National College of Ireland
Mayor Street
IFSC
Dublin 1
D01 K6W2

Your Ref: (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(s):

Surname:

Date Of Birth: D D / M M / Y Y Y Y

Email Address:

Contact Number:

Role Being Vetted For:

Current Address:

Line 1:

Line 2:

Line 3:

Line 4:

Line 5:

Eircode/Postcode:

Section 2 – Additional Information

Name Of Organisation: National College of Ireland

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, to confirm I have read above declaration.**

Applicant's Signature:

Date: D D / M M / Y Y Y Y