

Parental/Legal Guardian Consent Form (GV2)

Please fill in this form completely using CAPITAL LETTERS only.



SECTION 1: APPLICANT DETAILS

Forename: _____

Middle Name(s): _____

Surname: _____

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

SECTION 2: PARENTAL/LEGAL GUARDIAN DETAILS

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: _____

Relationship to Applicant (tick one that applies):

- Father
- Mother
- Legal Guardian

Current Full Address: _____

SECTION 3: PARENTAL/LEGAL GUARDIAN CONSENT

I, being the Parent/Legal 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) Act 2012 to 2016.

Parent/Legal Guardian signature: _____

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