Guidelines for completing Vetting Invitation Form (NVB 1)

Please read the following guidelines before completing this form.

Miscellaneous

The Form must be completed in full using **BLOCK CAPITALS** and writing must be clear and legible.

The applicants signature must be a wet ink signature.

Photocopies will not be accepted.

All applicants will be required to provide documents to validate their identity.

If the applicant is under 18 years of age, a completed NVB 3 - Parent\Guardian Consent Form will be required. Please note that where the applicant is under 18 years of age the electronic correspondence will issue to the Parent\Guardian. This being the case, the applicant must provide their Parent\Guardian Email address on the NVB 1 form.

Personal Details

Insert details for each field, allowing one block letter per box.

For Date of Birth field, allow one digit per box.

Please fill in your Email Address, allowing one character/symbol per box. This is required as the invitation to the e-vetting website will be sent to this address.

Please allow one digit per box for your contact number.

The Current Address means the address you are now living at.

The address fields should be completed in full, including Eircode/Postcode. No abbreviations.

Role Being Vetted For

The role being applied for must be clearly stated. Generic terms such as “Volunteer” will not suffice.

Declaration of Application

The applicant must confirm their understanding and acceptance of the two statements by signing the application form at Section 2 and ticking the box provided.

An invitation to the e-vetting website will then be sent to your Email address from evetting.donotreply@garda.ie

The **Identity Document Validation Form** section of this form must be completed by the person validating your identity and proof of address documents from the organisation listed in Section 2.

Diocese of Killaloe
Westbourne
Cusack Road
Ennis
Co. Clare

Your 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(s):	
Surname:	
Date Of Birth:	D D / M M / Y Y Y Y
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: KILLALOE DIOCESE

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, to confirm I have read above declaration.**

Applicant's Signature:

Date: D D / M M / Y Y Y Y

Section 3 – Organisation Information

Name of Organisation requesting vetting (Parish/School/Order/Agency)	
Contact Person Bishop/Parish Priest/Principal/Chairperson/Manager (delete as appropriate)	
Address of Organisation	
Parish / School Roll No. / Cluster	
Email	
Contact No.	

Section 4 – Identification documents

This schedule lists the documentation that the Garda National Vetting Bureau (GNVB) will accept when processing vetting applications. **You need to provide one photographic identification and one proof of address.**

Provide ONE Photographic Identification	**Tick**
Passport from country of citizenship	
Irish Driving Licence or Learner Permit (new credit card format)	
Irish Certificate of Naturalisation	
National Identity Card (EU/EEA/Swiss Citizens)	

Provide ONE proof of Address - issued within the last 6 months	**Tick**
Bank Statement from a recognised bank(not private money lenders or Revolut)	
Building Society Statement	
Credit Union Statement	
Credit Union Passbook	
Utility Bill (will only accept gas/oil, electricity, broadband, waste & TV licence)	
Correspondence from government departments	
Letter from Local Council confirming residency	

By signing this form, I confirm that I have reviewed originals of the documents indicated above in relation to the Vetting Applicant and that I have validated the identity and current address of the Vetting Applicant in accordance with the requirements of the National Vetting Bureau (Children and Vulnerable Persons) Act 2012 to 2016. I also confirm that copies of identification documents have been retained in accordance with the Data Protection Act 1988 to 2003.

Contact Person Signature: _____ **Date:** D D / M M / Y Y Y Y

FOR USE BY THE PARISH/SCHOOL/ORDER/AGENCY REQUESTING THE VETTING ONLY
Not to be completed by applicant

Your Ref:

Identity Document Validation Form

Section 1: Photographic ID

Is the photographic document, being relied upon, current and not expired?	[ ] Yes	[ ] No
Is the photograph on the document a true likeness for the vetting subject?	[ ] Yes	[ ] No
Is the photograph of high quality and clear?	[ ] Yes	[ ] No
Is the date of birth on the document matching the date provided on the NVB1 Form?	[ ] Yes	[ ] No
Is the name on the document exactly matching the name provided on the NVB1 Form?	[ ] Yes	[ ] No

Section 2: Proof of Address

Is the address document dated within six months of the consent date?	[ ] Yes	[ ] No
Is the address on the proof of address document matching the address provided on the NVB1 Form?	[ ] Yes	[ ] No
Is the vetting subject's name included on the proof of address document?	[ ] Yes	[ ] No
Is the document acceptable as proof of address document, as per Identity Document Schedule?	[ ] Yes	[ ] No

Section 3: NVB1 Form

Is the NVB1 form dated and signed by the vetting subject?	[ ] Yes	[ ] No
Is the role accepted to be relevant work or activity?	[ ] Yes	[ ] No
Is the Consent Box ticked?	[ ] Yes	[ ] No

Section 4: Document Confirmation

I have physically seen and retained/forwarded a copy of the following documents: (Please check all that apply)

Completed NVB1 Form (original)	[ ] Yes	[ ] No
Photographic ID document type: _____	[ ] Yes	[ ] No
Document Reference No. _____		
Proof of address document type: _____	[ ] Yes	[ ] No

If you have answered <u>No</u> to any of the above questions the vetting subject has not met the criteria to continue with the vetting process

Section 5: Validator Information

Validator's Name (PRINT NAME): _____

Validator's Signature: _____

Validator's Role: _____

Validator's Contact Number: _____

Date of Validation: _____