

INSTRUCTIONS FOR FILLING OUT GARDA VETTING FORMS

1. WRITE IN BLOCK CAPITALS
WITH BLACK PEN.

2. LEAVE BLANK

3. STUDENT'S INFO.

4. N.B. PARENT'S INFO.

5. PUT IN THE EXACT NAME
OF THE ORGANISATION.

6. HOME ADDRESS


7. OUR LADY'S SCHOOL

9. STUDENT'S SIGNATURE

8. TICK THE BOX

10. DATE

Joint Managerial Body
Emmet House
Milltown
Dublin 14 V3K8



JMB Ref:

Form NVB 1
Vetting Invitation

Section 1 – Personal Information

Under Sec 26(b) of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016, it is an offence to make a false statement for the purpose of obtaining a vetting disclosure.

Forename(s):

Middle Name:

Surname:

Date Of Birth: / /

Email Address:

Contact Number:

Role Being Vetted For:

Current Address:

Line 1:

Line 2:

Line 3:

Line 4:

Line 5:

Eircode/Postcode:

Section 2 – Additional Information

Name Of Organisation:

I have provided documentation to validate my identity as required *and*
I consent to the making of this application and to the disclosure of information by the National Vetting Bureau to the Liaison Person pursuant to Section 13(4)(e) National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016. Please tick box

Applicant's Signature:

Date: / /

Note: Please return this form to the above named organisation. An invitation to the e-vetting website will then be sent to your Email address.

INSTRUCTIONS FOR FILLING OUT GARDA VETTING FORMS



AN GARDA Síochána

NATIONAL VETTING BUREAU

PARENT/GUARDIAN CONSENT FORM (NVB 3)

Applicant Details

Forename(s):

Surname:

Date Of Birth:

D	D	/	M	M	/	Y	Y	Y	Y
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11. STUDENT'S INFO.

Parent/Guardian Details

Under Sec 26(b) of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016, it is an offence to make a false statement for the purpose of obtaining a vetting disclosure.

Forename(s):

Surname:

Relationship to applicant: Father:

 Mother:

 Guardian:

12. PARENT'S INFO.

Address:

Line 1:

Line 2:

Line 3:

Line 4:

Line 5:

Eircode/Postcode:

Parent/Guardian Consent

I, being the Parent/Guardian of the above named applicant, consent for the National Vetting Bureau to conduct vetting in respect of the above named applicant in accordance with the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016.

13. PARENT'S SIGNATURE

Parent/Guardian Signature:

 Date:

D	D	/	M	M	/	Y	Y	Y	Y
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14. DATE