

U.S. Waiver Fingerprint Consent Form

| , 2022 | | |
|---|------------------------------------|------------------------------------|
| The Commissioner, RCMP ATT: Identification Service Directorate Post Office Box 8885 Ottawa, ON K1G 3M8 | e, Civil Section | |
| RE: AUTHORIZATION FOR RCMP TO I | DISCLOSE THE RESULTS OF CRIMIN | AL RECORD CHECK |
| l, | , hereby give consent to the | e Royal Canadian |
| Mounted Police to disclose the result | | |
| PARDON APPLICATIONS OF CANADA 440 Laurier Avenue West, Suite 200 Ottawa, Ontario K1R 7X6 | | RCMP ACCREDITED FINGERPRINTS |
| I fully understand that I am entitled to consent to disclose this information to negative consequences on my reques | o the above person or organization | • • |
| Sincerely, | | |
| {YOUR SIGNATURE} | | |

This Form is for U.S. Waiver Fingerprint Authorization Only – It Does Not Need to be Returned to PAC Pardon Applications of Canada is A+ BBB Accredited using RCMP Accredited Fingerprints Since 2011