

DND Personal Data Verification	
Last Name:	E-mail Address:
Primary Phone Number:	Secondary Phone Number:

To ensure accuracy you must either fill this form electronically and print a hard copy, or print clearly in CAPITAL letters. All sections of this form must be completed.

It is the responsibility of the Department of National Defence (DND) to screen all potential applicants to determine their suitability and reliability. The Canadian Armed Forces or their agents may contact the references that you provide, as well as other individuals who may be suggested, to check on your background, personal and professional relationships, as well as your work ethic. The reference checks, conducted through phone calls, are a method of confirming that you can be expected to be reliable and trustworthy in the performance of your duties and in the protection of the assets and interests of the Department of National Defence and its personnel.

When completing this form make sure to include all the necessary information. The information obtained from your employers, references and educational institutions is an important part of the process. For your employment history, all your previous employer(s) will be contacted; you can advise us not to conduct a check of your employment background only if it pertains to your current employer(s).

Here is a checklist that can help you when you are completing the References section of the DND Personal Data Verification form:

- Contact your references first to ask for permission to use them and make sure they are aware that they may be contacted by either the Department of National Defence or their agents.
- Do not list any references you do NOT want called.
- Check the phone numbers for your references. Ensure they are valid and that your references can be easily reached. Ensure to request both a daytime and evening phone number, at which they can be contacted. Your references will be contacted shortly after your form is submitted.
- Selecting your References:

A valid reference is defined as an adult (18 years of age or older) that knows you well enough to provide a worthwhile, fair and adequate assessment about your personal character. Members of the family or relatives, family friends, friends, neighbours, co-workers or peers are **not** considered valid references. The references can be categorized as follows:

- a. Educational References: these persons are former or current teachers, professors, coaches, instructors, or trainers;
- b. Professional References: these persons are former or current supervisors, managers, overseers, advisors, or employers; and
- c. Personal References: these persons can be a minister, clergyman, mentor, counsellor, community leader, etc.

Your references, either individually or in combination, must have known you for at least the last five (5) continuous years (or to age 16, whichever comes first).

- Enclose a copy of educational diplomas and/or certificates for any education completed outside of Canada as some schools require this information for verification purposes.



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Biographical Information

The **Department of National Defence** or its agents will conduct background inquiries in connection with your application for employment with the **Department of National Defence**.

Personal Identification information:
The following information will be used for identification (ID) purposes allowing for accurate background and reliability checks. The **Department of National Defence** and their agents will hold all personal identification information confidential and will only release information to third parties as necessary for the completion of background checks and reliability status reports.

Surname (last name):		Full given names (no initials):		Name commonly used:	
All other names used (i.e., Nicknames):				Family name at birth:	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		Date of birth: (yyyy/mm/dd)	Place of birth (Country):		Place of birth (City):

Have you resided in Canada continuously during the past five (5) years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Address History

Provide address history for the past five (5) years, starting with the most current – do NOT leave gaps. (use additional paper if required)

	Apt #:	Street #:	Street name:	Civic number (if applicable):	From: (yyyy/mm)	To: Present
1	City:		Province / State:	Postal Code:	Country:	
2	Apt #:	Street #:	Street name:	Civic number (if applicable):	From: (yyyy/mm)	To: (yyyy/mm)
	City:		Province / State:	Postal Code:	Country:	
3	Apt #:	Street #:	Street name:	Civic number (if applicable):	From: (yyyy/mm)	To: (yyyy/mm)
	City:		Province / State:	Postal Code:	Country:	
4	Apt #:	Street #:	Street name:	Civic number (if applicable):	From: (yyyy/mm)	To: (yyyy/mm)
	City:		Province / State:	Postal Code:	Country:	

Academic History

Verification of your previous and/or current education will be made. List your educational history, starting with the highest level achieved.

	Diploma / Degree	Date last attended (yyyy/mm)	Institution
1			
2			
3			
4			
5			

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Employment History

Provide your employment history for the past five (5) years starting with the most current. Work history verifications will be made regarding your current and/or past employment. These verifications will include some or all of the following components relating to your employment experience: job description, dates of employment, position(s) held, subjective or objective opinions of job performance, reputation and character, reasons for departure for past employment and/or eligibility for rehire. **You can advise us not to conduct a check of your employment background only if it pertains to your current employer(s).** (use additional paper if required)

1	Name of company:		Name of contact:		Contact telephone #:
	Contact Email address:		Position you held:		If current employer, may we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable
	Start date: (yyyy/mm/dd)	End date: (yyyy/mm/dd)	Reason for leaving (if applicable):		
2	Name of company:		Name of contact:		Contact telephone #:
	Contact Email address:		Position you held:		If current employer, may we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable
	Start date: (yyyy/mm/dd)	End date: (yyyy/mm/dd)	Reason for leaving (if applicable):		
3	Name of company:		Name of contact:		Contact telephone #:
	Contact Email address:		Position you held:		If current employer, may we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable
	Start date: (yyyy/mm/dd)	End date: (yyyy/mm/dd)	Reason for leaving (if applicable):		
4	Name of company:		Name of contact:		Contact telephone #:
	Contact Email address:		Position you held:		If current employer, may we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable
	Start date: (yyyy/mm/dd)	End date: (yyyy/mm/dd)	Reason for leaving (if applicable):		
5	Name of company:		Name of contact:		Contact telephone #:
	Contact Email address:		Position you held:		If current employer, may we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable
	Start date: (yyyy/mm/dd)	End date: (yyyy/mm/dd)	Reason for leaving (if applicable):		

References

Provide the following information for four (4) valid references whom we can contact. Reference checks will be made and some or all of the following information will be confirmed: your honesty, reliability and maturity; your performance under stress; your ability to get along with supervisors and co-workers; your personal strengths and weaknesses. The references provided must be able to provide information covering the last five (5) years or to age 16 (whichever comes first).

1	Name of Reference:		Company / Institution:	Title / Position:	Daytime telephone #:	Evening telephone #:
	How long known?	Relationship to applicant:		Reference e-mail address:		
2	Name of Reference:		Company / Institution:	Title / Position:	Daytime telephone #:	Evening telephone #:
	How long known?	Relationship to applicant:		Reference e-mail address:		
3	Name of Reference:		Company / Institution:	Title / Position:	Daytime telephone #:	Evening telephone #:
	How long known?	Relationship to applicant:		Reference e-mail address:		
4	Name of Reference:		Company / Institution:	Title / Position:	Daytime telephone #:	Evening telephone #:
	How long known?	Relationship to applicant:		Reference e-mail address:		

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