Garda Vetting ID Validation Form

Child Welfare, Football Association of Ireland, National Sports Campus, Abbotstown Dublin 15

FAI Proof of Identification for Garda Vetting

Before we can process your Garda Vetting Form, it is a Garda Vetting requirement that you complete an Identification Check. This form must be signed by an Authorised person in Section 2. This form along with copies of your ID and your fully completed Garda Vetting form should be sent to Child Welfare in the Football Association of Ireland.

Section 1 (to be completed by Applicant) ALL FIELDS ARE MANDATORY - FORM WILL BE RETURNED IF INCOMPLETE

Identification Details (to be verified by an Authorised Person)

Full Name: _____

Current Address: _____

Date of Birth: _____

Email: _____ **Phone No:** _____

Role or Position, being Vetted for: _____

Club: _____

League: _____

National Body and/or Provincial Association: _____

Section 2 (to be signed by an Authorised Person)

I have checked the identity of the applicant in the attached Garda Vetting application form against the original documents provided by the applicant to me. I have marked these on page 2 and I confirm that this is the person applying for Garda Vetting. I have informed the applicant that this information will be passed to the FAI and they have agreed to share their personal information with the FAI and appropriate, relevant organisations.

Name: _____

Signed: _____

Role (See section 3): _____

Club (if applicable): _____

League (if applicable): _____

National Body (if applicable): _____

Provincial Association (if applicable): _____

Section 3 (gather your original documents to a minimum value of 100 points, see list overleaf)

The following Authorised Persons may verify applicant's identification and sign this form:

- Chairman (Designated Child Welfare Officer)
- Children's Officer (Designated Liason Officer)
- Secretary
- FAI Staff
- If not a member of the FAI, the Authorised person may be one of the following: Garda | School Principal | Doctor | Solicitor | Barrister | Commissioner for Oaths

ORIGINAL ID PROOFING MUST BE VERIFIED, IN PERSON, BY AN AUTHORISED PERSON

WARNING: It is an offence to knowingly make a false statement for the purpose of obtaining, or enabling another person to obtain a Disclosure.

Return Completed ID Validation form (along with copies of ID) and Garda Vetting form in envelope marked 'Private and Confidential' to:
Child Welfare, Football Association of Ireland, National Sports Campus, Abbotstown Dublin 15

List of Acceptable Documents (100 points minimum required)

Identification Document	Points	Please Tick
Irish Driving Licence	80	
Irish Public Services Card	80	
Passport (from country of citizenship)	70	
Irish Certificate of Naturalisation	50	
Birth Certificate	50	
Garda National Immigration Bureau (GNIB) Card	50	
National Identity Card for EU | EEA | Swiss Citizens	50	
Irish Driving Licence or Learner Permit (old paper format)	40	
Employment ID		
▪ ID card issued by Employer (with name and address)	35	
▪ ID card issued by Employer (name only)	25	
Letter from Employer (within last two years)		
▪ Confirming Name and Address	35	
P60 | P45 or Payslip (with home address)	35	
Utility bill e.g. gas, electricity, television, broadband (must not be less than 6 months old. Printed online bills are acceptable. Mobile phone bills are not acceptable)	35	
Public Services Card | Social Services Card | Medical Card	25	
▪ With Photograph	40	
Bank/Building Society/Credit Union Statement	35	
Credit | Debit Cards | Passbooks (only one per institution)	25	
National Age Card (issued by An Garda Siochana)	25	
Membership Card		
▪ Club, Union or Trade, Professional Bodies	25	
▪ Educational Institution	25	
Correspondence		
▪ From an Educational Institution | SUSI | CAO	20	
▪ From an Insurance Company regarding an active policy	20	
▪ From a Bank/Credit Union or Government Body or State Agency	20	
CHILDREN UNDER 18 YEARS (any one of the following)		
Passport (from country of citizenship)	100	
Birth Certificate	100	
Written statement by the Principal confirming attendance at educational institution on a letter head of that institution	100	
RECENT ARRIVAL IN IRELAND (less than 6 weeks)		
Passport	100	
Vetting Subject is unable to achieve 100 points**		
Affidavit witnessed by a Commissioner for Oaths	100	
TOTAL POINTS		

AN GARDA SÍOCHÁNA

NATIONAL VETTING BUREAU

Guidelines for completing Vetting Form (NVB 2)

Please read the following guidelines before completing this form.

Miscellaneous

The Form must be completed in full using **BLOCK CAPITALS** and writing must be clear and legible.

The Form should be completed in ball point pen.

Photocopies will not be accepted.

All applicants will be required to provide documents to validate their identity.

If the applicant is under 18 years of age, a completed NVB 3 - Parent\Guardian Consent Form will be required.

Section 1 Personal Details

Insert details for each field, allowing one block letter per box.

For Date of Birth field, allow one digit per box.

For Gender field please tick the appropriate box.

Please provide changes of names, if any, from birth i.e. name change due to marriage, deed poll, adoption.

For Place of Birth, please state County/State of birth as this is a mandatory field.

Please state Country Of Birth as this is a mandatory field.

Please state your Passport Number where applicable.

Please state your Mother's Maiden Name as stated on your birth certificate.

Any fields not applicable to the applicant should be marked "N/A".

Section 2 Addresses

Please enter all your previous addresses in chronological order.

The address fields should be completed in full, including Eircode/Postcode. No abbreviations.

Insure that all years from birth to present are included.

Allow one letter per box and an empty box between words.

For the "Years From" and "Years To", please specify the year only e.g.

1	9	6	3

It is permitted to have more than one address in any given year.

Section 3 Self Disclosed Criminal Record

Criminal record means a record of the person's convictions whether within or outside the state for any criminal offence together with any ancillary or consequential orders made pursuant to the convictions concerned or a record of any prosecutions pending against the person whether within or outside the state for any criminal offences or both.

A person shall not be obliged to provide details of any convictions to which Section 14A of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016 applies.

Section 4 Liaison Person

This section is not to be filled out by the applicant.

Section 5 Declaration of Consent

The applicant must confirm their understanding and acceptance of the statement by ticking the appropriate box where indicated. The date must be the present date of signing.

Section 6 Additional Addresses

See guidelines for Section 2 Addresses.

Vetting Form NVB 2

AN GARDA SÍOCHÁNA

NATIONAL VETTING BUREAU

Organisation Address:

Football Association of Ireland FAI
National Sports Campus
Abbotstown
Dublin 15

Your Ref No:

NVB Reference No:

F A I 0 0 1 - -

Note To Applicant

- Return this form to the above named organisation.
- Do not send this form to the National Vetting Bureau or to any Garda Station.
- 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.

Section 1 – Personal Information (to be completed by Applicant)

Forename(s):

Middle Name(s):

Surname:

Gender: Male: ☐ Female: ☐

Is your Name at Birth the same as above? Yes: ☐ No: ☐ If No, please provide details:

Forename(s):

Middle Name(s):

Surname:

Date of Birth: D D / M M / Y Y Y Y

Place of Birth:

Country Of Birth:

Passport No:

Mother's Maiden Name:

Current Address: Year From: Y Y Y Y Year To: PRESENT

Line 1:

Line 2:

Line 3:

Line 4:

Line 5:

Eircode/Postcode:

Also known as:

Name/Alias:

Section 2 – Addresses (to be completed by Applicant)

Please enter all your previous addresses in chronological order. Please enter your **full** postal address.

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

Year From: Y Y Y Y
Year To: Y Y Y Y

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

Year From: Y Y Y Y
Year To: Y Y Y Y

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

Year From: Y Y Y Y
Year To: Y Y Y Y

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

Year From: Y Y Y Y
Year To: Y Y Y Y

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

Year From: Y Y Y Y
Year To: Y Y Y Y

For additional addresses, refer to Section 6. If used, please tick here ☐

Application valid on the commencement of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016.

Section 3 – Self Disclosed Criminal Record (to be completed by Applicant)

Have you a criminal record in Ireland or elsewhere? Yes ☐ No ☐ (If Yes, please provide details)

Date	Court Name	Offence Summary	Court Outcome / Cases Pending / Appeals

Section 4 – Liaison Person (to be completed by Liaison Person)

Organisation: **Football Association of Ireland FAI**

Authorised Liaison Person Details:

Forename: V i n c e n t

Surname: O ' F l a h e r t y

Liaison Reg No:

The applicant has provided documentation to validate their identity in accordance with the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016. Please tick box ☐

Liaison Person Signature

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

Role Being Vetted For:

Is the application submitted on behalf of an Affiliate Organisation: Yes: ☐ No: ☐

If Yes, please state Affiliate Organisation:

Section 5 – Declaration Of Consent (to be completed by Applicant)

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 Signature:

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

Section 6– Additional Addresses (to be completed by Applicant)

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

Year From: Y Y Y Y
Year To: Y Y Y Y

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

Year From: Y Y Y Y
Year To: Y Y Y Y

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

Year From: Y Y Y Y
Year To: Y Y Y Y

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

Year From: Y Y Y Y
Year To: Y Y Y Y

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

Year From: Y Y Y Y
Year To: Y Y Y Y

If this page does not allow enough space for addresses, please copy this page and number it below:

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