

Return completed form to:

Vetting Administration  
 Bishop's House  
 PO Box 40  
 Summerhill  
 Wexford  
 Co. Wexford

Form NVB 1

# Diocese of Ferns

## Vetting Invitation Form



**Section 1 – Personal Information (To be completed by Vetting Applicant)**

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): 

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Surname: 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Date Of Birth: 

D	D	/	M	M	/	Y	Y	Y	Y										
---	---	---	---	---	---	---	---	---	---	--	--	--	--	--	--	--	--	--	--

Email Address: 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(An invitation to the e-vetting website will be sent to you to this email address)

Contact Number: 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Role Being Vetted For: 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Current Address:

Line 1: 

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Line 2: 

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Line 3: 

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Line 4: 

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Line 5: 

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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: 

D	D	M	M	Y	Y	Y	Y
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**Section 2 – Confirmation of Organisation (To be completed by Parish/School)**

Name of Contact Person: Marie Rossiter Gargan - Principal  
*(Must be Priest/Principal/Chairperson of the Board of Management of School)*

Name of Parish/School: Scoil Mhuire, Our Lady's Island

Full Address: Broadway, Co Wexford

Tel No: 053 9131113

School/Parish Email Address: 

p	r	i	o	m	h	o	i	d	e	o	l	i	n	s	@	g	m	a	i	l	.	c	o	m
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*(All vetting disclosures will be sent to this email address)*

Has the applicant provided documentation to validate their identity? (See reverse of page) Please tick box:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_