

Association of Community and Comprehensive Schools  
Cumann na Scoilann Pobail agus Cúimsíochán

### **Guidelines for completing Electronic Vetting Invitation Form (NVB1)**

- Completing this Invitation Form is only the **first stage** of the vetting process
- Type the required information onto the form
- All fields are mandatory except Middle Name and Eircode
- The email address that is inputted will receive a vetting form for completion from [evetting.donotreply@garda.ie](mailto:evetting.donotreply@garda.ie)
- Role being vetted for: This must be clearly stated.

It must be obvious that this is a relevant work or activity where a necessary and regular part of that work or activity consists mainly with the applicant having access to, or contact with, children or vulnerable persons. E.g. a Caretaker in a second level school.

If you are involved in assisting the school with coaching, mentoring, counselling, training or teaching children or vulnerable persons. E.g. Volunteer Coach of the football team in the school.

Generic terms such as "Volunteer" will not suffice as it doesn't describe the work being done.

- Current Address means the address you are now living at.
- The address fields should be completed in full. No abbreviations.
- Don't forget to **click on box**
- Print out the form or return the form to the school for printing, whichever has been agreed.
- Sign the form. Applicant's signature should be legible. It should not be an abbreviated signature.
- The Date on the form is the date that the form has been completed and submitted to the School Principal.

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**Invitation Form NVB 1  
for students aged between 16 & 18  
completing work experience**

**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: DD/MM/YYYY			/			/					
Email Address: of Parent/Guardian											
Confirm Email Address: of Parent/Guardian											
Contact Number:											
Role Being Vetted For: Title of Role must be clearly stated (e.g. teacher assistant, childcare worker)											
Current Address:											
Line 1:											
Line 2:											
Line 3:											
Line 4:											
Line 5:											
Eircode/Postcode:											

**Section 2 – Additional Information**

Name Of School:

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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 click on box**

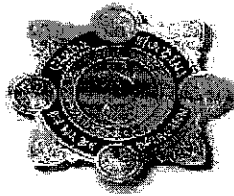
Applicant's  
Signature:

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Date:

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Note: Applicant should type the requested information onto the form, print the form, sign the form and present to the School Principal. The school should return the NVB 1 Form, NVB 3 Form and Confirmation Form to the Association of Community and Comprehensive Schools at the above address. **An invitation to the eVetting website will then be sent to the Parent/Guardian's email address provided above.**



**PARENT/GUARDIAN CONSENT FORM (NVB 3)**

**Applicant Details**

Forename(s):

Surname:

Date of Birth:  /  /

DD/MM/YYYY

**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:

Email Address:

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:  /  /