



**WGS 280 Indigenous Women's Autobiography and Life Writing
Walls to Bridges ~ Course Application Form
Deadline: November 12, 2019**

**Email your completed application to:
Grace Jamieson ~ gjamies0@ualberta.ca
CC: Sara Howdle ~ howdle@ualberta.ca**

IMPORTANT COURSE INFORMATION

Please ensure you read the following prior to completing & submitting this application.

This is a Walls To Bridges(W2B) course. That means it takes place inside the Edmonton Institution for Women (EIFW), which is a federal correctional facility. W2B classes involve equal numbers of incarcerated ("inside") students and university/college-based ("outside") students learning together as equal peers.

Of particular note:

- *WGS 280 X50 Indigenous Women's Autobiography and Life Writing* is a 3-credit course and attendance and oral participation will be more stringent than a fourth-year seminar, and the pedagogy involves a fuller responsibility toward the course's learning goal than in a traditional classroom.
- Because the course takes place inside a correctional facility, all students must complete all necessary protocol outlined by Correctional Service of Canada. This includes a *Personnel Screening, Consent and Authorization Form* and fingerprinting. There is no student cost for this process. A completed Personnel Screening Form can be found at the end of this application and must accompany your completed application submission. Complete the form by hand. Do NOT use a computer to complete the form.
- Students are responsible for their transportation to and from the Edmonton Institute for Women located at 11151 178th Street.
- Students are required to adhere to all rules and regulations dictated by the Edmonton Institution for Women while in their facility. These rules are subject to change.
- No cell phones, laptops, and tablets are allowed inside the Institution.
- Walls to Bridges courses include a large group project.
- The Walls to Bridges program includes guidelines that shape dynamics of privacy and respect inside and out of the classroom. This includes a commitment from "outside" students to not investigate their classmates' conviction histories.
- By participating in this course, you consent to a "Walls to Bridges" tag on your student record so we can track the progress of the Walls to Bridges program at the University of Alberta.



Section A: APPLICANT INFORMATION

Please answer the following questions:

Name:

UAlberta ID:

Faculty/Program of Study:

Mailing Address:

UAlberta E-mail:

Telephone:

Section B: BACKGROUND AND STATEMENT OF INTENT

Please answer the following questions:

1. What draws you to this course? What do you think it might offer you? What do you bring to it?

2. What seems most challenging to you personally about taking a course like this? How would you try to meet that challenge?



3. What impressions about prison and jail did you receive growing up? If you think about your current understanding of the Canadian criminal justice system: where does that understanding come from? What various sources have helped shape your current understanding of it?

4. This course takes place inside The Edmonton Institution for Women which is a federal correctional facility. This means that the warden and correctional officers are in charge and our movement in the space is dictated by their institutional regulations. Do you feel equipped to manage in this context?



5. Have you ever had the experience of trying to find your way in a relatively foreign environment or with a group of strangers? Please offer comments about this experience.

6. Healthy learning can include constructive disagreement between students. How do you think you respond to tension, disagreement, or conflict between people?



7. This course is about Indigenous women's autobiography and life writing. If you had to guess, what topics and books might we be discussing?

Signature

Applicant's Signature	Date
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Protection of Privacy – The personal information requested on this form is collected under the authority of Section 33 (c) of the Alberta Freedom of Information and Protection of Privacy Act and will be protected under Part 2 of that Act. It will be used for the purpose of applicant selection, course registration and program tagging. Direct any questions about this collection to: Freda Cardinal, Senior Coordinator, Admissions and Student Services, the Faculty of Native Studies, 2-20 Pembina Hall, University of Alberta, T6G 2E5, tel. (780) 492-2991.

For Faculty Use Only

Application Status: <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	
Notes:	
Signature	Date



PERSONNEL SCREENING, CONSENT AND AUTHORIZATION FORM

OFFICE USE ONLY		
Reference number	Department/Organization number	File number

NOTE: For Privacy Act Statement refer to Section C of this form and for completion instructions refer to attached instructions. Please typewrite or print in block letters.

A ADMINISTRATIVE INFORMATION (To be completed by the Authorized Departmental/Agency/Organizational Official)

New
 Update
 Upgrade
 Transfer
 Supplemental
 Re-activation

The requested level of reliability/security check(s)

Reliability Status
 Level I (CONFIDENTIAL)
 Level II (SECRET)
 Level III (TOP SECRET)

Other _____

PARTICULARS OF APPOINTMENT/ASSIGNMENT/CONTRACT

Indeterminate
 Term
 Contract
 Industry
 Other (specify secondment, assignment, etc.) **STUDENT FACILITATOR**

Justification for security screening requirement
STUDENT FACILITATOR - WALLS TO BRIDGES UNIVERSITY

Position/Competition/Contract number N/A	Title N/A	Group/Level (Rank if applicable) N/A
Employee ID number/PRI/Rank and Service number (if applicable) N/A	If term or contract, indicate duration period N/A	From N/A To N/A
Name and address of department / organization / agency UNIVERSITY OF ALBERTA	Name of official Dr. TRACY BEAR	Telephone number (780) 492-9237 Facsimile number N/A

B BIOGRAPHICAL INFORMATION (To be completed by the applicant)

Surname (Last name) _____ Full given names (no initials) underline or circle usual name used _____ Family name at birth _____

All other names used (i.e. Nickname) _____ Sex Male Female Date of birth _____ Country of birth _____ Date of entry into Canada if born outside Canada _____

RESIDENCE (provide addresses for the last five years starting with the most current) Home address _____ Daytime telephone number _____ E-mail address _____

	Apartment number	Street number	Street name	Civic number (if applicable)	From	To
1	IF YOU HAVE MORE THAN TWO ADDRESSES IN PAST FIVE YEARS, INCLUDE THEM ON ANOTHER SHEET AND SUBMIT WITH THIS FORM					present
					City	Province or state
2	IF YOU HAVE MORE THAN TWO ADDRESSES IN PAST FIVE YEARS, INCLUDE THEM ON ANOTHER SHEET AND SUBMIT WITH THIS FORM					
					City	Province or state

Have you previously completed a Government of Canada security screening form? Yes No If yes, give name of employer, level and year of screening. _____ Y _____

CRIMINAL CONVICTIONS IN AND OUTSIDE OF CANADA (see instructions)

Have you ever been convicted of a criminal offence for which you have not been granted a pardon? Yes No If yes, give details. (charge(s), name of police force, city, province/state, country and date of conviction) _____

Charge(s) _____ Name of police force _____ City _____

Province/State _____ Country _____ Date of conviction _____ Y _____ M _____ D _____



**PERSONNEL SCREENING,
CONSENT AND AUTHORIZATION FORM**

Surname and full given names	Date of birth	Y	M	D
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C CONSENT AND VERIFICATION (To be completed by the applicant and authorized Departmental/Agency/Organizational Official)

Checks Required (See Instructions)	Applicant's initials	Name of official (print)	Official's initials	Official's Telephone number
1. <input checked="" type="checkbox"/> Date of birth, address, education, professional qualifications, employment history, personal character references				()
2. <input checked="" type="checkbox"/> Criminal record check				()
3. <input checked="" type="checkbox"/> Credit check (financial assessment, including credit records check)				()
4. <input type="checkbox"/> Loyalty (security assessment only)				
5. <input type="checkbox"/> Other (specify, see instructions)				()

The Privacy Act Statement
 The information on this form is required for the purpose of providing a security screening assessment. It is collected under the authority of subsection 7(1) of the *Financial Administration Act* and the *Government Security Policy (GSP)* of the Government of Canada, and is protected by the provisions of the *Privacy Act* in institutions that are covered by the *Privacy Act*. Its collection is mandatory. A refusal to provide information will lead to a review of whether the person is eligible to hold the position or perform the contract that is associated with this Personnel Screening Request. Depending on the level of security screening required, the information collected by the government institution may be disclosed to the Royal Canadian Mounted Police (RCMP) and the Canadian Security Intelligence Service (CSIS), which conduct the requisite checks and/or investigation in accordance with the GSP and to entities outside the federal government (e.g. credit bureaus). It is used to support decisions on individuals working or applying to work through appointment, assignment or contract, transfers or promotions. It may also be used in the context of updating, or reviewing for cause, the reliability status, security clearance or site access, all of which may lead to a re-assessment of the applicable type of security screening. Information collected by the government institution, and information gathered from the requisite checks and/or investigation, may be used to support decisions, which may lead to discipline and/or termination of employment or contractual agreements. The personal information collected is described in Standard PIB PSU 917 (Personnel Security Screening) which is used by all government agencies, except the Department of National Defence PIB DND/PPE 834 (Personnel Security Investigation File), RCMP PIB CMP PPU 065 (Security/Reliability Screening Records), CSIS PIB SIS PPE 815 (Employee Security), and PWGSC PIB PWGSC PPU 015 (Personnel Clearance and Reliability Records) used for Canadian Industry Personnel. Personal information related to security assessments is also described in the CSIS PIB SIS PPU 005 (Security Assessments/Advice).

I, the undersigned, do consent to the disclosure of the preceding information including my photograph for its subsequent verification and/or use in an investigation for the purpose of providing a security screening assessment. By consenting to the above, I acknowledge that the verification and/or use in an investigation of the preceding information may also occur when the reliability status, security clearance or site access are updated or otherwise reviewed for cause under the Government Security Policy. My consent will remain valid until I no longer require a reliability status, a security clearance or a site access clearance, my employment or contract is terminated, or until I otherwise revoke my consent, in writing, to the authorized security official.

 Signature Date (Y/M/D)

D REVIEW (To be completed by the authorized Departmental/Agency/Organizational Official responsible for ensuring the completion of sections A, B and C)

Name and title	Telephone number	
Address	Facsimile number	

E APPROVAL (To be completed by authorized Departmental/Agency/Organizational Security Official only)

I, the undersigned, as the authorized security official, do hereby approve the following level of screening.

Reliability Status

Approved Reliability Status Not approved

 Name and title

 Signature _____
 Date (Y/M/D)

Security Clearance (if applicable)

Level I Level II Level III Not recommended

 Name and title

 Signature _____
 Date (Y/M/D)

Comments

PHOTO
 (for Level III T.S.,
 and/or upon request
 - see instructions)





PERSONNEL SCREENING, CONSENT AND AUTHORIZATION FORM

OFFICE USE ONLY		
Reference number	Department/Organization number	File number

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The requested level of reliability/security check(s)

Reliability Status
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 Level II (SECRET)
 Level III (TOP SECRET)

Other _____

PARTICULARS OF APPOINTMENT/ASSIGNMENT/CONTRACT

Indeterminate
 Term
 Contract
 Industry
 Other (specify secondment, assignment, etc.) _____

Justification for security screening requirement

Position/Competition/Contract number	Title	Group/Level (Rank if applicable)	
Employee ID number/PRI/Rank and Service number (if applicable)	If term or contract, indicate duration period ▶	From	To
Name and address of department / organization / agency	Name of official	Telephone number ()	Facsimile number ()

B BIOGRAPHICAL INFORMATION (To be completed by the applicant)

Surname (Last name) _____ Full given names (no initials) underline or circle usual name used _____ Family name at birth _____

All other names used (i.e. Nickname) _____

Sex: Male Female

Date of birth: Y | M | D _____

Country of birth: _____

Date of entry into Canada if born outside Canada: Y | M | D _____

RESIDENCE (provide addresses for the last five years, starting with the most current)

Home address _____

Daytime telephone number () _____

E-mail address _____

1	Apartment number	Street number	Street name	Civic number (if applicable)	From Y M	To present
	City		Province or state	Postal code	Country	Telephone number ()

2	Apartment number	Street number	Street name	Civic number (if applicable)	From Y M	To Y M
	City		Province or state	Postal code	Country	Telephone number ()

Have you previously completed a Government of Canada security screening form? Yes No

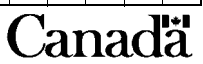
If yes, give name of employer, level and year of screening. _____ Y

CRIMINAL CONVICTIONS IN AND OUTSIDE OF CANADA (see instructions)

Have you ever been convicted of a criminal offence for which you have not been granted a pardon? Yes No

If yes, give details. (charge(s), name of police force, city, province/state, country and date of conviction) _____

Charge(s)	Name of police force	City
Province/State	Country	Date of conviction ▶ Y M D





PERSONNEL SCREENING, CONSENT AND AUTHORIZATION FORM

Surname and full given names	Date of birth						
	<table style="margin:auto"> <tr> <td style="width:10px">Y</td> <td style="width:10px">M</td> <td style="width:10px">D</td> </tr> <tr> <td style="border:1px solid black; height:20px"></td> <td style="border:1px solid black; height:20px"></td> <td style="border:1px solid black; height:20px"></td> </tr> </table>	Y	M	D			
Y	M	D					

C CONSENT AND VERIFICATION (To be completed by the applicant and authorized Departmental/Agency/Organizational Official)

Checks Required (See Instructions)	Applicant's initials	Name of official (print)	Official's initials	Official's Telephone number
1. <input type="checkbox"/> Date of birth, address, education, professional qualifications, employment history, personal character references				()
2. <input type="checkbox"/> Criminal record check				()
3. <input type="checkbox"/> Credit check (financial assessment, including credit records check)				()
4. <input type="checkbox"/> Loyalty (security assessment only)				
5. <input type="checkbox"/> Other (specify, see instructions)				()

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 Signature Date (Y/M/D)

D REVIEW (To be completed by the authorized Departmental/Agency/Organizational Official responsible for ensuring the completion of sections A, B and C)

Name and title	Telephone number	<div style="border:1px solid black; width:100px; height:100px; margin:auto;"></div>
Address	Facsimile number	

E APPROVAL (To be completed by authorized Departmental/Agency/Organizational Security Official only)

I, the undersigned, as the authorized security official, do hereby approve the following level of screening.

Reliability Status

Approved Reliability Status Not approved

Name and title

Signature Date (Y/M/D)

Security Clearance (if applicable)

Level I Level II Level III Not recommended

Name and title

Signature Date (Y/M/D)

Comments

PHOTO
(for Level III T.S.,
and/or upon request
- see instructions)



INSTRUCTIONS FOR PERSONNEL SCREENING CONSENT AND AUTHORIZATION FORM TBS/SCT 330-23E (Rev. 2002/02)

Once completed, this form shall be safeguarded and handled at the level of Protected A.

General:

If space allotted in any portion is insufficient please use separate sheet using same format.

1. Section A (Administrative Information) Authorized Departmental/Agency/Organizational Official

The Official, based on instructions issued by the Departmental Security Officer, may be responsible for determining, based on five year background history, what constitutes sufficient verification of personal data, educational and professional qualifications, and employment history. References are to be limited to those provided on the application for employment or equivalent forms.

SUPPLEMENTAL INFORMATION REQUIREMENTS

Persons who presently hold a SECURITY CLEARANCE and subsequently marry, remarry or commence a common-law partnership, in addition to having to update sections of the *Security Clearance Form (TBS/SCT 330-60)*, are required to submit an original *Personnel Screening, Consent and Authorization Form*, with the following parts completed:

Part A - As set forth in each question

Part B - As set forth in each question, excluding CRIMINAL CONVICTIONS IN AND OUTSIDE OF CANADA.

Part C - Applicant's signature and date only are required

"Other". This should be used to identify if the security screening is for Site Access, NATO, SIGINT etc.

2. Section B (Biographical Information)

To be completed by the **applicant**. If more space is required use a separate sheet of paper. Each sheet must be signed.

Country of Birth - For "NEW" requests, if born abroad of Canadian parents, please provide a copy of your Certificate of Registration of Birth Abroad. If you arrived in Canada less than five years ago, provide a copy of the Immigration Visa, Record of Landing document or a copy of passport.

- List only criminal convictions for which a pardon has NOT been granted. Include on a separate attached sheet of paper, if more than one conviction. Applicant must include those convictions outside Canada.

- Offences under the *National Defence Act* are to be included as well as convictions by courts-martial are to be recorded.

3. Section C (Consent and Verification)

A copy of Section "C" may be released to institutions to provide acknowledgement of consent.

Criminal record checks (fingerprints may be required) and credit checks are to be arranged through the Departmental Security Office or the delegated Officer.

Consent: may be given only by an applicant who has reached the age of majority, otherwise, the signature of a parent or guardian is mandatory.

The age of majority is:

19 years in NFLD., N.S., N.B., B.C., Yukon, Northwest Territories and Nunavut;

18 years in P.E.I., Que., Ont., Man., Sask. and Alta.

The applicant will provide initials in the " applicant's initials box".

The official who carried out the verification of the information will print their name, insert their initials and telephone number in the required space.

- Reliability Screening (for all types of screening identified within Section A): complete numbers 1 and 2 and 3 if applicable.

- Security Clearance (for all types of screening identified within Section A): complete numbers 1 to 4 and 5 where applicable.

- Other: number 5 is used only where prior Treasury Board of Canada Secretariat approval has been obtained.

4. Section D (Review)

To be completed by authorized Departmental/Agency/Organizational Official who is responsible for ensuring the completion of sections A to C as requested.

5. Section E (Approval)

Authorized Departmental/Agency/Organizational Security Official refers to the individuals as determined by departments, agencies, and organizations that may verify reliability information and/or approve/not approve reliability status and/or security clearances. Approved Reliability Status and Level I, II and III, as well as the signature of the authorized security official or manager are added for Government of Canada use only. Applicants are to be briefed, acknowledge, and be provided with a copy of the "Security Screening Certificate and Briefing Form (TBS/SCT 330-47)".

Note: Private sector organizations do not have the authority to approve any level of security screening.

Photographs: Departments/Agencies/Organizations are responsible for ensuring that three colour photographs of passport size are attached to the form for the investigating agency. Maximum dimensions are 50mm x 70mm and minimum are 43mm x 54mm. The face length from chin to crown of head must be between 25mm x 35mm. The photographs must be signed by the applicant and an authorized security official. The photographs must have been taken within the last six months. It is required for new or upgrade Level III security clearances for identification of the applicant during the security screening investigation by the investigating agency. The investigating agency may in specific incidents request a photograph for a Level I or II clearances when an investigation is required.