

Section 2 – Additional Information

Name Of Organisation:

MARY IMMACULATE COLLEGE, LIMERICK

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:

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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.

CHECK LIST

PLEASE ENSURE YOU HAVE ATTACHED THE FOLLOWING :

- PHOTOGRAPHIC ID (E.G. PASSPORT/DRIVING LICENCE – CERTIFIED COPY – SEE INSTRUCTIONS ABOVE)
- SECOND FORM OF ID (E.G. BIRTH CERTIFICATE/PUBLIC SERVICES CARD/ADDRESS VERIFICATION)
- SELF DECLARATION FORM
- OTHER IF APPLICABLE