Limerick and Clare Education and Training Board, Marshal House, Dooradoyle Road, Co. Limerick.



Y	our Ref:	
<u> </u>		

Form NVB 1

Vetting Invitation

Section 1 – Personal Information

Under Sec 26(b offence to make				_							Acts	201	12 to	o 20	16,	it is	an
Forename(s):																	

Middle Name:																		
Surname:																		
Date Of Birth:	D	D	/	M	M	/	Y	Y	Y	Y								
Email Address:																		
Contact Number	r:																	
Role Being Vett	ed F	or:																
School or Centr	e:																	
Current Addres	<u>ss</u> :	'																
Line	1:																	
Line	2:																	
Line	3:																	
Line	4:																	
Line	5:																	

Elrcode/Postcode:													

Section 2 – Additional Information								
Name Of Organisation:	Of Organisation: Limerick and Clare ETB							
I have provided documenta	tion to validate my identity as required <u>and</u>							
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							

NOTE: PLEASE RETURN THIS FORM TO YOUR SCHOOL OR CENTRE. An invitation to the e-vetting website will then be sent to your Email address.