An Garda Síochána Use Only **Reference No.:**



An Garda Síochána GARDA VETTING APPLICATION FORM

NOTE TO APPLICANT

- ➤ The application form must be completed in full using BLOCK CAPITALS (Please state N/A if details are not applicable)
- Writing must be clear and legible
- > Return the completed form to Swim Ireland, Irish Sport HQ, National Sports Campus, Blanchardstown, Dublin 15
- Do not send this form to The Garda Central Vetting Unit or to any Garda Station

To be completed by the Applicant

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SURNAME:			PREVIOUS NAME (if any):					
FORENAME:			ALIAS:					
DATE OF BIRTH:(dd/mm/yy)			PLACE/CITY OF ORIGIN:					
HAVE YOU EVER CHANGED YOUR NAME? Yes No								
IF YES	PLEASE STATE FOR	MER NAME:						
				_				
Please state all addresses from year of birth to present date								
House	Street	Town	County	Post	Country	Year	Year	
No.				Code		From	To	

Please state all addresses from year of birth to present date							
House No.	Street	Town	County	Post Code	Country	Year From	Year To

		Yes Plea	se provide details below:
DATE	COURT	OFFENCE	COURT OUTCOME
o furnish to Sor elsewhere, State or elsew	gned who have applied for a p Swim Ireland a statement that	t there are no convictions recorder ons and / or prosecutions, successi	hereby authorise An Garda Síochána d against me in the Republic of Ireland ful or not, pending or completed, in the
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Identification Form (for verification)



Section 1 – to be completed by the applicant

Position:	(within Swim Ireland or Club)				
Club:	Membership no				
Identification Details (to be verified by the a Responsib	le Person – see Section 2 as to what y	you need to	o provide)		
Full Name:	Any previous surname:				
Current Address:	Date of Birth:				
	Telephone No.(s):				
List experience/involvement of working with young chi	— ildren in a voluntary or professional c	apacity:			
Have you signed the relevant Code of Conduct for your Do you agree to abide by the Child Welfare Guidelines		Yes	No No		
Have you ever been asked to leave a sporting organisal (If you have answered yes, we will contact you in confidence)		Yes	No		
Signed:	Date:				
Print Name:					
Section 2 – to be completed by Chairperson/Designates suitable identification by the applicant	d Person or Responsible Person (if no	t in Club) o	on production of		
Type of identification seen:					
Signed:	Date:				
Print name:	Position:				
(Responsible Person = Guard/Principal/Manager/Doctor/Soli	icitor)				

Notes for Person verifying identification

You should only sign the form if you are confident that the information verifies the identification of the person. Identification may be confirmed with **ONE** of the following documents:

Driving licence (with photograph) – state issuing country

Passport – state nationality

Utility bill with name and address as given above

Return with Garda vetting form in envelope marked 'Private and Confidential' to: Kate Hills, Swim Ireland, Irish Sport HQ, National Sport Campus, Blanchardstown, Dublin 15



Quick guide to completing the Vetting Form and Identification Form

The requirements described below are those required by the Garda Vetting Unit, incomplete or illegible forms will be returned directly to the applicant.

Vetting Application Form

- 1. Use **BLOCK CAPITALS** to complete all sections
- 2. Fill in your **SURNAME**, **PREVIOUS NAME** if any (e.g. maiden name) and full **FORENAME**(s) do not put initials full names must be entered
- 3. Fill in any **ALIAS** you may use (this means any other name you might commonly be known by)
- 4. Complete your DATE of BIRTH using the format dd/mm/yyyy
- 5. Write your **PLACE OF ORIGIN** (this is the town, town-land or city where you were born)
- 6. Tick **YES** or **NO** where asked **HAVE YOU EVER CHANGED YOUR NAME?** (If YES then write your former name(s) in the space provided).
- 7. State **ALL YOUR ADDRESSES** (Irish and foreign) from **your year of birth up to your current address** indicating the years from and to spent at each of the addresses on your list

 Please ensure the list is complete and in sequence covering all the years from your birth year to the present day
- 8. Tick **YES** or **NO** where asked 'Have you ever been convicted of an offence in the Republic of Ireland or elsewhere?' (If you tick YES you must then write in the details of your offence in the space provided)
- Fill in the position you have applied for and SIGN and DATE the form in the DECLARATION OF APPLICANT section; if your signature contains an initial letter you must state what name the initial letter stands for

Identification Form

- 1. Complete all sections your address and information will be checked against the information you have supplied on the Vetting Application form
- 2. Ask a responsible person (Chairperson/Designated Person or someone with a similar standing if outside the club) to verify your identification and sign Section 2.

When all is completed

Put the both the completed and signed forms (vetting application and identification forms) in sealed envelope and hand to your club or send directly to Kate Hills, Swim Ireland, Irish Sport HQ, National Sport Campus, Blanchardstown, Dublin 15