WICKLOW COUNTY COUNCIL - APPLICATION FORM
Comhairle Chontae Chill Mhantáin – Foirm Iarratais

Temporary Beach Lifeguard 2020

Aras an Chontae
Cill Mhantáin

Telephone:
0404-20236

County Buildings
Wicklow

Fax:
0404-67792

STATE WHAT BEACHES YOU WILL BE AVAILABLE FOR:

_____

All questions must be answered in the candidates own handwriting

APPLICANT'S FULL NAME (Block Capitals): _____

ADDRESS:_____

_____

DATE OF BIRTH:_____ **P.P.S. NO.** _____

CONTACT TELEPHONE NO: _____

CONTACT EMAIL: _____

WATER SAFETY QUALIFICATION AND DATE ISSUED: (Please see notes on reverse side)

_____

_____

PREVIOUS WATER SAFETY SWIMMING AND LIFESAVING EMPLOYMENT AND EXPERIENCE: _____

_____

_____

_____

CURRENT OCCUPATION / STUDENT STATUS: (State school/college year just completed)

_____

_____

_____

MEDICAL HISTORY: *Please state with dates any serious illness or disabilities. If none, say no.*

_____

_____

I declare that the foregoing information and particulars are true.

SIGNATURE OF APPLICANT: _____ **DATE:** _____

P.T.O.

NOTES

1. Please submit completed Application Form and all items on the checklist.
2. Beaches patrolled are: Bray, Greystones South Beach, Wicklow Harbour, Brittas Bay North, Brittas Bay South, Arklow South Beach
3. By the date of interview candidates **must** hold as a **minimum** requirement, a current in date (not more than two years old and must remain in date for the season, until September 2020) National Beach Lifeguard Award from Irish Water Safety or equivalent as recognised by the International Lifesaving Federation (ILS).
4. Have knowledge of the use and care of surf rescue and other lifesaving equipment.
5. Have a thorough knowledge of resuscitation (incl. BLS and CPR) and basic first aid.
6. Candidates will be required to undergo a practical Beach Lifeguard examination/test in basic life support (BLS), swimming ability, lifesaving techniques and a theory test conducted by Irish Water Safety. The test will likely take place at Coral Leisure Swimming Pool, Wicklow Town on Thursday 16th April, 2020. Please be aware that the time and location is subject to change and the alternative location may be Crumlin Swimming Pool, Pearse Park,Windmill Road, Crumlin, Dublin 12. All Applicants **must** attend for this examination/test.
7. Candidates **must** be at least 17 years of age on 1st May 2020.
8. The Garda Vetting process will be carried out in respect of all Applicants.
9. **Original** Certificates to prove the above requirements **must** be submitted with your completed application form. Certificates will be returned at interview.
10. **Completed Application Forms must be received by Theresa O'Brien, Senior Executive Officer, Planning, Development & Environmental, Wicklow County Council, County Buildings, Wicklow not later than 4.00 p.m. on Friday 27th March, 2020.**

CHECKLIST

1. Completed Application Form
2. Submission of National Beach Lifeguard Award Certificate
3. ASC10 Form
4. New Employees Form (Yellow Sheet)
5. Bank Mandate Form (Yellow Sheet)
6. Declaration under Section 51 Form
7. Garda Vetting Application Form with accompanying proofs of identity and address
8. Pass Pool Test

ASC10

Additional Superannuation Contribution

Employment Declaration Form

To be completed by an employee on commencement of employment in a Public Service body

With effect from 1 January 2019, all employees are required to declare their overall personal public service pension status with regard to any public service pension scheme or pension arrangement[1]. The following details are required to be completed and returned immediately to the payroll department.

MAIN EMPLOYMENT

a. Is **THIS** employment your MAIN[2] public service employment? — YES ☐ NO ☐

i. *Are you a member of a public service pension scheme in respect of THIS employment?* — YES ☐ NO ☐

ii. *If no, do you receive a payment in lieu of pension in respect of THIS employment?* — YES ☐ NO ☐

iii. *If no, have you an entitlement to a retirement gratuity in respect of THIS employment?* — YES ☐ NO ☐

iv. *If no, do you have any other pension arrangement in respect of this employment?* — YES ☐ NO ☐

If yes, please give further details: ☐

b. Do you have any other employment in the Public Service? — YES ☐ NO ☐

If yes, please provide details of subsidiary employments overleaf or on additional sheets as required

I certify the foregoing information to be correct to the best of my knowledge and belief, and I undertake to notify the Payroll Department at _____, immediately of any change affecting the details given above/overleaf. I understand that if I am a member of a Public Service pension scheme, receive a payment-in-lieu of pension, am entitled to a retirement gratuity, or have any other pension arrangement that I am liable for the additional superannuation contribution at the appropriate rate.

Signature: _____ Date: D D M M Y Y Y Y

NAME [in block capitals] : _____ PPS:

Employer: _____

IMPORTANT NOTE: The above information is required in order to process your payroll. Failure to complete this form **correctly** may result in non-payment of wages/salary and/or an **underpayment of ASC.**

1 **Note: A pension arrangement as certified by the Minister may include membership of a public service pension scheme, payment-in-lieu of pension, a retirement gratuity payable on retirement or any other such pension arrangement ;**

2 **Note: A MAIN employment shall be the main public service employment as nominated by the individual for the purposes of the additional superannuation contribution;**

PLEASE COMPLETE THIS CERTIFICATE IN BLOCK CAPITALS

Additional Superannuation Contributon - Employment Declaration Form

SUBSIDIARY EMPLOYMENTS

Name [in block capitals]: _____ PPS No. | | | | | | | | | |

SUBSIDIARY EMPLOYMENT # 1

Employer: | | | | | | | | | | |

i.	*Are you a member of a public service pension scheme in respect of this subsidiary employment?*	YES		NO	
ii.	*If no, do you receive a payment in lieu of pension in respect of this subsidiary employment?*	YES		NO	
iii.	*If no, have you an entitlement to a retirement gratuity in respect of this subsidiary employment?*	YES		NO	
iv.	*If no, do you have any other pension arrangement in respect of this subsidiary employment?*	YES		NO	

If yes, please give further details:

SUBSIDIARY EMPLOYMENT # 2

Employer: | | | | | | | | | | |

i.	*Are you a member of a public service pension scheme in respect of this subsidiary employment?*	YES		NO	
ii.	*If no, do you receive a payment in lieu of pension in respect of this subsidiary employment?*	YES		NO	
iii.	*If no, have you an entitlement to a retirement gratuity in respect of this subsidiary employment?*	YES		NO	
iv.	*If no, do you have any other pension arrangement in respect of this subsidiary employment?*	YES		NO	

If yes, please give further details:

SUBSIDIARY EMPLOYMENT # 3

Employer: | | | | | | | | | | |

i.	*Are you a member of a public service pension scheme in respect of this subsidiary employment?*	YES		NO	
ii.	*If no, do you receive a payment in lieu of pension in respect of this subsidiary employment?*	YES		NO	
iii.	*If no, have you an entitlement to a retirement gratuity in respect of this subsidiary employment?*	YES		NO	
iv.	*If no, do you have any other pension arrangement in respect of this subsidiary employment?*	YES		NO	

If yes, please give further details:

PLEASE COMPLETE THIS CERTIFICATE IN BLOCK CAPITALS

Payroll Section
Wicklow County Council
Tel 0404-20152

Form to be completed by **new employees** of Wicklow County Council to facilitate correct payroll setup

(the information returned on this form will be used solely for payroll purposes)

(Failure to return this form may result in incorrect pay, deductions etc)

NAME _____

ADDRESS _____

_____

_____

_____

Start Date _____

Date of Birth _____

Marital Status _____

PPS Number _____
(it is important that PPS number be submitted as soon as possible, as this will determine tax basis implemented) (If P45 is submitted, this will suffice)

PRSI Contribution Rate _____
(if you were previously employed, please indicate rate of prsi contribution paid, e.g. A1, D1 etc. note – if P45 submitted, this will suffice)

Superannuation & Widows/Orphans _____
(If previously employed by Local Authority, Health Board, VEC etc. , please indicate rate of contribution. If not know, please check with previous employer)

Note: Paypath Form enclosed also to be completed and returned to Payroll Section

To be Completed by Payroll Section:

Date Form Received _____

Managers Order No. _____

Increment Date input _____

PRSI Rate Input _____

Superann Code(s) Input _____

Widows/Orphans code input _____

Set up Week/Fortnight ending: _____

Wicklow County Council

Pay Mandate

Name (Block Capitals)

Bank

Branch

Branch Sort Code

Bank Account Number

Bank Identifier Code (BIC) (Can be 8 or 11 Digits

International Bank Account Number (IBAN)

Account Name

E-Mail Address *(Required for payment notification)*

_____ **(must be legible)**

Signature _____ **Date:**_____

Please return to: Finance Department
Wicklow County Council
County Buildings
Wicklow

Or Email: APayable@wicklowcoco.ie

For Internal Office Use Only:
Supplier Id:

Declaration

Declaration under Section 51 (Duty to make declarations, etc.) of the Public Service Pensions (Single Scheme and Other Provisions) Act 2012

1. Section 51 *(Duty to make declarations, etc.)* of *the Public Service Pensions (Single Scheme and Other Provisions) Act 2012* requires that:

(1) Any person who-

(*a*) takes up employment in a public service body, and

(*b*) either—

(i) has an entitlement to any preserved pension or any preserved lump sum or any other retirement benefit, or

(ii) has received or is in receipt of retirement benefits,

under a pre-existing public service pension scheme of which he or she was or is a member,

shall provide a declaration to that effect to the relevant authority.

(2) Any person who applies for a benefit from a pre-existing public service pension scheme shall make a declaration to the relevant authority concerned of any preserved pension or any preserved lump sum or any other retirement benefit from any other public service pension scheme that he or she is in receipt of or to which he or she has an entitlement.

(3) Any person to whom section 52 *(Abatement and reckoning of pensionable service)* applies shall upon application for a public service pension from any public service body make a declaration to the relevant authority concerned as to whether or not he or she is in receipt of any remuneration from any public service body and provide any relevant information required by the relevant authority for the purposes of that section.

2. **I hereby declare that I have (*) / do not have** ***(delete as appropriate)*** **entitlement to any of the pension benefits specified above.** *[To be completed by persons taking up an appointment in the public service.]*

Signed:_____

Name (Block Capitals):_____

PPSN:_____

Date:_____

3. **I hereby declare that I am (+) / am not** ***(delete as appropriate)*** **in receipt of any remuneration (pay) from any public service body.** *[To be completed by persons applying for a public service pension benefit.]*

Signed:_____

Name (Block Capitals):_____

PPSN:_____

Date:_____

(*)(+) Supply details on attached page.

Declaration under Section 51 (Duty to make declarations, etc.) of the Public Service Pensions (Single Scheme and Other Provisions) Act 2012

I hereby declare that I am entitled to the following pension benefit(s) / am in receipt of remuneration from a public service body *(delete as appropriate)*, as specified below:

PENSION BENEFIT

Description	
Annual gross pension	
Paying authority	

REMUNERATION

Description	
Annual gross pay	
Paying authority	

Signed:_____

Name (Block Capitals):_____

PPSN:_____

Date:_____

AN GARDA SÍOCHÁNA

NATIONAL VETTING BUREAU

Guidelines for completing Vetting Form (NVB 2)

Please read the following guidelines before completing this form.

Miscellaneous

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.

If the applicant is under 18 years of age, a completed NVB 3 - Parent\Guardian Consent Form will be required.

Section 1 Personal Details

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

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

For Gender field please tick the appropriate box.

Please provide changes of names, if any, from birth i.e. name change due to marriage, deed poll, adoption.

For Place of Birth, please state County/State of birth as this is a mandatory field.

Please state Country Of Birth as this is a mandatory field.

Please state your Passport Number where applicable.

Please state your Mother's Maiden Name as stated on your birth certificate.

Any fields not applicable to the applicant should be marked "N/A".

Section 2 Addresses

Please enter all your previous addresses in chronological order.

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

Insure that all years from birth to present are included.

Allow one letter per box and an empty box between words.

For the "Years From" and "Years To", please specify the year only e.g. | 1 | 9 | 6 | 3 |

It is permitted to have more than one address in any given year.

Section 3 Self Disclosed Criminal Record

Criminal record means a record of the person's convictions whether within or outside the state for any criminal offence together with any ancillary or consequential orders made pursuant to the convictions concerned or a record of any prosecutions pending against the person whether within or outside the state for any criminal offences or both.

A person shall not be obliged to provide details of any convictions to which Section 14A of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016 applies.

Section 4 Liaison Person

This section is not to be filled out by the applicant.

Section 5 Declaration of Consent

The applicant must confirm their understanding and acceptance of the statement by ticking the appropriate box where indicated. The date must be the present date of signing.

Section 6 Additional Addresses

See guidelines for Section 2 Addresses.

Vetting Form NVB 2

AN GARDA SÍOCHÁNA

NATIONAL VETTING BUREAU

Organisation Address:

Wicklow County Council,
County Buildings,
Station Road,
Wicklow Town.

Your Ref No:

NVB Reference No: W C C 0 0 3 - - -

Note To Applicant

- Return this form to the above named organisation.
- Do not send this form to the National Vetting Bureau or to any Garda Station.
- 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.

Section 1 – Personal Information (to be completed by Applicant)

Forename(s):

Middle Name(s):

Surname:

Gender: Male: ☐ Female: ☐

Is your Name at Birth the same as above? Yes: ☐ No: ☐ If No, please provide details:

Forename(s):

Middle Name(s):

Surname:

Date of Birth: D D / M M / Y Y Y Y

Place of Birth:

Country Of Birth:

Passport No:

Mother's Maiden Name:

Current Address: Year From: Y Y Y Y Year To: PRESENT

Line 1:

Line 2:

Line 3:

Line 4:

Line 5:

Eircode/Postcode:

Also known as:

Name/Alias:

Section 2 – Addresses (to be completed by Applicant)

Please enter all your previous addresses in chronological order. Please enter your **full** postal address.

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

Year From: Y Y Y Y
Year To: Y Y Y Y

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

Year From: Y Y Y Y
Year To: Y Y Y Y

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

Year From: Y Y Y Y
Year To: Y Y Y Y

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

Year From: Y Y Y Y
Year To: Y Y Y Y

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

Year From: Y Y Y Y
Year To: Y Y Y Y

For additional addresses, refer to Section 6. If used, please tick here ☐

Application valid on the commencement of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016.

Section 3 – Self Disclosed Criminal Record (to be completed by Applicant)

Have you a criminal record in Ireland or elsewhere? Yes ☐ No ☐ (If Yes, please provide details)

Date	Court Name	Offence Summary	Court Outcome / Cases Pending / Appeals

Section 4 – Liaison Person (to be completed by Liaison Person)

Organisation: **Wicklow County Council**

Authorised Liaison Person Details:

Forename:

Surname:

Liaison Reg No:

The applicant has provided documentation to validate their identity in accordance with the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016. Please tick box ☐

Liaison Person Signature

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

Role Being Vetted For:

Is the application submitted on behalf of an Affiliate Organisation: Yes: ☐ No: ☐

If Yes, please state Affiliate Organisation:

Section 5 – Declaration Of Consent (to be completed by Applicant)

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 Signature:

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

Section 6– Additional Addresses (to be completed by Applicant)

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

Year From: Y Y Y Y
Year To: Y Y Y Y

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

Year From: Y Y Y Y
Year To: Y Y Y Y

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

Year From: Y Y Y Y
Year To: Y Y Y Y

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

Year From: Y Y Y Y
Year To: Y Y Y Y

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

Year From: Y Y Y Y
Year To: Y Y Y Y

If this page does not allow enough space for addresses, please copy this page and number it below:

Page ☐ Of ☐

Application valid on the commencement of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016.

AN GARDA SÍOCHÁNA

NATIONAL VETTING BUREAU

PARENT/GUARDIAN CONSENT FORM (NVB 3)

Applicant Details

Forename(s):

Surname:

Date Of Birth: D D / M M / Y Y Y Y

Parent/Guardian Details

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):

Surname:

Relationship to applicant: **Father:** ☐ **Mother:** ☐ **Guardian:** ☐

Address:

Line 1:

Line 2:

Line 3:

Line 4:

Line 5:

Eircode/Postcode:

Parent/Guardian Consent

I, being the Parent/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) Acts 2012 to 2016.

Parent/Guardian Signature:

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

Introduction

Wicklow County Council is committed to practices that safeguard the welfare of children and vulnerable adults. Legislation that informs Wicklow County Council practices and policy in this regard are as follows:

- The Children First Act (2015)
- The National Vetting Bureau (Children & Vulnerable Persons) Act 2012 to 2016
- Wicklow County Council's Child Protection Policy Document

The National Vetting Bureau (Children & Vulnerable Persons) Act 2012 to 2016 came into effect on 29th April, 2016. The Act places a statutory obligation on Wicklow County Council to ensure that '**any work or activity which is carried out by a person, a necessary and regular part of which consists mainly of a person having access to, or contact with children or vulnerable adults**' will be the subject of Garda Vetting.

Garda Vetting has formed part of Wicklow County Council's recruitment and selection processes for the last number of years. However, following the commencement of the Act the vetting process is placed on a statutory footing and Wicklow County Council is required to carry out retrospective vetting for existing employees that are employed in relevant work but have not been vetted previously.

Definitions:

Child - is defined as a person under the age of 18 years.

Vulnerable person – means a person, other than a child, who: (a) is suffering from a disorder of the mind, whether as a result of mental illness or dementia, (b) has an intellectual disability, (c) is suffering from a physical impairment, whether as a result of injury, illness or age, or (d) has a physical disability, which is of such a nature or degree: (i) as to restrict the capacity of the person to guard himself or herself against harm by another person, or (ii) that results in the person requiring assistance with the activities of daily living including dressing, eating, walking, washing and bathing (National Vetting Bureau (Children & Vulnerable Persons) Act, 2012-2016).

Relevant Organisation – a relevant organisation means a person (including a body corporate or an unincorporated body of persons) who employs, enters into a contract for services or permits any person to undertake relevant work or activities, a necessary and regular part of which consists mainly of the person having access to, or contact with, children or vulnerable adults. A relevant

organisation shall not permit any person to undertake relevant work or activities on behalf of the organisation unless the organisation receives a vetting disclosure from the National Vetting Bureau in respect of that person. A person who contravenes this section shall be guilty of an offence.

Roles & Responsibilities:

Director of Services/Heads of Function/Supervisor/Line Manager shall ensure that:

All relevant employees and volunteers within their scope of responsibility and who have interaction with children or vulnerable persons as a necessary and regular part of their work are vetted in accordance with the National Vetting Bureau Act, 2012-2016; Vetting is not required where interaction is on an occasional basis.

No employee or volunteer commences work with children or vulnerable persons until appropriate confirmation of vetting has been received by the Liaison Person (Vetting) and the council is satisfied that the employee or volunteer does not pose a risk to children or vulnerable persons.

Any concerns regarding employees who have any interaction with children or vulnerable persons shall be communicated to the designated Child Protection Liaison Officer. Any incidents that occur should be reported to the designated Child Protection Liaison Officer by completing an Incident Report Form which is included in Wicklow Local Authorities – Policy for the Protection of Children Policy Document which can be found on G/Groups/Shared/Induction Pack/Child Protection Policy.

The Human Resource Officer shall advise the employee, volunteer or applicant who has received a Positive Vetting Disclosure of action to be taken in accordance with the relevant Council policies and procedures.

Employees subject to Garda Vetting:

The Act applies to both new and existing employees who are engaged in activities encompassed by the Act. Vetting will also be required in cases where existing employees are promoted or transfer into positions that employ them in relevant work.

Not all employees will be the subject of Garda Vetting. Wicklow County Council will continue to assess grades and individual roles as an ongoing process. However, employees currently engaged in the direct delivery of the following services to the public as a necessary and regular part of their work will, if applicable, be subject to Garda Vetting:

- Wicklow Fire Services
- Sports & Recreation including Lifeguards
- School Wardens
- Housing Welfare – Social Worker/Homeless Services/Liaison & Project Estate
- Library staff
- Liaison Persons (vetting employees)
- Civil Defence Officer

Employees who have been vetted for their current role will be considered vetted for the purpose of the Act. Disclosures are kept until an employee is re-vetted or leaves the employ of Wicklow County Council. Under Wicklow County Council's vetting policy, employees who have been previously vetted will be subject to re-vetting every 3 years.

Garda Vetting Process:

During the vetting process current employees subject to vetting and new employees who require vetting for their post must provide certain information in order to complete the process. This information is then submitted to the N.V.B. by Wicklow County Council's Vetting Liaison Person for processing. The N.V.B then carries out a check against the information provided on the person and returns the vetting disclosure to Wicklow County Council's vetting Liaison Person.

A vetting disclosure shall include particulars of a criminal record (if any) relating to the person and a statement of specified information (if any) relating to the person or a statement that there is no criminal record or specified information in relation to the person (referred to as a nil disclosure). Disclosures are subject to the Spent Convictions Act 2016 which allows for certain convictions to be spent i.e., not disclosed.

Preparing for Garda Vetting:

An employee subject to vetting must provide proof of identity. Two forms of identification are required as follows:

- Photographic I.D.
- Verification of current address

The National Vetting Bureau has provided Guidelines for acceptable/valid forms of identification. Each form of I.D. is ranked depending on the strength of its validity as a form of I.D.

The I.D. provided must satisfy the '100 point check rule'. The two forms of identity provided (photo I.D. and verification of current address) must equal or exceed 100 points when combined in order to confirm an applicant's identity (N.B. Please see Identity Verification 100 Point Check below).

Identity 100 Verification Point Check

IDENTIFICATION	SCORE
Irish Driving Licence or learner permit (new credit card format)	80
Irish Public Services Card	80
Passport (from country of citizenship)	70
Irish certificate of naturalisation	50
Birth Certificate	50
Garda National Immigration Bureau (GNIB) card	50
National Identity Card EU/EEA/Swiss citizens	50
Irish driving licence or learner permit (old paper format)	40
Employment I.D. ID card issued by employer (with name and address) ID card issued by employer (name only) Letter from employer (within last two years) Confirming name and address	 35 25 35
P.60, P.45 or Payslip (with home address)	35
Utility bill e.g. gas, electricity, television, broadband (must not be less than 6 months old. Printed online bills acceptable. Mobile phone bills are not acceptable)	35
Public Services Card/Social Services Card/Medical Card • With photograph	25 40
Bank/Building Society/Credit Union Statement	35
Credit/debit cards/passbooks (only one per institution)	25
National age card (issued by An Garda Siochana)	25
Membership Card • Club, union or trade, professional bodies • Educational institution	 25 25
Correspondence From an educational institution/SUSI/CAO From an insurance company regarding an active policy From a bank/credit union or government body or state agency	 20 20 20
Children under 18 years (any one of the following) • Birth Certificate • Passport • Written statement by the Principal confirming attendance at an educational institution on a letter head of that institution	 100 100 100
Recent arrival in Ireland (less than 6 weeks) • Passport	 100
Vetting Subject is unable to achieve 100 points ** Affidavit witnessed by a Commissioner of Oaths	 100

N.B. Information to be provided for Garda Vetting

In addition to providing your current address on the NVB1 Vetting Invitation Form you **must** provide all addresses from the year you were born on the NVB2 Vetting Application Form.

An overlap in years is permitted to allow for multiple addresses in one year.

The NVB online system will **not** accept a form if there are any gaps in your address history.

Further Information

More information on the Garda Vetting process and the information required is available from:

Ms. Helen Purcell, Authorised Person, Garda Vetting / H.R. Officer
Ms. Margaret Connolly, Liaison Person, Garda Vetting / Staff Officer
Brendan Martin, County Librarian , Child Protection Officer
Human Resource Department,
Enterprise & Corporate Services,
Co. Buildings,
Station Road,
Wicklow Town,
Co. Wicklow.

Telephone: 0404/20100
Fax No.: 0404/20112
Email: recruitment@wicklowcoco.ie

Presented and agreed by management team 17.12.2019

WICKLOW

ENDLESS OPPORTUNITIES