

sport ireland

The voice of Irish sport

Identification Form (for verification)

Section 1 – to be completed by the applicant	
Position applied for:	(state position within NGB or Club)
Club Name: (if any):	*
	-
Identification Details (to be verified by the Contac Section 2 as to what you need to provide)	t Person/Chairperson/Secretary or Children's Club Officer – see
Full Name:	Date of Birth:
Current Address:	Contact Phone no:
	Email:
Signed:	Date:
E-vetting - Declaration of Consent	
	National Vetting Bureau to the Liaison Person pursuant to the hal Vetting Bureau (Children and Vulnerable Persons) Acts 2012
to 2016.	iai vetting bureau (Children and Vulnerable Persons) Acts 2012
Cinnada	
Signed:	Date:
Section 2 – to be completed by Contact Person/C of suitable identification by the applicant	Chairperson/Secretary or Club Children's Officer on production
Proof of I.D.	
Identification of the applicant should be confirmed	d with the following documents;
Driving licence (with photograph) – stateIrish Passport	
 Utility bill with name and address as give Note: Copies of the I.D. documents must accomp 	
Signed:	
Print name:	

Return this form along with the Garda vetting form in envelope marked 'Private and Confidential' to: Elaine Mooney, Federation of Irish Sport, Irish Sport HQ, National Sports Campus, Blanchardstown, Dublin 15.

Federation of Irish Sport

Irish Sport HQ,

T +353 1 625 1155

www.irishsport.ie

AN GARDA SÍOCHÁNA



NATIONAL VETTING BUREAU

Guidelines for completing Vetting Form (NVB 2)

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 Form should be completed in ball point pen.

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.

Section 1 Personal Details

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

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

For Gender field please tick the appropriate box.

Please provide changes of names, if any, from birth i.e. name change due to marriage, deed poll, adoption.

For Place of Birth, please state County/State of birth as this is a mandatory field.

Please state Country Of Birth as this is a mandatory field.

Please state your Passport Number where applicable.

Please state your Mother's Maiden Name as stated on your birth certificate.

Any fields not applicable to the applicant should be marked "N/A".

Section 2 Addresses

Please enter all your previous addresses in chronological order.

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

Insure that all years from birth to present are included.

Allow one letter per box and an empty box between words.

For the "Years From" and "Years To", please specify the year only e.g.

It is permitted to have more than one address in any given year.

Section 3 Self Disclosed Criminal Record

Criminal record means a record of the person's convictions whether within or outside the state for any criminal offence together with any ancillary or consequential orders made pursuant to the convictions concerned or a record of any prosecutions pending against the person whether within or outside the state for any criminal offences or both.

A person shall not be obliged to provide details of any convictions to which Section 14A of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016 applies.

Section 4 Liaison Person

This section is not to be filled out by the applicant.

Section 5 Declaration of Consent

The applicant must confirm their understanding and acceptance of the statement by ticking the appropriate box where indicated. The date must be the present date of signing.

Section 6 Additional Addresses

See midelines for Section 2 Addresses

Vetting Form NVB 2

AN GARDA SÍOCHÁNA

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NATIONAL VETTING BUREAU

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National Sports Car Blanchardstown	npus	S								-						N	VB	Re	ferei	ice l	No:						
Dublin 15										F	I	S	0	0	1 .	- [-[-			
Note To Applicant Note To Applicant Return this form to the above named organisation. Do not send this form to the National Vetting Burea Under Sec 26(b) of the National Vetting Bureau (Chamake a false statement for the purpose of obtaining the second seco										drer	and	l Vu	lnera	able		sons) A	ets 2	012	to 20	016,	it i	s an	ı of	ffenc	ce to	,
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Also known as:																											
Name/Alias:																		T	T			Г	T	T	T		

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IRISH OLYMPIC HANDBALL ASSOCIATION

100 Point ID Check - OVER 18s

Applicants for Garda Vetting must satisfy the 100 point check for their application to be processed. Please submit one document from Table 1 accompanied by one or more from Table 2.

Any combination must be equal to or exceed 100 points.

	Table O	ne .	
Identificati	on	Score	Tick
Irish drivin learner pe credit card		80	
Irish Public Card	Services	80	
Passport (f	rom country nip)	70	
Irish certifi naturalisat		50	
Birth certif	icate	50	
Garda Nati Immigratio (GNIB) card	n Bureau	50	
National Id for EU/EEA citizens	lentity Card /Swiss	50	
Irish drivin learner per paper form		40	
Employme	nt ID		
	ID card issued by employer (with name and address)	35	
	ID card issued by employer (name only)	25	
	two years)		
	Confirming name and address	35	

Table Two	
Identification	Score Tick
P60, P45 or Payslip (with home address)	35
Utility bill e.g. gas, electricity, television, broadband (must not be less than 6 months old. Printed online bills are acceptable. Mobile	35
Public services card/social services card/medical card	25
With photograph	40
Bank/Building Society/Credit Union statement	35
Credit/debit cards/passbooks (only one per institution)	25
National age card (issued by An Garda Siochana)	25
Membership card	
Club, union or trade, professional bodies	25
Educational institution	25
Correspondence	
From an educational institution/SUSI/CAO	20
From an insurance company regarding an active policy	20
From a bank/credit union or government body or	20
state agency	



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										
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:									
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.										
Parent/Guardian Signature: Date: D D / N	I M / Y Y Y Y									