



**OTTAWA POLICE SERVICE**  
**SERVICE DE POLICE D'OTTAWA**  
*A Trusted Partner in Community Safety*  
*Un partenaire fiable de la sécurité communautaire*

## Request for Reconsideration of a Police Record Check

Please visit [ottawapolice.ca](http://ottawapolice.ca) or contact Background Clearance Section for more information at 613-236-1222 ext. 5485.

PERSONAL INFORMATION			
Last name:		First name:	
Middle name:		Other Names Used:	
Contact Telephone Number:		Gender	Date of Birth <small>yyyy/ mm/ dd</small>
Mailing address:	# and Street name	Apt #	City Prov Postal Code
CHECK LIST			
1. Have you attached a copy of your Police Record Check?		Yes	No
2. Have you attached any other supporting documentation: (a maximum of five pages)		Yes	No
COMMENTS			
FOR POLICE USE ONLY			
Action	Who	Date (yyyy/mm/dd)	
Request Approved			
Request Denied			
Decision Letter Sent			