Mary Immaculate College Coláiste Mhuire gan Smál South Circular Road, Limerick

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For Office Use on	ly

# Form NVB 1 <u>Vetting Invitation</u>

#### 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: D D	/	$\mathbf{M}$	Μ	/	Y	Y	Y	Y															
Email Address:																							
Contact Number:																							
Role Being Vetted For	: B	Α		E	D	U	С	A	Т	Ι	0	N		H	0	Μ	E						
	Е	С	0	N	0	М	Ι	С	S		W	0	R	K	Ι	N	G		W	Ι	Т	Н	
	С	Н	Ι	L	D	R	E	N		&		V	U	L	N	E	R	A	B	L	E		
	Р	Е	R	S	0	Ν	S																
Current Address:																							
Line 1:																							
Line 2:																							
Line 3:																							
Line 4:																							
Line 5:																							
Eircode/Postcode:																							

#### Section 2 – Additional Information

Name Of Organisation: MARY IMM

#### 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  $\Box$ 

Applicant's Signature:

Date: D D / M M / Y Y Y

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.

- PLEASE ENSURE YOU HAVE READ THE GUIDELINES DOCUMENT ATTACHED
- PLEASE ENSURE YOUR ID HAS BEEN CERTIFIED
- PLEASE CHECK YOUR EMAIL ONCE YOUR NVB1 FORM HAS BEEN PROCESSED AND COMPLETE THE ONLINE APPLICATION.

Declaration: I have read and understood these

Guidelines\_\_\_

AN GARDA SÍOCHÁNA



NATIONAL VETTING BUREAU

## PARENT/GUARDIAN CONSENT FORM (NVB 3)

#### **Applicant Details**

Forename(s):																		
Surname:																		
Date Of Birth:	D	D	/	М	М	/	Y	Y	Y	Y								

### **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	s):																									
Surname:																										
Relationsh	Relationship to applicant: Father:													Mother:						(	n:					
Address:	lress:																									
Line 1:																										
Line 2:																										
Line 3:																										
Line 4:																										
Line 5:																										
Eircode/Po	Eircode/Postcode:																									
PARENT/GUA ADDRESS:	RDL	AN	EMA	AIL		-	-		-			-														

## PARENT/GUARDIAN TELEPHONE NUMBER:

## Parent/Guardian Consent

#### **DATA PROTECTION NOTICE**

Personal data, including sensitive personal data, collected as part of this application, will be processed for the purposes of coordinating, monitoring and evaluating this application only. Data collected will be retained in line with MIC's Records Retention Schedule. All Personal Data collected is stored in strict accordance with current Data Protection Legislation. Your privacy is important to us.

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.

Parent/Guardian Signature:

