



Faculty of Nursing

401 Sunset Avenue, Windsor,
Ontario, Canada N9B 3P4
T 519 519 253 3000 F 519 973 7084
www.uwindsor.ca/nursing

Police Records Check Request

Date: _____
Month Day Year

Police Records Department

As the authorized representative of the University of Windsor, Faculty of Nursing, I hereby request that, pursuant to Section 6.3 of the Criminal's Records Act, you conduct a Vulnerable Sector Police Check for:

Last Name First Name Middle Name

who will be involved in an unpaid clinical experience as a Nursing student during his/her Nursing program at the University of Windsor, Faculty of Nursing. These experiences will involve contact with children or vulnerable persons.

Anne Dennahower

Anne Dennahower, Programs and Support Secretary
Faculty of Nursing
University of Windsor
519-253-3000 ext. 2258

Applicant Signature