



VELA

CRIMINAL RECORD CHECK EMPLOYER ENROLLMENT INFORMATION

For Microboards and Individualized Funding Agents

About Criminal Record Checks:

The Criminal Records Review Act (CRRRA) mandates specific employers in BC to ensure that staff working with children and/or vulnerable adults complete a criminal record check (CRC) through the Criminal Records Review Program (CRRP). Employer, as defined in the CRRRA, includes any organization that is provincially funded (50%+), licensed, or contracted.

CRCs for employees and contractors of Microboards and IF Agents must be done online or manually via your registered employer account with the CRRP and **not** through your local police department. The only checks that can be done at your local police detachment are *Police Information Checks with Vulnerable Sector Screening (PIC-VS Check)* for any adult (18 years of age or older), other than the primary caregiver or other CLBC eligible individuals, that live in the home where home sharing or respite services are being provided.

There is a \$28 fee to complete a CRC for employees via the CRRP, for volunteers there is no charge. It is up to the Microboard or IF Agent to decide if they will cover the cost of the CRC from their CLBC funding. If the applicant is cleared to work and you have decided to pay the CRC fee, you can reimburse the applicant afterwards. An independent contractor, like a respite care provider or home share provider, must pay for their own CRC.

If the employee(s) also work part-time for other agencies, they likely would have been required to have a CRC done. Current CRC's can be shared amongst employers if they meet certain conditions, and if the employer is registered with the CRRP and enrolls in the Applicant-Based Online Service described below.

NOTE: Decide who will pay for the following:

- the CRC;
- updates to the CRC every 5 years;
- fingerprinting, should it be necessary; and
- repeat requests for a new CRC due to new charges or convictions.

Record your decision. It is recommended that you include this information in your Policy and Procedure Manual and in your Staff Orientation Sheet. Ask your Vela Facilitator if you have not received a sample of these documents.

Enrollment in the Criminal Record Review Program (CRRP):

The first step in the criminal record check process is for each Microboard or IF Agent to register with the CRRP as an employer.

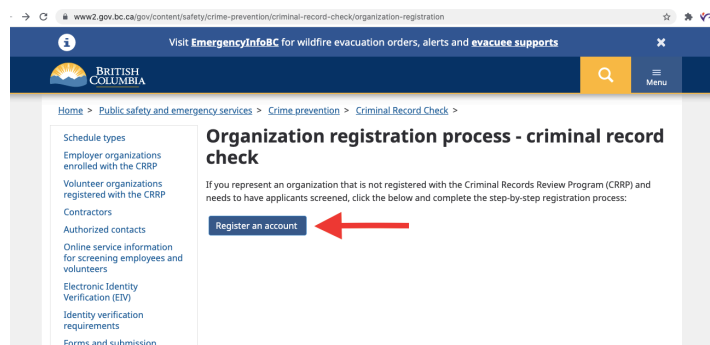
In order to do this process online you will need:

- To be able to download, fill, and save PDF forms from the CRRP website
- To know how to put an electronic signature on each form; or have the ability to print, sign, and scan the form back to your computer
- To be able to upload the saved forms from your computer into the online registration process
- To have an electronic copy of your CLBC contract and/or confirmation of funding letter from CLBC (you can ask your analyst to produce this letter) ready to go before you start the process
- Scanned copies of two pieces of your I.D., and a passport quality photo (if you have to complete the CRR015 form only – for authorized contacts that will NOT be working directly with children and/or vulnerable adults)

NOTE: If you do not have computer or internet access, or the above-mentioned capabilities, you can request a manual package from the CRRP by phone (Toll Free: 1-855-587-0185 press option 2) or email criminalrecords@gov.bc.ca. This package can be filled in by hand and either mailed back to the CRRP, or scanned and emailed as a package, along with any supporting documentation. For information on how to fill the forms – please see Steps 4 (Employer Enrollment Questionnaire), 5 (Employer Enrollment Form), & 7 (Authorized Contact Form) below.

1. The step-by-step application process can be found at the following URL by clicking the “Register an account” button:

<https://www2.gov.bc.ca/gov/content/safety/crime-prevention/criminal-record-check/organization-registration>



2. After starting the process, the first screen will let you choose whether you are opening a volunteer or employee account. You will have to do the process twice if you require both types. If you are hiring any paid staff (employees or contractors) you will choose “employee account”:

The Criminal Records Review Act ensures people who work with or may have potential for unsupervised access to children or vulnerable adults undergo a criminal record check by the Criminal Records Review Program (CRRP).

If you represent an organization that is not registered with the CRRP and needs to have applicants screened, click the appropriate option below and complete the step-by-step registration process.

Please note, two separate applications will need to be submitted if you require both a volunteer and employer account.

*Internet Explorer will no longer be supported, please use a different browser such as Chrome, Edge or Safari to access this form.

If you already have an account and are looking to update your account information, including your Authorized Contacts, or are looking to register with the eCRC please click [here](#)

Please ensure to save your PDFs before uploading, if you are using the fill and print option, to ensure we receive the forms properly.

What type of account are you registering for? *

Volunteer Account

Employee Account



Please select which account type you are applying to.

Next

3. Decide who the Authorized Contact(s) will be – this will either be 1-2 directors from your Microboard, or yourself if you are an IF Agent. (The PSSG recommends having two Authorized Contacts per account if possible, so that if your primary contact is unavailable there is someone else who can request information from the CRRP in their place.) Enter the first Authorized Contact’s email, as well as the organization name:

Enrollment

Criminal Records Review Program (CRRP) – Organization Registration & Enrollment

Step 2 of 9 - Email and Org Name

11%

Email and Org name

Contact Email *

In case we need to contact you

Organization Name *

Microboard or IF Agent's Name

Previous Next

*Required Field

Questions?

The Criminal Record Review Program staff are available Monday to Friday from 8:30 a.m. – 4:30 p.m.

Phone: Toll free – 1 855 587-0185 (Option 2)

Email: criminalrecords@gov.bc.ca

4. Download, complete, sign, and save the Employer Enrollment Questionnaire. (See next page for instructions to fill this form.) Upload the completed form where it says “select files” along with a copy of your CLBC contract of letter from CLBC that confirms funding.

Step 3 of 9 - Jurisdiction Questionnaire Form

22%

Employer Enrollment Questionnaire

[The Criminal Records Review Act](#) (CRRA) mandates specific employers in BC to ensure that staff working with children and/or vulnerable adults complete a criminal record check through the CRRP.

Employer, as defined in the CRRA, includes any organization that is provincially funded (50%+), licensed, or contracted.

Common organizations that are required to have criminal record checks done through the CRRP are:

- Licensed childcare facilities
- Registered assisted living facilities
- School districts
- Post secondary institutions
- Provincially funded organizations

Click the link below to download the Employer Questionnaire. Use the space provided to upload your completed form. Ensure to include any supporting documents required with your application.

[Download the Employer Questionnaire](#)

Download, complete, and save

Please upload your filled out questionnaire and supporting documents. Files must be in PDF/PNG/TIFF/JPG format.

Questionnaire and Supporting Documents *

Upload saved Questionnaire and a copy of your contract/CLBC letter here

Drop files here or

Select files

To fill out the employer enrollment questionnaire:



**CRIMINAL RECORDS REVIEW PROGRAM (CRRP)
EMPLOYER ENROLLMENT QUESTIONNAIRE**

Please answer the following pre-registration questions.

ACCESS TO CHILDREN AND/OR VULNERABLE ADULTS	
Employees, contractors, or students must be working with or must have potential unsupervised access to children and/or vulnerable adults. Please confirm that your employees, contractors, or students (select one):	
<input type="checkbox"/> work with children	Choose the relevant option
<input checked="" type="checkbox"/> work with vulnerable adults	
<input type="checkbox"/> work with children and vulnerable adults	
In what capacity will your employees, contractors, or students have access to children and/or vulnerable adults?	
Direct support staff for person with developmental disabilities	
DEFINITION WITHIN THE CRIMINAL RECORDS REVIEW ACT (CRR):	
To become enrolled with the CRRP, your organization must fall within the definition of "employer" as per the CRR. Please select the definition applicable to your organization.	
<input type="checkbox"/> the government;	Choose the box shown (as selected to the left) for definition, and don't forget to fill in the percentage of your funding that comes from the government (typically 100%).
<input type="checkbox"/> an agency of the government;	
<input type="checkbox"/> a board as defined in the School Act;	
<input type="checkbox"/> a francophone education authority as defined in the School Act;	
<input type="checkbox"/> a public body as defined in the Health Authorities Act or a regional health board established under that Act that operates or provides funding to: a hospital as defined by section 1 of the Hospital Act, a Provincial mental health facility, a psychiatric unit or a society as defined by section 1 of the Mental Health Act or a mental health clinic or mental health service established by regulations, a facility or service related to medical or health care, or a private hospital as defined in section 5 of the Hospital Act;	
<input type="checkbox"/> a board, commission, council or other body of persons, whether or not incorporated, all the members of which or all the members of the board of management or board of directors of which are appointed by an Act, an order of the Lieutenant Governor in Council or a minister of the government;	
<input type="checkbox"/> a corporation more than 50% of the shares or ownership of which is directly or indirectly vested in the government;	
<input checked="" type="checkbox"/> an individual or corporation that receives operating funds from the government, other than a board as defined in the School Act or a public body as defined in the Health Authorities Act; * If you have indicated that your organization meets the above definition, what percentage of operating funds is received for core programs and staff? 100	
<input type="checkbox"/> an authority as defined in the Independent School Act;	
<input type="checkbox"/> the employer of staff at a community care facility, as defined in the Community Care and Assisted Living Act that is exempted under section 34 (5) (d) of that Act;	
<input type="checkbox"/> the holder of a licence issued under the Community Care and Assisted Living Act;	
<input type="checkbox"/> a member as defined in section 1 of the Community Care and Assisted Living Act; or	
<input type="checkbox"/> a registered member who employs one or more individuals to assist the registered member in carrying on his or her profession	
<input checked="" type="checkbox"/> I have provided supporting documents (license agreement, contract, funding arrangement, etc.) to assist in determining eligibility for an account with the Criminal Records Review Program	

Choose whether your staff work with children (under 19), vulnerable adults (19 or older), or both.

Write something here that demonstrates how your staff have direct, unsupervised access supporting the vulnerable person.

Choose the box shown (as selected to the left) for definition, and don't forget to fill in the percentage of your funding that comes from the government (typically 100%).

Tick this box, and then sign and date the form.

Caitlin Goodsell _____ 2021/09/21
Name Signature (on behalf of organization) Date Signed YYYY/MM/DD

Website: <http://www2.gov.bc.ca/gov/content/safety/crime-prevention/criminal-record-check> Ministry of Public Safety and Solicitor General
Phone: 1-855-567-2165 (Option 2) Page 1 of 1 Criminal Records Review Program
Policing and Security Programs Branch
Security Programs Division

5. Download, complete, and save the Employer Enrollment Form. (See next page for instructions to fill this form). Upload the completed form by selecting the “select files” button:

Criminal Records Review Program (CRRP) – Organization Registration and Enrollment

Criminal Records Review Program (CRRP) – Organization Registration & Enrollment

Step 4 of 9 - Registration and Enrollment Form



Click the link below to download the Employer Enrollment Form. Use the space provided to upload your completed form.

[Download the Employer Enrollment Form](#)

Download, complete, and save ←

Enrollment Form Upload *

Please upload completed enrollment form

Drop files here or

[Select files](#)

Upload saved form here ←

Maximum number of files reached

⊗ employer_organization_enrollment_form.pdf


It should look like this once you have correctly uploaded your attachment

Previous

Next

To complete the Employer Enrollment Form:

(Green Arrows are only relevant if you choose to add a secondary contact)

 **Ministry of Public Safety and Solicitor General**

EMPLOYER ORGANIZATION ENROLLMENT FORM

Please confirm that the below documentation is attached with the submission. Do not attach documentation for a Secondary Contact if you do not require one.

Primary Authorized Contact	Secondary Contact (if necessary)
<input checked="" type="checkbox"/> Applicable Authorized Contact Consent Form	<input type="checkbox"/> Applicable Authorized Contact Consent Form
<input checked="" type="checkbox"/> Copy of Two Pieces of I.D.	<input type="checkbox"/> Copy of Two Pieces of I.D.
<input checked="" type="checkbox"/> Passport quality photo is attached	<input type="checkbox"/> Passport quality photo is attached

ORGANIZATION INFORMATION

Organization Name: Microboard or IF Agent's Name

General Email: Phone:

Email for CRC Results to be sent to: can be the same as above

Mailing Address:

City: Province: Country: Postal Code:

Physical Address (if different from above):

City: Province: Country: Postal Code:

AUTHORIZED CONTACT

Authorized Primary Contact Name: Microboard Director or IF Agent's Name

Title:

AUTHORIZED SECONDARY CONTACT

Authorized Secondary Contact Name:

Title:

ENROL IN THE CRRP ONLINE SERVICE

Yes, please enrol our organization for the CRRP online service (recommended option for a quicker turn-around to process a criminal record check or sharing request).

No, we do not enrol our organization into the CRRP online service at this time (forms must be submitted manually).

Works With (select one):

Select the default category of Criminal Record Check to be performed for your organization.

Children or Vulnerable Adults or Children and Vulnerable Adults

On behalf of the above noted organization, I hereby certify that I agree to the terms and conditions for utilizing the CRRP to facilitate criminal record checks on our employees, contractors, or students (working with children and/or vulnerable adults), including the attached terms and conditions for enrolment in the CRRP online service, as applicable.

Caitlin Goodsell
Name

Caitlin Goodsell
Signature (on behalf of organization)

2021/09/21
Date Signed yyyy/mm/dd

Website: <http://www2.gov.bc.ca/gov/content/safety/crime-prevention/criminal-record-check>
Phone: 1-855-587-0185 (Option 2)

Ministry of Public Safety and Solicitor General
Criminal Records Review Program
Policing and Security Programs Branch
Security Programs Division

CRR019 REV 01/JUNE/2019 Page 1 of 2

You will need to input your Microboard or IF Agent's information in the "organization information" section. You will also need the name and title for your authorized contact(s) – the title will either be the Microboard Director's position (ex. President) on the board, or "Individualized Funding Agent".

In this section of the form, click "yes" and tick the box for who your staff will work with

Finally: sign, date, and save the form for uploading.

6. Choose the best option for your Authorized Contact:

Criminal Records Review Program (CRRP) – Organization Registration & Enrollment

Step 5 of 9 - Authorized Contact Selection

44%

A primary Authorized Contact is responsible for facilitating the criminal record check process for their organization.

To ensure the suitability of an Authorized Contact, the CRRP will conduct a criminal record check on the proposed Authorized Contact. Additionally, a secondary Authorized Contact may be requested

An Authorized Contact cannot sign their Consent to a Criminal Record Check Cover Page. Please have a senior member of your organization verify your ID and sign your consent form Cover Page

Review the options below and chose the ONE option that is applicable to you:

Please note: These forms are only for account registration and update purposes.

Authorized Contact *

Choose one

I am an Authorized Contact and will be working with children and/or vulnerable adults

I am an Authorized Contact and will NOT be working with children and/or vulnerable adults

I am an Authorized Contact and have already completed a criminal record check with the CRRP in the last 5 years. Note: if you choose the following option, you must ensure that the works with category you have been cleared for in the past (either children, vulnerable adults, or both) matches the works with category at your current organization

Previous Next

7. Download, complete, and save the Authorized Contact form. (This form will be different depending on which option you chose on the previous screen – the system will give you the correct form based on your selection on the previous step.) You will then upload the completed form where it says “select files.”

Criminal Records Review Program (CRRP) – Organization Registration and Enrollment

Criminal Records Review Program (CRRP) – Organization Registration & Enrollment

Step 6 of 7 - Authorized Contact Forms

71%

I am an Authorized Contact and will be working with children and/or vulnerable adults.

[Download the Authorized Contact Form \(CRR010\)](#)

Download, complete, and save

Authorized Contact - Consent Form *

Upload saved contact form

Drop files here or

Select files

Accepted file types: pdf, Max. file size: 16 MB.

Previous Next

Notes:

You can find which form you are using (CRR010, CRR015, or CRR028) on the screen ← here in the grey box.

For the CRR010 form the Schedule Type (top of page 2) is “A.”

For the CRR015 form, you will also need to upload copies of your I.D. and a passport quality photo.

8. Decide if a secondary Authorized Contact is required. If so, click yes and repeat steps 6 and 7 for the second contact. If not, select no and submit your application.

Criminal Records Review Program (CRRP) – Organization Registration & Enrollment

Step 7 of 9 - Secondary Contact Option

66%

Do you require a secondary Authorized Contact?

Registering another contact? *

Yes

No

Selecting No will submit your application

Previous Next

*Required Field

Questions?

The Criminal Record Review Program staff are available Monday to Friday from 8:30 a.m. – 4:30 p.m.

Phone: Toll free – 1 855 587-0185 (Option 2)

Email: criminalrecords@gov.bc.ca

9. After sending in your registration, the CRRP will confirm your enrolment in writing and then you will be able to move on to submission of CRCs.

Criminal Records Review Program (CRRP) – Organization Registration and Enrollment

Completed

100%

Thank you for your submission.

The registration and enrollment department will contact you if further information is required.

Please note any future correspondence will be sent by email to the address provided on your application.

For more information on the CRRP, please [visit our website](#).

*Required Field

Questions?

The Criminal Record Review Program staff are available Monday to Friday from 8:30 a.m. – 4:30 p.m.

Phone: Toll free – 1 855 587-0185 (Option 2)

Email: criminalrecords@gov.bc.ca