



**VOLUNTEER GUIDELINES CHECK SHEET**  
Attach Check Sheet to Security Clearance Referral Form

**Form completed by:** \_\_\_\_\_ (print name)

**Position:** \_\_\_\_\_

Points to Remember:

Has **each line** on the Security Clearance Referral Form been **completed**?

(ie: if line is blank, ask the question: Is this your MAIDEN NAME?

Have you ever gone by any other names?

If the answers are no, ensure n/a or does not apply is recorded on the line.

**Does the applicant have a Regina Address?** *(If no, the form will not be processed.)*

**Was the consent signed in my presence?** *(If not, have applicant sign form again in your presence.)*

**List the identification** that was produced and/or photocopied and attach to the Security Clearance Referral Form. *If the identification is not listed as verified, form will not be processed.*

1. \_\_\_\_\_

2. \_\_\_\_\_

**Signature:** \_\_\_\_\_