Yes  No

If you answered yes to any of the above situations, list all the non-Canadian passports that you:

- hold
- have previously held
- have previously applied for

If the space provided is insufficient, attach an additional sheet and provide all the requested information.

1	Country	Purpose	Passport no.	Dates From (yyyy-mm-dd) To (yyyy-mm-dd)
2	Country	Purpose	Passport no.	Dates From (yyyy-mm-dd) To (yyyy-mm-dd)
3	Country	Purpose	Passport no.	Dates From (yyyy-mm-dd) To (yyyy-mm-dd)

**[N] Foreign assets**

This section is to be completed by applicants for:

- top secret security clearance
- enhanced top secret security clearance
- site access clearance with additional inquiries

Apart from stocks and mutual funds purchased in Canada from a regulated financial institution, do you have any business, financial or personal assets outside Canada?  Yes  No

If yes, list the relevant countries.

**Security Screening Application and Consent Form****Protected B when completed**

Surname	Given name	Date of birth (yyyy-mm-dd)
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**Certification of sections B to N (for applicants of top secret security clearance, enhanced top secret security clearance or site access clearance with additional inquiries):** To certify the information that you have provided, sign and date as indicated.

I hereby certify that the information that I have provided in this document is true and correct to the best of my knowledge.

Signature	Date (yyyy-mm-dd)
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**Note**

You must present the **originals** of any copies that you have attached to your application to a security official.

**End of form**