



Disclosure: criminal charges or offences

Name

Date

Date of incident

Registration number

Describe the nature and circumstances of charge or offence. Describe the incident and provide your explanation, including specific details and circumstances surrounding the incident.

Describe court proceedings and findings (include relevant dates). Have you plead guilty or been found guilty of a criminal offence? Indicate any outstanding charges that have not proceeded to court (include court dates).

Describe court decisions (e.g., conviction, absolute discharge, conditional discharge) and sentence imposed (e.g., court orders or penalties).

Describe the status of sentence or court orders (e.g., outstanding requirements of sentence). Include relevant dates.

Provide copies of all available supporting documentation related to this charge or offence and evidence of rehabilitation
Indicate the supporting documentation you have provided:

Law enforcement or police reports

Court transcripts regarding the court proceedings, findings, and/or decisions

Court orders (e.g., probation orders)

Report from parole/probation officer or court order supervisor

Evidence of compliance with court orders

Evidence of rehabilitation

Other

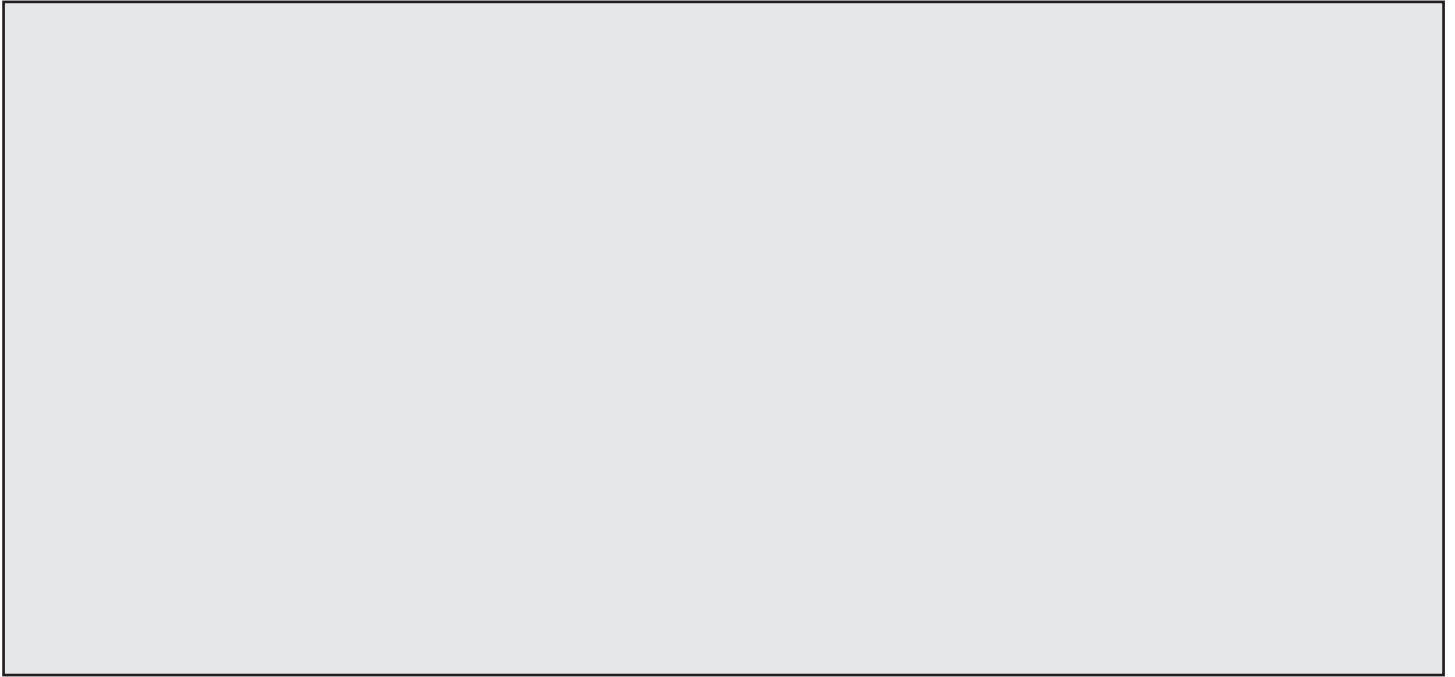
Any information you wish to provide in connection with the charge or offence, including whether your circumstances or lifestyle have changed since the incident occurred. What steps have you taken towards rehabilitation?

How does this charge or offence impact your ability to provide safe and effective pharmacy services?

How does this charge or offence impact the public's confidence and trust in the pharmacy profession?

What steps have you taken to ensure you are a law-abiding citizen?

Any additional information or evidence you wish to provide to support you are of good character and reputation.



Signature

Date