

Ministry of the Attorney General Legal Appointments Office

77 Wellesley St W, BOX 720 Toronto ON M7A 1N3 Telephone: 416-326-4064 Fax: 416-326-4065

## Commissioner for Taking Affidavits Student-at-Law / Law Student Instructions

This is an application for appointment as a commissioner for taking affidavits in and for the Province of Ontario while a student-at-law, or while a law student employed under the supervision, direction, and guidance of a lawyer.

Only articling students and law students working at a law firm or legal organization in the Province of Ontario should complete the accompanying form. Other Ontario applicants should complete the form "Commissioner for Taking Affidavits - General Application" available at <u>https://forms.mgcs.gov.on.ca/dataset/004-0313</u>.

## Instructions:

## Please Enclose:

- All pages of the accompanying application form, fully completed, signed and dated by the applicant, with the completed security check consent statement form (form ON00532).
- A letter of authorization on the letterhead of the law firm or organization, and signed by the articling principal or a senior partner (for law students, a supervising lawyer or a senior partner). The letter should nominate the applicant as a commissioner for taking affidavits on behalf of the law firm or organization, and must provide:
  - the applicant's full legal name
  - whether the applicant is applying as an articling student or as a law student
  - the period of the articles of agreement (for articling students) or employment (for law students).
- You may submit your application and consent statement form (<u>form ON00532</u>) by email to <u>appointments@ontario.ca</u> Before submitting, either digitally sign, or print, sign, and scan your application form and consent statement and save them as password-protected PDF files. When submitting, send all documents in **one** email with attachments, with the password to open the attachments sent in a separate email.

Please be aware, when sending personal information by email, that electronic communication is not always secure and can be vulnerable to interception. By emailing the completed application and consent statement form to the ministry, you are doing so at your own risk and choosing.

**Applications submitted by email do not require a payment to be accompanied**. If the ministry intends to grant you an appointment, you will be provided with details and instructions to submit your payment for processing. Your potential appointment will not be finalized until your payment is received, processed and you receive confirmation of your approval.

Alternatively, you may wish to submit your application form, consent statement form, and your letter of authorization and **payment** by mail to:

Ministry of the Attorney General Legal Appointments Office 77 Wellesley St W, BOX 720 Toronto ON M7A 1N3

If submitting an application by mail, please include a cheque or money order for the appointment fee of \$75.00 payable to "Minister of Finance." HST is not applicable. Do not send cash or credit card information. No fee is required if the applicant is an employee of the federal, provincial or municipal government, a First Nations band, or a Children's Aid Society.

## Please allow four to six weeks for processing.

Pour obtenir le formulaire en français, visitez <u>https://forms.mgcs.gov.on.ca/fr/dataset/004-0316</u> ou composez le 416-326-4064.



Ministry of the Attorney General Legal Appointments Office Services 77 Wellesley St W, BOX 720 Toronto ON M7A 1N3 Telephone: 416-326-4064 Fax: 416-326-4065 Commissioner for Taking Affidavits Student-at-Law / Law Student Application

The completion and filing of this application form with the Ministry of the Attorney General does not guarantee that an appointment as a commissioner for taking affidavits will be approved.

**Note:** Only completed applications will be considered. Incomplete applications will be returned. Before you begin, please read the following application instructions carefully.

- If you are filling out a paper copy, complete all entries in pen using block characters. Use capital and lower case letters as applicable in names.
- Do not use initials in names.
- Post office box numbers are not sufficient for residential address.
- Do NOT leave blank spaces. Draw a line or write "NA" (Not Applicable) in a section if it does not apply to you.
- Attach additional sheets of paper if you require more room.

Fields marked with an asterisk (\*) are mandatory.

Applicant Information						
Last Name *				First Name *		
Middle Name(s) *				Date of Birth (yyyy/mm/dd) *		
Residential Add	ress					
Suite No.	Street No. *	Street Name *				PO Box
Municipality/City/	Town *				Province *	Postal Code *
Telephone Numb	er and Email A	ddress*				I
Name of Law Firr	m or Organizati	on that is nominating you as a co	ommissio	oner *		
<b>Business Addre</b>	SS					
Unit/Suite No.	Street No. *	Street Name *				PO Box
Department	1	1	Со	ntact Person *		
Municipality/City/	Town *				Province *	Postal Code *
Period of Articles From: Month/Yea	-	or Employment: * Month/Year				
/		/				
Name of Law Sch	nool you Attend	I or will be Attending*				

The year of law school program you will have entered and/or completed when period of articles or employment begins (select one): ^								
Accepted, but not yet entered first year								
□ First □ Articles								
Secon	d							
Law Scho	ool Addı	ress						
University Name *					University Department			
Unit/Suite No. Street No. Street Name						PO Box		
0		••						
Municipality/City/Town * Postal Code *				Postal Code *	Country *			
Have you previously held an appointment as a commissioner for taking affidavits in Ontario? *								
lf yes, ple	ase prov	vide your surna	ime and year app	ointment expired	as they appeared on your previous stamp			
Last Nam	е				Year			
Please note: The Ministry of the Attorney General may corroborate the information provided in the following section through the Canadian Police Information Centre (CPIC). By completing and signing this application form, you are consenting to this CPIC check.								
provided i You are e	ase prov is not suf entitled to dian Citiz	fficient o work in Cana zenship	da by reason of (s	select one): * Permanent Resid	pply to the offence(s). Provide details on an attache lency  Work Permit ermit (yyyy/mm/dd)	ed page if space		
Complet	tion and	d Enclosures	s Checklist					
•		(check all tha						
All pages of this application form and attachments if required, fully completed, signed and dated by the applicant, with the completed security check consent statement form (form ON00532).								
	A letter of authorization nominating the applicant as described in the application instructions.							
	Email the completed application to <u>appointments@ontario.ca</u> <b>OR</b> mail the completed application and <b>payment</b> (a cheque or money order for the appointment fee of \$75.00 payable to "Minister of Finance.") to:							
			Legal Appoi	he Attorney Gei intments Office y St W, BOX 72 I M7A 1N3				
l underst		· ·	which this inforr	nation will be us	sed and certify that the information given in the	e application is		

Full Legal Name *	Signature*	Date (yyyy/mm/dd)*

Pursuant to subsection 39 (2) of the *Freedom of Information and Protection of Privacy Act*, this information is collected pursuant to subsections 4 (1) and 4 (1.1) of the Commissioners for Taking *Affidavits Act* for the purpose of determining the suitability of applicants for appointment as commissioners for taking affidavits. Questions about the information collected should be directed to: Manager, Legal Appointments Office, 77 Wellesley St. W, BOX 720, Toronto ON M7A 1N3, 416-326-4064, <u>appointments@ontario.ca</u>.