

for completing Vetting Invitation Form (NVB 1B)

Please read the following guidelines before completing this form

Miscellaneous

This is an application for a Criminal Record Check in accordance with Article 11 National Civil Aviation Security

In circumstances where an **Enhanced Background Check** is required, the data contained in this application will also be forwarded to the Garda National Crime & Security Intelligence Service for processing.

The Garda National Vetting Bureau will issue a Criminal Record Disclosure to the Central Processing Authority

Separately, the Garda National Crime & Security Intelligence Service will issue a Security Check Disclosure result to the Central Processing Authority

The Central Processing Authority will advise you if you require an Enhanced Background check

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

Parent\Guardian. This being the case, the applicant must provide their Parent\Guardian Email address on the NVB If the applicant is under 18 years of age, a completed NVB 3(a) - Parent/Guardian Consent Form will be required note that where the applicant is under 18 years of age the electronic correspondence will issue to the

Personal Details

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

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

vetting website will be sent to this address. Please fill in your E-mail Address, allowing one character/symbol per box. This is required as the invitation to the e-

Please allow one digit per box for your contact number.

The Current Address means the address you are now living at

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

Kole Applied for

The role being applied for must be clearly stated. Generic terms such as "Volunteer" will not suffice

Declaration of Application

The applicant must confirm their understanding and acceptance of the two statements by signing the application form at Section 2 and ticking the box provided

Criminal Record is defined as

"criminal record", in relation to a person, means-

- criminal offences, together with any ancillary or consequential orders made pursuant to the convictions concerned, a record of the person's convictions, whether within or outside the State, for any
- the State, for any criminal offence, record of any prosecutions pending against the person, whether within or outside

under the law of the State, where the act or omission constituting the offence under the law of the other state would if committed in the State, constitute an offence under the law of the State; "criminal offence" includes an offence under the law of a state other than the State that corresponds to an offence

Shannon Airport Authority Shannon Airport, Shannon, Co Clare.



	Your
	r Ref:

Form NVB 1(B)

Vetting Invitation

Forename(s): Middle Name: Surname: Date Of Birth: Email Address: Contact Number: Role Being Vetted For: Current Address:			N		K		\times	×																
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Section 2 – Additional Information Name Of Organisation:	=	nfo	rma	tior																				
I confirm that I have provided documentation to validate my identity as required and I hereby authorise the Garda National Vetting Bureau to furnish to the above Organisation a statement that there is no Criminal Record information to disclose in respect of me in Ireland or elsewhere, or a statement of Criminal Record information in Ireland or elsewhere, as the case may be.	ovide arda natio	ed do a Na a no ewh	ocum tion: disc	lentz	ation etting in r	to v g Bu espe	alid: reau ct of ay b	ate n i to f i me	ny id Wrni in I	lenti sh ta rela	ty as o the nd o	req abo	uire ve (sewh	d an)rga ere,	d nisa or a	tion sta	a sta	atem ent c	ent of C	that	ther	re is	no ord	
In circumstances, where an Enhanced Background Check is required, I authorise the Garda National Crime & Security Intelligence Service to furnish to the above Organisation a Security Check Disclosure. Please tick box	an J urnis	Enha h to	the :	d Ba	ckgr e Or	gani	d Ch isati	eck on a	is re Secu	quir	ed, I	aut ck I	hori)iscl	se th osur	e Ga	ease	Nat	iona		ime	S S	ecur	ity	
Applicant's Signature:												Dat	<u></u>	D	ם	$\overline{}$	3	\leq	Date: DD/MM/Y	Y	Y	~	~	

 $\underline{\text{Note}}$: Please return this form to the above named organisation. An invitation to the e-vetting website will then be sent to your Email address.