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The Air Cadet League of Canada
Volunteer Transfer Form

To be completed when a registered member /non-member volunteer is requesting to be transferred from one Squadron Sponsoring Committee /Squadron to another.

VOLUNTEER INFORMATION

Transferring From Squadron	#	Province	Current Screening Card #		
Transferring To Squadron	#	Province	Transfer Date		
Last Name		First Name		Middle Names	
Aliases				Mr. ☐ Mrs. ☐	Ms. ☐
Address					
City		Province		Postal Code	
Home Phone		Cell Phone		Email	
Mailing Address (If different from above)					
City		Province		Postal Code	

IDENTITIFICATION

Please provide one of the following pieces of photo identification and a current jpg photo to be forwarded via **secure means.**

Driver's License # _____	Passport # _____	Other # _____
Identification verified by Screening Coordinator. If "Other" ID is supplied, indicate type of ID in the box to the right and initial.		_____ Initial

APPLICANT CERTIFICATION

I recognize the safety and well-being of cadets as my foremost responsibility. I agree to notify the Squadron Sponsoring Committee Chairperson of any change in status, including charges or criminal offence convictions, while a volunteer of the Air Cadet League of Canada.

I certify that the above information is true and correct. I authorize the Air Cadet League of Canada and its Provincial/Territorial Committees to obtain information about me from any individual as well as from any police agency and understand that this information may be shared with the Department of National Defence.

_____
SIGNATURE OF APPLICANT

CHAIRPERSON OR DESIGNATED PERSON'S RECOMMENDATION

_____ Print Name	Recommended ☐	Not Recommended ☐	_____ Title _____ Signature

TO BE COMPLETED BY THE PROVINCIAL SCREENING REGISTRATION COORDINATOR

Transfer form ☐ Recommendation ☐ Photo ☐	This Volunteer is: Approved ☐ Not Approved ☐ _____ Signature PSRC	Screening Card Information Date Joined _____ Expiry Date _____ Notification Sent _____ Entered _____
Date	Squadron	ID Number