Third Party Consent Form

（请用英文字母填写）

I （姓名）_____ DOB （出生日期）_____

certify that the information set out by me in this application is true and correct to the best of my ability. I consent to the search of the RCMP National Repository of Criminal Records based on fingerprints and the release of Criminal Records or any Criminal Information to The Fingerprint Room Inc. or any Third Parties per my request. If the RCMP sends my results directly to me to comply with privacy laws, I release The Fingerprint Room Inc. from all liability for complications occurring after fingerprints have been submitted. Information collected follows any federal, provincial or municipal public sector privacy legislation and is disclosed in accordance with privacy laws.

（本人（申请人）声明，本申请表中提供的信息均真实无误。本人同意加拿大皇家骑警根据本人的指纹在国家刑事记录库中进行检索，并同意按本人的要求，将无犯罪记录或任何相关犯罪信息提供给 The Fingerprint Room Inc.或本人所指定的第三方。若加拿大皇家骑警为遵守隐私法律而将结果直接发送给本人，本人同意，The Fingerprint Room Inc. 不需要在指纹提交后所产生的后续问题负上任何责任。信息的收集均遵守联邦、省、市各级公共部门的隐私法律。）

**Please be notified that due to the nature of the extensive procedures required in such processing, our background check services are non-refundable. If circumstances arise and you would like to cancel the application, please notify us immediately **

****请注意：由于这个背景检查是一项步骤繁多及复杂的服务，所以这一项服务的费用是不能退还的。如有突发情况而你需要取消申请，请务必在第一时间联系我们。****

Signature: （签名）_____

Date:（日期）_____