

2025 - 2026

CONTRACTOR/SERVICE PROVIDER AOD

Purpose of Request: This form is to be used for the purpose of compliance with the provisions of Ontario Regulation 521/01 under the Education Act.

Surname	Given Name		Middle Name(s)
Date of Birth		Company Name	•
Year Mo	onth Day		
Address 9. Bloom Number («Cathida describe»)			
Address & Phone Number (of individual making declaration)			
I DECLARE, since the last Criminal Background Check and Vulnerable Sector screen OR Annual Offence Declaration collected by the Toronto District School Board, that:			
☐ I have no convictions under the <i>Criminal Code of Canada</i> , up to and including the date of this declaration, for which a pardon has not been issued or granted under the <i>Criminal Records Act (Canada)</i> .			
OR			
☐ I have been convicted of the following criminal offences under the Criminal Code of Canada for which a pardon under the Criminal Records Act (Canada) has not been issued or granted:			
Conviction	Date		Court Location
			
Please note: Consequences of a conviction and/or for failing to list a criminal conviction may result in disciplinary action up to and including dismissal			
I CERTIFY that all information given in this Declaration is true, correct and complete to the best of my knowledge.			
DATED at Toronto, this day of	, 20	Signature	
		Signature	

Please complete the AOD and
E-mail the AOD to PoliceReferenceCheckOffice@tdsb.on.ca or mail to
Toronto District School Board, Police Reference Check Office
17 Fairmeadow Ave., Room 107
Toronto, Ontario M2P 1W6

Information collected in this declaration is collected under the authority of S.170 of the *Education Act* in accordance with the *Municipal Freedom of Information and Protection of Privacy Act (MFFI PPA)*.