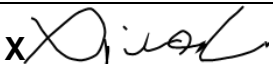


Consent for Disclosure of Personal Information for Background Checks

Personal Identification information:

I understand that the following information is for identification (ID) purposes only, allowing BackCheck to accurately proceed with the assembly of background check reports. I consent to the provision of the following personal information to BackCheck for the purposes of completing background check reports on behalf of The Great-West Life Assurance Company (The Company). I understand that BackCheck will hold all personal identification information confidential and will only release information to third parties as necessary for the completion of background check reports.

I certify that to the best of my knowledge, the information I have provided on all BackCheck consent forms is complete and accurate in every respect. I understand that a false statement or omission of facts therein may disqualify me from contracting or result in my subsequent dismissal for cause if I am contracted.

Given Name(s): ▼ Xiwen				Middle Name(s): ▼			
Surname: ▼ Li			Maiden Name: ▼			Gender: ▼ <i>Check One</i> <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	
Given Name Alias: ▼ Hailey		Middle Name Alias: ▼		Surname Alias: ▼ Li			
Current Address: ▼ 2911, 57, St. Joseph Street				From: ▼ 2017-12		To: ▼	
Unit Number		Street Number		Street Name		yyyy mm yyyy mm	
Current Address Continued: ▼ Toronto Ontario Canada M5S 0C5							
City		Province		Country		Postal Code	
Previous Address – if less than 5 years ago: ▼ 1106, 256, Phillip Street				From: ▼ 2017-9		To: ▼ 2017-12	
Unit Number		Street Number		Street Name		yyyy mm yyyy mm	
Previous Address – Continued: ▼ Waterloo Ontario Canada N2L 3W8							
City		Province		Country		Postal Code	
Telephone Number: ▼ 519 729 8239		Alternative Telephone Number: ▼		Email Address: ▼ hailey.li@gwl.ca		Position Applied For: ▼ CO-OP STUDENT	
Candidate Signature: 						Date: (dd/mm/yyyy) ▼ 31/01/2018	

Consent for Disclosure of Personal Information
Enhanced Police Information Check

To ensure accuracy, you must PRINT in clear CAPITAL letters and complete this form in its entirety.

PLEASE NOTE: The following information and photocopies of identification are for identification purposes only, allowing Sterling to accurately proceed with the assembly of an Enhanced Police Information Check. Sterling will hold all personal information confidential.

Given Name(s): ▼ <div style="text-align: center;">Xiwen</div>		Middle Name(s): ▼	
Surname: ▼ <div style="text-align: center;">Li</div>		Maiden name: ▼	
Given Name Alias: ▼ <div style="text-align: center;">Hailey</div>	Middle Name Alias: ▼		Surname Alias: ▼ <div style="text-align: center;">Li</div>
Place of Birth: ▼ <div style="text-align: center;">China</div>		Date of Birth: ▼ <div style="text-align: center;">1996-10-2</div>	
<div style="text-align: center;">Province Country</div>		<div style="text-align: center;">yyyy mm dd</div>	
Current Address: ▼ <div style="text-align: center;">2911, 57, St. Joseph Street</div>		From: ▼ <div style="text-align: center;">2017-12</div>	To: ▼
<div style="text-align: center;">Unit Number Street Number Street Name</div>		<div style="text-align: center;">yyyy mm dd</div>	<div style="text-align: center;">yyyy mm dd</div>
Current Address Continued: ▼ <div style="text-align: center;">Toronto Ontario Canada M5S 0C5</div>			
<div style="text-align: center;">City Province Country Postal Code</div>			
Previous Address – if less than 5 years ago: ▼ <div style="text-align: center;">1106, 256, Phillip Street</div>		From: ▼ <div style="text-align: center;">2017-9</div>	To: ▼ <div style="text-align: center;">2017-12</div>
<div style="text-align: center;">Unit Number Street Number Street Name</div>		<div style="text-align: center;">yyyy mm dd</div>	<div style="text-align: center;">yyyy mm dd</div>
Previous Address – Continued: ▼ <div style="text-align: center;">Waterloo Ontario Canada N2L 3W8</div>			
<div style="text-align: center;">City Province Country Postal Code</div>			
Telephone Number: ▼ <div style="text-align: center;">519 729 8239</div>		Alternative Telephone Number: ▼	Position Applied For: ▼ <div style="text-align: center;">CO-OP STUDENT</div>

I certify that the information in this Disclosure for Personal Information is true and correct to the best of my ability.

Declaration of Offences	Have you been convicted of an offence for which a pardon/record suspension has not been granted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	If you have answered Yes to the question above, please provide details on those criminal convictions (attach additional pages if required):			
	Offence	Date (yyyy/mm)	Location	Penalty

Statement of Understanding and Consent	<p>If a Canadian Criminal Record Check is requested by the Company, a search of the Royal Canadian Mounted Police (RCMP) National Repository of Criminal Records will be conducted by a Canadian police service on our behalf through the Identification Data Bank of the Canadian Police Information Centre (CPIC) using your name(s), date of birth and declared criminal record. The result will indicate whether a criminal record exists that may match your personal information, and whether your declared criminal record is a complete and accurate match to the record on file. In some cases, the search may be inconclusive. We will not receive details of your criminal record other than those you provide. Only the submission of your fingerprints to the RCMP can result in the release of a Certified Criminal Record and resolve inconclusive or disputed results. For more information, please contact one of our Privacy Analysts using the contact information above.</p> <p>If a Local Police Information search is requested by the Company, a search will be conducted by a Canadian police service on our behalf through the Investigative and Intelligence Data Banks of CPIC, the Police Information Portal (PIP) and other local and provincial police databases using your name(s) and date of birth. The result will indicate whether information exists in local police databases that may match your personal information. We will not receive details of local police information. Only a Police Information Check (or similar) through the local police where you live can result in the release of local police information.</p>	
	<div style="display: flex; justify-content: space-between;"> <div> Candidate Signature: <small>Authorizing Enhanced Police Information Check</small> </div> <div> Date: (yyyy/mm/dd) ▼ <div style="text-align: center;">31/01/2018</div> </div> </div>	
	<div style="border: 1px solid black; padding: 5px; font-weight: bold;">Consent Provided online via Sterling eConsent</div>	

Consent for Disclosure of Personal Information
Education Verification

Given Name(s): ▼ Xiwen		Middle Name(s): ▼		Surname: ▼ Li	
Maiden Name: ▼	Given Name Alias: ▼ Hailey	Middle Name Alias: ▼	Surname Alias: ▼ Li	Date of Birth: (yy/mm/dd) ▼ 1996-10-2	

I authorize Sterling Talent Solutions to collect the details of my educational history from educational institutions that I have attended and the Ministry of Education of any province where I have attended an educational institution, or their agents, and disclose them to the Company.

Secondary School Attended

School Name: ▼ Ontario International College		Telephone Number: ▼ 4167391888		Completed: ▼ Check One <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Location: ▼ Scarborough Ontario Canada		Starting Date: ▼ 2014-7		Ending Date: ▼ 2015-4	
<small>City</small>	<small>Province/State</small>	<small>Country</small>	<small>Year</small>	<small>Month</small>	<small>Year</small> <small>Month</small>

Cegep or vocational studies (For Quebec only)

School Name: ▼		Telephone Number: ▼		Completed: ▼ Check One <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location: ▼		Starting Date: ▼		Ending Date: ▼	
<small>City</small>	<small>Province/State</small>	<small>Country</small>	<small>Year</small>	<small>Month</small>	<small>Year</small> <small>Month</small>
Level Completed: ▼ <input type="checkbox"/> DEC <input type="checkbox"/> AEC <input type="checkbox"/> ASP <input type="checkbox"/> DEP <input type="checkbox"/> AENS		Program: ▼		Student Number: ▼	

Post Secondary School(s) Attended

School Name: ▼ University of Waterloo		Telephone Number: ▼ 5198884567		Completed: ▼ Check One <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Location: ▼ Waterloo Ontario Canada		Starting Date: ▼ 2015-9		Ending Date: ▼ 2018-1 (Present)	
<small>City</small>	<small>Province/State</small>	<small>Country</small>	<small>Year</small>	<small>Month</small>	<small>Year</small> <small>Month</small>
Level Completed: ▼ <input type="checkbox"/> Certificate <input type="checkbox"/> Diploma <input checked="" type="checkbox"/> Degree		Program: ▼ Bachelor of Computational Math, Bachelor of Statistics		Student Number: ▼ 20601629	

School Name: ▼		Telephone Number: ▼		Completed: ▼ Check One <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location: ▼		Starting Date: ▼		Ending Date: ▼	
<small>City</small>	<small>Province/State</small>	<small>Country</small>	<small>Year</small>	<small>Month</small>	<small>Year</small> <small>Month</small>
Level Completed: ▼ <input type="checkbox"/> Certificate <input type="checkbox"/> Diploma <input type="checkbox"/> Degree		Program: ▼		Student Number: ▼	

School Name: ▼		Telephone Number: ▼		Completed: ▼ Check One <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location: ▼		Starting Date: ▼		Ending Date: ▼	
<small>City</small>	<small>Province/State</small>	<small>Country</small>	<small>Year</small>	<small>Month</small>	<small>Year</small> <small>Month</small>
Level Completed: ▼ <input type="checkbox"/> Certificate <input type="checkbox"/> Diploma <input type="checkbox"/> Degree		Program: ▼		Student Number: ▼	

Candidate Signature:



Date: (yyyy/mm/dd) ▼

31/01/2018

Consent for Disclosure of Personal Information
Public Safety Verification

I authorize Sterling Talent Solutions to collect police and court records about me and my inclusion on watch or sanctions lists from police, courts, government agencies and other publicly available sources, and disclose this information to the Company.

Given Name(s): Xiwen	Middle Name(s):	Surname: Li
Maiden Name:	Aliases, nicknames and any other names: Hailey Li	Date of Birth: 1996-10-2
		Year Month Day

Candidate Signature: x 	Date: (yyyy/mm/dd) 31/01/2018
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