



NATIONAL PARDON CENTRE

International Fingerprinting Services – RCMP Certifications from Abroad

Canadians and foreign nationals requiring RCMP fingerprint certifications while living abroad must submit a set of ink fingerprints to the National Pardon Centre for scanning and electronic certification.

Included below you will find the necessary documents required to complete your international fingerprinting certification through the RCMP. The cost of the service is listed on the order form.

Please note you do not need to use the RCMP C216 C fingerprinting form as long as your local police station or fingerprinting service provider uses standardized fingerprinting forms with the same layout as the included RCMP fingerprinting document.

You may either have your fingerprint results sent to your home address or a 3rd party address by the RCMP, or elect to have the National Pardon Centre receive and forward the results to your chosen location via registered mail. You must complete the attached Personal Information Biometric Release form if you wish to have your results returned to the National Pardon Centre or other 3rd party address.

Please ensure your completed International Fingerprinting Package includes:

- RCMP C216 C (or comparable) fingerprint form – the fingerprints MUST include 10 rolled impressions on top followed by flat impressions below.
- Personal Information Biometric Release form – MUST complete if results are to be received by National Pardon Centre or a 3rd party.
- Copy of photo identification.

Once complete please forward your package to the following address:

National Pardon Centre

Division: Fingerprinting ID
2 Carlton St. Suite 1503
Toronto, ON M5B 1J3

The National Pardon Centre is an RCMP accredited fingerprinting agency. We employ our own secure server connected directly to the Civil Fingerprinting Division in Ottawa for rapid fingerprint certifications.

If you have any questions, please contact a fingerprinting specialist at the National Pardon Centre. You can also visit our website:

<http://www.nationalpardon.org/international-fingerprinting-services/>

National Pardon Centre

Fingerprinting Division
1- 416.477.1110 x 250



NATIONAL PARDON CENTRE

INTERNATIONAL FINGERPRINTING ORDER FORM

Name: _____

Email: _____

Address: _____

Phone: _____

**Please note that your RCMP certification results will be mailed to either the address listed above or the 3rd party address listed on your Personal Release form by regular Canada Post unless indicated below.*

I require fingerprinting for the following reason (please select one):

- | | | |
|---|---|---|
| <input type="checkbox"/> Visa/Waiver/Foreign Work | <input type="checkbox"/> Pardon Application (Record Suspension) | <input type="checkbox"/> Privacy Act |
| <input type="checkbox"/> Canadian Citizenship | <input type="checkbox"/> Adoption | <input type="checkbox"/> Employment in Canada (specify employer/position) |
| <input type="checkbox"/> Immigration to Canada | <input type="checkbox"/> Volunteer | <input type="checkbox"/> Other (specify) |

I Require:

- Digitization and Certification of Ink Fingerprints: \$195
- National Pardon Centre receive results and forward by registered mail: \$75

Please make cheques payable to the National Pardon Centre

Credit Card # _____ Expiry Date _____ / _____

Security Code _____ (3 digit # on the back of Visa and MC, 4 digit # on the front of Amex)

Signature _____ Name on card _____

We accept: Visa, American Express, Mastercard, cheque and money order. PLEASE DO NOT SEND CASH!





NATIONAL PARDON CENTRE

Consent to Release Personal Information

I, _____ born (yyyy/mm/dd), _____ require criminal record verification in order to obtain a: _____. I hereby authorize the Royal Canadian Mounted Police central repository of criminal records to release my Criminal Record Search Results to the following party (Please check one):

National Pardon Centre Toronto

Other 3rd Party

NPC Forward results to:

Name of individual/agency: _____

Home Address

Other: _____

Address: _____

I understand that I have the right to receive these results directly from the RCMP and that the assistance of a 3rd party is not necessary to obtain these results.

I have read and signed the Informed Consent document and understand my rights with regards to obtaining criminal record information.

Please provide a single flat impression of your Right thumb in the space provided. If you are unable to obtain an acceptable print from your right thumb simply choose another finger and indicate which one in the appropriate column.

	X	R Thumb
		L Thumb
		R Index
		L Index
		R Middle
		L Middle
		R Ring
		L Ring
		R Little
		L Little

Applicant Signature: _____

Date (yyyy/mm/dd): _____

The National Pardon Centre is a direct connect client of the RCMP. We employ our own server connected to RCMP Civil Fingerprinting Division for certifications ensuring maximum privacy.

TO - À The Director General Canadian Criminal Real Time Identification Services RCMP, NPS Building 1200 Vanier Parkway Ottawa, Ontario K1A 0R2 Directeur General Services canadiens d'identification criminelle en temps reel Quartier General de la GRC, immeuble des SNP 1200, promenade Vanier Ottawa (ont) K1A 0R2	FOR IDENTIFICATION PURPOSES ONLY - AUX FINS DE L'IDENTIFICATION SEULEMENT		
	TCN - NCT	AFIS - SAID Year of Birth Date de naissance	BAR CODE- BARRE-CODE

R I G H T H O I N D E	Thumb - Pouce	Index	Middle - Médius	Ring - Annulaire	Little - Auriculaire

L E F T H A U C H E					

IF ANY FINGERPRINT IS NOT RECORDED, GIVE REASON - IF AMPUTATED, DEFORMED OR INJURED, GIVE DATE
 S'IL MANQUE UNE EMPREINTE, DIRE POURQUOI - EN CAS D'AMPUTATION, DE DÉFORMATION OU DE BLESSURE, DONNER LA DATE
 FOUR FINGERS TAKEN TOGETHER - IMPRESSION SIMULTANÉE DES QUATRE DOIGTS

LEFT THUMB - POUCE GAUCHE	RIGHT THUMB - POUCE DROIT
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Signature of person fingerprinted - Signature de la personne dactyloscopiée	Signature of Official taking fingerprints - Signature du préposé aux empreintes	Date Y-A M D-J
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Surname (include former names, maiden name, etc.) - Nom de famille (y compris noms utilisés précédemment, nom de jeune fille, etc.)

Given Names - Prénoms	DOB - DDN Y-A M D-J	Sex - Sexe <input type="checkbox"/> M <input type="checkbox"/> F	Telephone No. - N° de téléphone
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Address - Adresse	Postal code - Code postal
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Reason for application (MUST BE COMPLETED) - Raison de la demande (DOIT ÊTRE REMPLI)		<input type="checkbox"/> Vulnerable Sector (attach consent Form) Secteur sensible (joindre la formule de consentement)
<input type="checkbox"/> Visa/Waiver Visa/désistement	<input type="checkbox"/> Pardon Application Demande de réhabilitation	
<input type="checkbox"/> Canadian Citizenship Citoyenneté canadienne Immigration to Canada (LIS)	<input type="checkbox"/> Adoption	Reference Number - Numéro de référence
<input type="checkbox"/> Immigration au Canada (SIR)	<input type="checkbox"/> Volunteer Bénévolat	
<input type="checkbox"/> Privacy Act Loi sur la protection des renseignements personnels	<input type="checkbox"/> Employment (specify) Emploi (préciser) _____	
<input type="checkbox"/> Other (specify) Autre (préciser) _____		

Fingerprinting Agency/Department Service ou organisme prenant les empreintes	Contributing Agency/Department Service ou organisme contributeur
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