

Inviter Form (GV1)

Please fill in this form completely using CAPITAL LETTERS only.



SECTION 1: PERSONAL INFORMATION

Under Section 26 (B) of the National Vetting Bureau (Children and Vulnerable Persons) Act 2012 to 2016, it is an offence to make a false statement for the purpose of obtaining a vetting disclosure.

Forename: _____

Middle Name(s): _____

Surname: _____

Date of Birth: ___ / ___ / ____ (dd/mm/yyyy)

Email Address: _____

Contact Phone Number: _____

Current Full Address: _____

SECTION 2: ROLE

Volunteer/Employment role you are being vetted for (e.g., Children's Ministry Leader, Elder):

Name of Church / Company / Group which you will be working for or volunteering on behalf of:
(e.g., Dublin West Seventh-day Adventist Church, Galway Seventh-day Adventist Church)

SECTION 3: DECLARATION

I have provided documentation to validate my identity as required, and I consent to making this application in accordance with Section 13 (4)(e) of the National Vetting Bureau (Children and Vulnerable Persons) Act 2012 to 2016. I am aware that an invitation to the online vetting website will issue to my email address and that I must act within 30 days.

Applicant's signature: _____

Date: ___ / ___ / ____ (dd/mm/yyyy)