



WEST VANCOUVER POLICE DEPARTMENT

POLICE APPLICANT INTEGRITY & LIFESTYLE QUESTIONNAIRE

WVPD Minimum Requirement Criteria:

- 19+ years of age
- Physically fit
- Canadian Citizen or have Permanent Resident status
- Grade 12 diploma or equivalent
- Standard First Aid CPR Level C and AED
- A valid Class 5 driver's license with a good driving record
- Uncorrected vision that is 20/40 with both eyes open, with one eye no worse than 20/100
- Corrected vision that is 20/20 with both eyes open with one eye no worse than 20/40
- Normal Colour Vision

Check Box to Confirm

| | | | |
|-------------------------------------|--|----------------------------|--|
| SURNAME: | | GIVEN NAMES: | |
| DATE OF BIRTH: (YY-MM-DD) | | DATE OF SUBMISSION: | |
| INTERVIEWED BY: | | DATE & TIME: | |

Honesty, Integrity and Lifestyle are areas that are scrutinized closely in considering applications for employment and volunteer positions with the West Vancouver Police Department. Information supplied in this document will be considered in the context of the competition for employment for the position applied for and will be held in confidence under those circumstances.

This questionnaire pertains to your lifestyle and your integrity. It is expected that you will answer all of these questions accurately, completely, and honestly. Should you be considered to continue in the application process, your answers will be verified by a variety of means including a detailed background investigation and a polygraph examination.

PLEASE BE ADVISED THAT DECEIT, DISHONESTY OR NON-DISCLOSURE CONCERNING QUESTIONS IN THIS DOCUMENT, OR DURING ANY OTHER STAGE OF YOUR APPLICATION PROCESS, WILL RESULT IN DISQUALIFYING YOU FROM THIS AND ANY FUTURE COMPETITIONS, OR WILL RESULT IN DISMISSAL IF EMPLOYED.

The questionnaire must be completed and emailed along with your resume and cover letter to the West Vancouver Police Recruiting Section at recruiting@wvpd.ca.



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|----|---|--|--|
| 1 | What is your highest level of education? | | |
| | <input type="checkbox"/> High school diploma | <input type="checkbox"/> College/Technical Diploma | <input type="checkbox"/> Bachelors <input type="checkbox"/> Masters <input type="checkbox"/> Doctorate <input type="checkbox"/> Other, specify, |
| 2 | Indicate your residency status. <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Live with Parents <input type="checkbox"/> Other, specify, | | |
| 3 | Do you hold a valid standard First Aid Certificate and CPR Endorsement/AEP? If yes, please provide acquisition date, certificate name and expiry. | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | ACQUISITION DATE (YY-MM-DD) | CERTIFICATE NAME | EXPIRY DATE (YY-MM-DD) |
| | | | |
| 4 | Do you hold a valid Class 5 BC Driver's License? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5 | How many violation tickets have you received in the last 5 years? | | |
| 6 | Do you meet the minimum vision requirements listed on the WVPD Website? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7 | Please provide the date of your last eye exam. (NOTE: THE EXAM MUST BE DONE WITHIN THE LAST 6 MONTHS) | | |
| 8 | Have you ever had laser eye surgery or other similar procedures? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 9 | Have you ever used an illegal drug? If yes, provide the year last used an illegal drug. | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Year | | |
| 10 | Have you ever had your driver's license suspended or revoked? If yes, please provide date, location, and reason. | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | DATE (YY-MM-DD) | LOCATION | REASON |
| | | | |

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|----|--|----------|--|
| 11 | Have you ever been arrested, chartered or convicted of a criminal offence? If yes, please provide date, location, and offence. | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | DATE (YY-MM-DD) | LOCATION | OFFENCE |
| | | | |
| | | | |

| | | | |
|----|---|----------|--|
| 12 | Have you ever received a pardon for any offence? If yes, please provide date of pardon received and for what offence. | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | DATE (YY-MM-DD) | LOCATION | OFFENCE |
| | | | |
| | | | |

| | | |
|----|--|----------------|
| 13 | List all agencies applied, most recent first, and indicate the current status of your application. | |
| | NAME OF AGENCY | CURRENT STATUS |
| | | |
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Why do you want to work in West Vancouver?

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How did you hear about our Police Department?

If "Other" Please specify.

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