



Offense Declaration

Please complete the following three (3) sections

Section 1 (please print clearly)

Name: _____ Position/Role: _____

Section 2 (please print clearly)

I DECLARE that, since the last criminal record check collected by Maison McCulloch Hospice (MMH), or since the last Offense Declaration given by me to this organization:

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 have no convictions ☐ _____ **(Employee Initials)**

OR

I have been convicted of the following criminal offense(s) under the Criminal Code of Canada for which a pardon under Section 4.1 of the Criminal Records Act (Canada) has not been issued or granted to me.

List of Offense(s): _____

Date: _____ Court Location: _____

Conviction: _____

In addition, I am aware of my duty to provide Maison McCulloch Hospice with an offense declaration as soon as reasonably possible at any time that I am convicted of an offense under the Criminal Code (Canada).

Section 3 (please sign using ink)

DATED at _____ on _____
(City) (Date)

Signature: _____

Witness: _____ Witness Signature: _____