

Jack, Michael (JUS)

From: Crawford, Gary #419 [419@YRP.CA]
Sent: October 16, 2009 8:12 AM
To: MacDonald, Shawn D. (JUS)
Cc: Jack, Michael (JUS)
Subject: RE: Direct hire

Hi Shawn how are things...I would be happy to talk to Mike...have him call me at 905-830-0303 ext 6729...now would be a great time to patch over as we are pushing hard right now to get more experienced guys...sounds like he would be a great catch for us!...Gary Crawford

From: MacDonald, Shawn D. (JUS) [mailto:Shawn.MacDonald@ontario.ca]
Sent: October 16, 2009 7:28 AM
To: Crawford, Gary #419
Cc: Jack, Michael (JUS)
Subject: Direct hire

Hi Gary,

Shawn MacDonald here. Not sure if you remember me, I worked at York for 8 yrs in Newmarket and now with the O.P.P. I was talking with Bill Lumley and he gave me your email.

I just wanted to speak to you about a direct hire possibility. Michael Jack works here in Peterborough County O.P.P. He has spoken to me about York and is interested in working there. I have told him that it is an excellent force to work for. I don't work with Mike but have met him a couple of times. He has a wide cultural background and fluent in several languages. He has attributes that would not be utilized with the O.P.P.

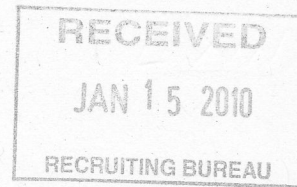
Anyways, if you wouldn't mind Mike contacting you to see what steps he can take to be successful in being hired by York. I know he would like to speak with you and discuss things further.

Appreciate your help.

Take care,

Shawn

Shawn MacDonald
Provincial Constable #12277
Peterborough County O.P.P.



Experienced Checklist of Mandatory Application Documents

Surname: JACK

First Name: MICHAEL

Middle Name:

Checklist of MANDATORY Application Documents

The following list of documents must be included with your application package. Failure to include any of the required documents will delay the processing of your application. This checklist must be submitted with your application package as well.

Initial the boxes when you have included the documents with your application package.

- M.J. Up to date resume
- Proof of current Fitness Test – PIN, PARE, POPAT
- M.J. Cover letter, including day and night phone and cell phone numbers
- M.J. Proof of successful completion of 4 years of Secondary School Education (Diploma or transcript acceptable) or equivalency. And, post Secondary School diploma(s) or transcript(s) if applicable.
- M.J. Ontario Police College diploma, student evaluation marks or other training facility in Canada
- M.J. Proof of course certificates
- Performance evaluations
- M.J. Photocopy of Driver's License and Birth Certificate
- M.J. Copy of CPR/First Aid certificate – Level C
- M.J. List of references – Professional (current & past supervisors) and personal (3+3)
- M.J. Completed application (hand written in black ink)
- M.J. Confidential applicant survey (hand written in black ink)
- M.J. Completed authorization for release of information (hand written in black ink)

**ONTARIO CONSTABLE SELECTION SYSTEM
Consent and Release of Liability Form**

JACK	0	3	0
Last Name (Please Print)	3 rd , 6 th & 9 th digits of SIN		

Please read the following form carefully.

The purposes of parts A and B of this form are to authorize police services and other individuals and entities noted below to collect, to use and to disclose personal information about you for the purpose of assessing your abilities to be a police constable under the Ontario Constable Selection System, and for related research, information and statistical tracking.

The purpose of part C of this form is to release any of the individuals or entities named on this form from liability that might arise as a result of the collection, use or disclosure of your personal information in accordance with parts A and B.

A. CONSENT/ASSESSMENT

I hereby authorize any police service in Ontario to which I have submitted an application to be hired as a constable, and that is a licensed member of the Constable Selection System, to request and obtain personal information about me as described below from any or all of the following individuals or entities:

- the Ontario Association of Chiefs of Police (OACP), which is licensed by the Ontario Government to operate the Constable Selection System, stores personal information belonging to police constable applicants in a secure electronic database, and uses this information to track demographic data and assessment results;

- the OACP Constable Selection System-licensed assessment firm, which provides assessment services on behalf of the OACP, and which collects assessment results as well as the personal information required for Constable Selection System registration;

- the Ontario Ministry of Community Safety and Correctional Services, which is the licensor of the Constable Selection System, and which conducts research using personal information to support the validity and reliability of the Constable Selection System;

- the Ontario Ministry of Transportation, which maintains driving records of Ontario residents;

- any other Ontario police service or law enforcement agency, which may hold personal information about me;

- the Canadian Police Information Centre, which is owned by the RCMP, and which maintains a computerized system to provide law enforcement agencies with information on individuals with criminal records;

- any health care practitioner (including doctors, nurses, psychologists and their agents) who has provided me with health care treatment, either as part of this constable selection process or otherwise;

- any previous employer who may hold personal information about me;

- any consumer reporting agency, which maintains credit or other personal information about a consumer;

- any educational institution in which I have been, or am currently, enrolled and which has information about me, including my grade or performance results; and,

I further hereby authorize any of the above-noted individuals or entities to collect or use personal information about me as described above, and to disclose such personal information to a requesting police service as part of this Constable Selection System.

I further acknowledge that any of the above-noted individuals or entities may disclose to the requesting police service to which I have submitted an application any or all of the following records, including any parts of the following records:

- ✓ academic records and transcripts;
- ✓ employment records (Police Service and other), including performance evaluation / reviews, discipline, complaint and attendance information;
- ✓ police records and history of law involvement, including criminal and provincial reports and convictions, and intelligence information;
- ✓ police service applications;
- ✓ medical information;
- ✓ background and security checks (including CPIC, NCIC, Interpol, etc.);
- ✓ financial information, including credit bureau check;
- ✓ driving record;
- ✓ physical, psychological, visual, aptitude and other employment-related tests, including but not limited to MMPI-2 -questions, answers and scores, and the interview notes, summaries, opinions, assessments and evaluations of psychologists;
- ✓ applicant survey information; and,
- ✓ training record.

B. CONSENT/RESEARCH

I understand that personal information about me may be required occasionally for research purposes, and in particular for documenting findings and trends, and for reviewing the validity and reliability of the Constable Selection System. I hereby consent to any of the personal information collected about me, pursuant to this form or at any point while I am being trained to be a constable, to be used and to be disclosed to a researcher or to an entity listed in Part A of this form for these purposes. I understand that in providing this consent no personal information that identifies me shall ever be published in a publication that is available to the general public.

C. RELEASE OF LIABILITY

By signing this form, I agree that in consideration for applying to be a constable pursuant to this Constable Selection System, I hereby release and forever discharge all of the individuals, entities, and classes of individuals and entities referred to on this form, and their agents, licensees, employees, directors, officers, and subcontractors, including but not limited to Her Majesty the Queen in Right of Ontario, the OACP, any Ontario police services board, and their respective agents, licensees, employees, directors, officers, and subcontractors, from any and all actions, causes of action, claims, demands, and remedies, for any and all damages, losses, injuries and expenses of any nature or kind howsoever arising, which hereafter may be sustained by me in connection with the collection, use, and disclosure of information about me in accordance with the consents provided by me in this form, and from the use or reliance upon information about me obtained in accordance with these consents.

And I further agree that this Release of Liability shall apply to and be binding on my heirs, administrators, executors, and assigns and each of them.

I have read both pages of this Consent and Release of Liability Form, and by signing below, I certify that I understand its content, agree to its terms, and am at least eighteen (18) years of age.

MICHAEL JACK
Candidate's Name (Please Print)

Michael Jack
Candidate's Signature

ANDRE W. MERRANEY
Name of Witness (Please Print)

Andre W. Merraney
Signature of Witness

25-DEC-09
Date of Signatures

Personal information about the candidate that is obtained through the OACP Constable Selection System process is collected under the authority of section 43 of the Police Services Act. Questions concerning the collection, use or disclosure of this information or concerning the Release of Liability should be addressed to:

Police Constable Selection
APPLICANT SURVEY FORM
CONFIDENTIAL

PLEASE PRINT

First Name: MICHAEL 3rd, 6th & 9th digits of SIN #

<u>0</u>	<u>3</u>	<u>0</u>
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Last Name: JACK
Date: 25-DEC-09 **FOR OFFICE USE ONLY**
Assigned No. _____

It is necessary to continually collect data to evaluate the **OACP Constable Selection System** for fairness and effectiveness. This type of data collection is a normal part of Selection System development and evaluation. The information in this survey is being gathered in accordance with the Police Services Act, Section 3. **Completion of this form is voluntary, and all information provided will be kept confidential.**

The information you provide on this form will not be used to assess your suitability for the position of constable.

When you have completed this form, please **enclose it with your Applicant Registration Form** and return both forms to the assessing police service or to the OAC P-licensed assessment firm. Please remember to include your name in the space provided.

Please note: In order for our records to be complete, please insert your name and return this survey, *whether or not* you have chosen to complete it.

If you have inquiries about this survey, please contact the assessing police service or the OAC P-licensed assessment firm.

Please read each of the following questions carefully, and check the responses which apply to you. Mark answers with a check-mark. **In formation which may assist you in responding to this survey is contained on pages 3 and 4.**

- Please indicate your sex (tick box) and age (in years):**
 Male Female 37 Age
- Please indicate (tick box) the highest level of education you have achieved:**
 High school diploma (or equivalency)
 2-year college diploma
 3-year college diploma
 Bachelor's degree (e.g., B. A., B. Sc., B. Ed., B.S.W., etc.)
 Master's degree (e.g., M.A., M. Sc., M. Ed., M.S.W., etc.)
 Doctoral degree/ professional designation (Ph.D., Ed. D., M.D., P. Eng., LL.B., C.A., etc.)
- Did you complete Police Foundations Training?**
 Yes-Proceed to Question 4. No-Proceed to Question 5.
- At what institution did you take Police Foundations Training (tick box and specify name of institution)?**
 Community college Specify _____
 Private college Specify _____
 University Specify _____
 Other Specify _____

5. Which one of the following do you consider yourself to be:

- Aboriginal (e.g., a member of the Indian, Inuit or Metis people).
- White (e.g., Caucasian: British, French, East or Western European, Russian, Ukranian, Mediterranean).
- Racial Minority (Racial Minority status is based on race or skin colour, not place of birth or nationality; see below for a list of categories which belong to "Racial Minority").

6. If you consider yourself a member of a racial minority, indicate which one of the following best describes your race or colour, regardless of your place of birth:

- | | |
|---|---|
| <input type="checkbox"/> Black | <input type="checkbox"/> Chinese |
| <input type="checkbox"/> Filipino | <input type="checkbox"/> Japanese |
| <input type="checkbox"/> Korean | <input type="checkbox"/> Oceanic |
| <input type="checkbox"/> Other South East Asian | <input type="checkbox"/> South Asian (Indo Pakistan) |
| <input type="checkbox"/> Visible Minority Central or South American | <input type="checkbox"/> Visible Minority West Asian or North African |
| <input type="checkbox"/> Person of mixed race or colour (including at least one of the above) | |

7. Do you consider yourself to be a person with a disability?

"Person with a disability" means a person with a permanent physical mental or medical condition that limits the kind or amount of activities of daily living the person can do, and the kind or amount of work the person can do.

- Yes-Proceed to Question 8.
- No-Proceed to Question 9.

8. Do you feel that your disability will require some form of job accommodation?

- Yes
- No

If you have answered "yes" to the above, the assessing police service or OAC P-licensed assessment firm will assess your needs in consultation with you.

9. To assist with future recruitment activities please indicate how you heard about the constable opportunities:

- Newspaper (Please indicate which) _____
- Posting _____
- Recruiting Presentation (Specify location) _____
- Community Contact/Agency _____
- School/College/University Guidance _____
- Other (Specify)

FROM CHIEF OF YORK REGIONAL POLICE
ARMAND LA BARGE

10. What attracted you to apply?

I WAS INSPIRED AFTER SPEAKING WITH THE CHIEF

Consent and Release of Liability Form for Experienced Officers

MICHAEL JACK
Name (Please Print)

Please read the following form carefully.

The purpose of part A of this form is to authorize York Regional Police and other individuals and entities noted below to collect, to use and to disclose personal information about you for the purpose of assessing your abilities to be a police constable, as well as to determine suitability for employment with York Regional Police.

The purpose of part B of this form is to release any of the individuals or entities named on this form from liability that might arise as a result of the collection, use or disclosure of your personal information in accordance with part A.

A. CONSENT/ASSESSMENT

I hereby authorize York Regional Police to which I have submitted an application to be hired as a constable, to request, obtain and utilize personal information about me as described below from any and all of the following individuals or entities:

- The Ontario ministry of Transportation, which maintains driving records of Ontario residents.
- Any other police service or law enforcement agency, which may hold personal information about me.
- The Canadian Police Information Centre, which is owned by the RCMP, and which maintains a computerized system to provide law enforcement agencies with information on individuals with criminal records.
- Any health care practitioner (including doctors, nurses, psychologists and their agents) who has provided me with health care treatment, either part of this process or otherwise.
- Any previous employer who may hold personal information about me.
- Any consumer reporting agency, which maintains credit or other personal information about a consumer.
- Any educational institution in which I have been, or am currently, enrolled and which has information about me, including my grade or performance results.
- The Ontario Human Rights Commission

- The Ontario Human Rights Tribunal
- The Ontario Civilian Commission on Police Services (OCCPS)

I further acknowledge that any of the above-noted individuals or entities may disclose to the requesting police service to which I have submitted an application any or all of the following records, including any parts of the following records.

Academic records and transcripts

Financial information, including credit bureau check

Driving record

Employment records (Police Service or other) including without limitation complaints, allegations of misconduct and/or unsatisfactory work performance, performance evaluation/reviews, discipline, complaint and attendance information

Physical, psychological, visual, aptitude and other employment related tests, including but not limited to MMPI-2 questions, answers and scores, and interview notes, summaries, opinions, assessments and evaluations of psychologists

Police records and history of law involvement, including criminal and provincial reports and convictions, and intelligence information

Police Service applications

Training records

Background and security checks (including CPIC, NCIC, Interpol, etc.)

B. RELEASE OF LIABILITY

By signing this form, I agree that in consideration for applying to be a constable with York Regional Police, I hereby release and forever discharge all of the individuals, entities and classes of individuals and entities referred to on this form and their agents, licensees, employees and directors, officers from any and all actions, causes of action, claims, demands, and remedies, for any and all damages, losses, injuries and expenses of any nature or kind howsoever arising, which hereafter may be sustained by me in connection with the collection, use, and disclosure of information about me in accordance with the consents provided by me in this form, and from the use or reliance upon information about me obtained in accordance with these consents.

I further agree that this Release of Liability shall apply to and be binding on my heirs, administrators, executors, and assigns and each of them.

I have read both pages of the Consent of Release of Liability Form, and by signing below, I certify that I understand its content, agree to its terms, and am at least eighteen (18) years of age.

MICHAEL JACK

Candidate's Name (Please Print)

M Jack

Candidate's Signature

25-DEC-09

Dates of Signature

ANDRE M. MEANEY

Name of Witness (Please Print)

Andre M. Meaney

Signature of Witness

[Signature]