



BC Public Service

Security Screening Questionnaire

Sample



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Section 1 – Applicant Information and Instructions

Applicant Information (to be completed by applicant)		
Surname		Given Names
Home Tel. No.(inc area code)	Cell Tel. No. (inc area code)	Work Tel. No. (inc area code)
E-mail:		Birthdate (YYYY-MM-DD)
Current Address (Apt. or Street No. Street Name City Province Postal Code Country):		

Completion Instructions
<p>This questionnaire pertains to your honesty, integrity, and lifestyle. It is expected that you answer all questions accurately, completely and honestly. Should you be considered for continuation in the process, your answers may be verified by a variety of means including: a security interview; computer voice stress analysis, polygraph and a background character check.</p> <p>Applicants should note the following when completing the questionnaire:</p> <ul style="list-style-type: none"> Your decision to complete this questionnaire is voluntary. You may withdraw from the process at any time or refuse to provide answers to any or all of the questions in the questionnaire. However, an incomplete questionnaire will result in your disqualification from further consideration. Deceit, dishonesty or non-disclosure may lead to your disqualification from this and future competitions. Information provided in this questionnaire regarding serious, recent or ongoing unlawful activity maybe investigated further and/or disclosed to the appropriate law enforcement agency as required bylaw. You are not required to reveal any information related to a conviction for which a pardon has been received or a conviction under the <i>Young Offenders Act</i> or <i>Youth Criminal Justice Act</i> (Canada) that is outside the required disclosure time-frame. You can complete this document electronically. Answers to questions must remain within the box (i.e. everything must be visible without scrolling up or down). If you need more space to answer a question, attach additional pages and mark the question number(s), your name and the date at the top of each page. Handwritten submissions must be legible and in ink to be accepted. After completing the questionnaire, sign and date the Declaration and Consent section on the lastpage. This information is collected by the British Columbia Public Service under s.26(c) of FOIPPA. Any questions about the collection and use of this information can be directed to the BC Public Service Agency, HR Services at: MyHR@gov.bc.ca.



Section 2 – Alcohol/Drugs

1. Within the last 15 years have you used, or experimented with illegal drugs? No Yes If yes, complete the table below.

Drug	Date of Last Use	Frequency of Use	Average Amount Used
<input type="checkbox"/> Marijuana (pre-Oct 17/2018)			
<input type="checkbox"/> Hash/Hash Oil			
<input type="checkbox"/> Cocaine			
<input type="checkbox"/> Crack			
<input type="checkbox"/> Heroin			
<input type="checkbox"/> Mushrooms			
<input type="checkbox"/> Acid/LSD			
<input type="checkbox"/> Methamphetamine			
<input type="checkbox"/> Ecstasy			
<input type="checkbox"/> Steroids			
<input type="checkbox"/> Inhalants (e.g. glue, gasoline)			
<input type="checkbox"/> Mescaline (e.g. Peyote)			
<input type="checkbox"/> Crystal Meth			
<input type="checkbox"/> Other (specify)			

2. Within the last 15 years have you misused any prescription or non-prescription drugs? No Yes If yes, complete the table below.

Drug	Date of Last Use	Frequency of Use	Average Amount Used
<input type="checkbox"/> Methadone			
<input type="checkbox"/> Percocet			
<input type="checkbox"/> Percoden/Percodan			
<input type="checkbox"/> Valium			
<input type="checkbox"/> Prozac			
<input type="checkbox"/> Xanax			
<input type="checkbox"/> Ritalin			
<input type="checkbox"/> Oxycodone (e.g. OxyContin)			
<input type="checkbox"/> Codeine			
<input type="checkbox"/> Dilaudid			
<input type="checkbox"/> Morphine			
<input type="checkbox"/> Other (specify)			



3. Within the last 15 years have you purchased, sold, or given anyone illegal drugs including steroids? No Yes If yes, provide complete details.

4. Within the last 15 years have you grown, manufactured, imported or transported illegal drugs or contravened laws regarding the growing, preparing, using, or distributing cannabis or cannabis products? No Yes If yes, explain.

5. Within the last 15 years have you given or sold prescription drugs to anyone (adults or minors)?
 No Yes
If yes, explain.

6. Within the last 15 years have you had contact with the police as a result of being under the influence of alcohol, cannabis and/or illegal drugs? No Yes If yes, provide complete details.



7. Within the last 15 years has regular or excessive alcohol and/or drug use resulted in a negative incident in any aspect of your life – at home, work or school? No Yes If yes, explain.
8. Within the last 15 years have you consumed alcohol or cannabis or used illegal or prescription drugs during working or on-call hours where your ability to do your job may have been affected? No Yes If yes, explain.
9. Within the last 15 years have you driven while under the influence of alcohol and/or drugs? No Yes If yes, provide complete details of the circumstances.
10. Within the last 15 years are you now or have you been addicted to alcohol and/or drugs? No Yes If yes, explain.



Section 3 – Driving

11. Within the last 5 years have you applied for a drivers licence and been denied? No Yes
If yes, explain.

12. Within the last 5 years has your driver's licence been revoked, suspended, or placed on probationary status? No Yes If yes, provide complete details including whether you drove during this period.

13. Within the last 5 years, to the best of your recollection, list all of the traffic offences you have been charged with in BC and elsewhere? Provide complete details for each offence.

14. Within the last 5 years, to the best of your recollection, list all of the motor vehicle collisions that you were involved with and deemed completely or partially at fault in BC and elsewhere. Provide complete details for each collision.



Section 4 – Finances (complete this section only if you are applying for a Sheriff or BC Corrections position)

15. Within the last 7 years has a collection agency been assigned to your outstanding debts?

No Yes If yes, explain.

16. Within the last 7 years have you had your wages garnisheed? No Yes If yes, explain.

17. Within the last 7 years have you declared bankruptcy? No Yes If yes, explain.

18. Do you have any debts you will not be able to pay back? No Yes If yes, explain.



Section 5 – Work and School

19. Within the last 10 years have you been fired or asked to resign from a job? No Yes
If yes, explain.

20. Within the last 10 years have you been formally disciplined or documented for inappropriate or unauthorized conduct at work? No Yes If yes, explain.

21. Within the last 10 years have you been denied a job with the military, the police, an intelligence service or any other law enforcement agency? No Yes If yes, list the job applied for and explain the circumstances.

22. Within the last 10 years have you been suspended, expelled, or formally reprimanded by a secondary or post-secondary institution? No Yes If yes, list the institution and explain the circumstances and the outcome.



23. Within the last 10 years have you cheated on any form of examination or put forward someone else's work without their permission for your personal benefit? No Yes If yes, explain.

24. Have you ever knowingly misused or wrongfully disclosed private or confidential information? No Yes If yes, explain.

25. Have you ever covered up for a colleague's misconduct at work? No Yes If yes, explain.

26. Have you ever discriminated against someone at work because of their race, colour of skin, sexual orientation, or religion? No Yes If yes, explain.



27. Have you ever used a computer or other electronic device at work in a way that was not sanctioned by your employer? No Yes If yes, explain.

Section 6 – Associations and Relationships

28. Are you or have you ever been associated with any gang, criminal group, terrorist group, militant group, or other extremist organization that engages in unlawful activities? No Yes If yes, explain.

29. Are you aware that any of your family members or friends are involved in any criminal activity, drug use or associated with any gang, criminal group, terrorist group, militant group, or other extremist organization that engages in unlawful activities? No Yes If yes, explain.

Section 7 – Unlawful Conduct

30. Within the last 10 years have you been investigated, detained, or arrested, or charged by the police or any law enforcement agency or had your information recorded by the police in relation to an investigation? No Yes If yes, provide complete details for each instance.



31. Have you ever been involved in any dishonest or criminal behaviour in your past or current employment (e.g. theft, fraud, filing false or misleading expense claims, etc)?

No Yes If yes, explain.

32. Have you ever had sexual involvement with any person without their consent (e.g. persons who could not give their consent due to alcohol or drugs)? No Yes If yes, provide details.

33. While an adult (over age 17), have you engaged in, or tried to engage in, a sexual act that involved a child or under age person (whether in person or via the phone/internet)?

No Yes If yes, provide details.

34. While an adult (over age 17), have you viewed, downloaded, printed, shared, or produced any sexually explicit material involving an underage person?

No Yes If yes, provide details.



35. Have you ever engaged in any illegal activity using an electronic device and/or the internet (e.g. hacking, harassment, theft of copyrighted material)? No Yes If yes, explain.

36. As an adult (over age 17) within the last 10 years, have you threatened physical violence towards another person or threatened to damage their property? No Yes If yes, explain.

37. While an adult (over age 17), have you been physically violent towards another person, child or adult? No Yes If yes, explain and indicate if the violence involved physical contact or use of a weapon.



38. Have you ever made or caused to be made a false or misleading insurance claim with the Insurance Corporation of B.C. (I.C.B.C.), the Workers Compensation Board (W.C.B.) or any other insurance company? No Yes If yes, explain.

39. Have you ever filed a false tax return or customs declaration? No Yes If yes, explain.

40. Have you ever had a search warrant, peace bond, restraining order, or protection order served on you? No Yes If yes, explain.

41. (Complete this question only if you are applying for a Conservation Officer position) Have you ever committed a violation of environmental legislation, including hunting or fishing related offences? No Yes If yes, explain and be sure to list all offences whether charged or not.



42. Have you ever been involved in **any** criminal behaviour or other unlawful activity not covered by this questionnaire No Yes If yes, provide complete details for each instance.

Section 8 – Other

43. Have you ever borrowed over \$200 in order to gamble or to cover a gambling loss? No Yes If yes, explain.

44. (Complete this question only if you are applying for a Conservation Officer or Sheriff position)
Have you ever been refused a gun permit or license or had a permit or license revoked? No Yes If yes, explain.

45. Are there now or have there ever been any civil judgements outstanding or pending against you for injuries, damages, or non-payment of debts? No Yes If yes, explain.



Section 9 – Applicant Declaration and Consent

I, the undersigned, do hereby consent to the disclosure of the personal information collected in the **Pre-Employment Security Screening Questionnaire** to the **Personnel Security Screening Office** (hereinafter the **PSSO**) for the purpose of assessing my suitability, reliability and security as it relates to employment with the BC Public Service.

I recognize that the **PSSO** is collecting my personal information solely for the purpose noted above and in accordance with the provisions of Section 8(1) of the *Privacy Act of Canada*, and Section 26(c) of the *British Columbia Freedom of Information and Protection of Privacy Act (FOIPPA)*. Any questions about the collection and use of this information can be directed to the Personnel Security Screening Office using the contact information noted in Section 1 (Submission Instructions).

I certify, to the best of my knowledge, that the information I have provided in the **Pre-Employment Security Screening Questionnaire** is complete, honest and accurate. I understand that a false statement or omission of facts herein may disqualify me from consideration or result in my subsequent termination for cause if I am employed.

Applicant Name (please print) *Applicant's Signature* *Date Signed*

(Please print the completed questionnaire and then sign and date by hand)