

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



Tel: +353 61 204962
 Web: www.mic.ul.ie

Your Ref:

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For office use only

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:	D	D	/	M	M	/	Y	Y	Y	Y																
Email Address:																										
Contact Number:																										
Role Being Vetted For:	R	E	S	E	A	R	C	H		M	A	S	T	E	R	S		W	O	R	K	I	N	G		
	W	I	T	H		C	H	I	L	D	R	E	N		&											
	V	U	L	N	E	R	A	B	L	E		P	E	R	S	O	N	S								

Current Address:

Line 1:																									
Line 2:																									
Line 3:																									
Line 4:																									
Line 5:																									
Eircode/Postcode:																									

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:

/

/

/

/

/

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

GUIDELINES FOR COMPLETING VETTING INVITATION FORM (NVB 1)

You must read the following guidelines before completing this form.

- The form must be completed by you in full using **BLOCK CAPITALS** and your writing must be clear and legible. Please use a ballpoint pen.
- The original of this form with your signature must be submitted to the College (a photocopy is not acceptable).
- **Your Form must be accompanied by two different types of ID**
- **All ID documentation must be Certified**
- **Certified Copies of ID: ID must be certified by one of the following: a member of An Garda Síochána, a Commissioner for Oaths or a practicing Solicitor.**
- A certified copy of an Irish passport or an Irish driver's licence/learner permit along with another form of ID is acceptable.
- Details of other acceptable ID documents can be found on the College website: <http://www.mic.ul.ie/adminservices/studentsservices/Pages/GardaVetting.aspx>

SECTION 1 - Personal Details

- Insert your information, allowing one block letter per box.
- For date of birth field, allow one digit per box. Please distinguish between zero and O, S and 5 and I and l (L), where applicable. Allow one character/symbol per box including the dot in your email address.
- A working email address is required as the NVB invitation to the e-vetting website will be sent to you here.
- The current address means your full-time permanent address and not temporary or term-time accommodation.

NB – FOLLOWING SUBMISSION OF THIS DOCUMENT PLEASE REMEMBER TO CHECK YOUR EMAIL ACCOUNT AND SPAM FOLDER AS THE NVB EMAIL CONTAINING A LINK TO YOUR ON-LINE GARDA VETTING APPLICATION WILL BE SENT TO YOU HERE.

SECTION 2 – Additional Information

Please remember to sign the application form at Section 2 and please remember to tick the box provided.

WARNING

FAILURE TO COMPLETE THIS FORM CORRECTLY MAY DELAY YOUR COLLEGE REGISTRATION/APPOINTMENT AND WHERE APPLICABLE MAY RESULT IN PLACEMENTS BEING POSTPONED.

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.

SELF-DECLARATION ON CRIMINAL OFFENCES

Post	
Forename	
Surname	
Address	

Questionnaire on criminal offences:

1. Have you ever been convicted of a criminal offence in Ireland or in any other country¹?

YES NO (Please circle the appropriate response)

1. Have you ever been charged with a criminal offence in Ireland or in any other country¹?

YES NO (Please circle the appropriate response)

In the event that you have answered yes to either of the above questions please provide details below:

Date	Court	Offence	Court Outcome

¹ This does not apply to offences under the Road Traffic Acts (or similar legislation in other countries).



SELF-DECLARATION ON CRIMINAL OFFENCES

By signing below, you acknowledge that the College may make enquiries to check the accuracy of the information provided and that the College reserves the right to carry out criminal background checks on all applicants. Please note that any person being offered a position by the College will be subject to Garda/Police Vetting.

Mary Immaculate College Limerick, reserves the right not to proceed with your application for if you provide any information in this questionnaire which, in the reasonable opinion of the College, renders you unsuitable for same.

If you provide any false or misleading information in this questionnaire, Mary Immaculate College Limerick reserves the right not to proceed with your application or to withdraw any offer made or, where you have already commenced a role with the College, to terminate same.

Signed: _____

Date: _____

Please print name: _____

This form, once it has been completed and signed, should be returned directly to the Garda Vetting Office, Student Academic Administration, Room 112, Mary Immaculate College, South Circular Road, Limerick.

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