Bord Oideachais & Oiliúna
LUIMNIGH & AN CHLÁIR
LIMERICK & CLARE
Education & Training Board

Your Ref:

Form NVB 1

Vetting Invitation

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:	D D / M M / Y Y Y Y
Email Address:	
Contact Number:	
Role Being Vetted For:	**SCHOOL SUPERVISOR TEMP**
School:	

Current Address:

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

Section 2 – Additional Information

Name Of Organisation:	**Limerick and Clare ETB**

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 ✔ tick box ☐

Applicant's Signature:

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

NOTE: On receipt of this completed form an invitation to the e-vetting website will be sent to your email address