



AFFILIATED TO  
INTERNATIONAL  
BOXING  
ASSOCIATION (AIBA)

# IRISH ATHLETIC BOXING ASSOCIATION

NATIONAL BOXING STADIUM • SOUTH CIRCULAR RD • DUBLIN 8 • D08 HY40  
T: +353 (0)1 453 3371 F: +353 (0)1 454 0777 E: info@iaba.ie W: www.iaba.ie

## **IABA Guidelines for completing New Garda Vetting Form:**

- Please make sure to follow all the Guidelines as outlined on the first page of the Garda vetting form - **An Garda Siochana Form (NVB 2)** otherwise the Vetting Bureau will not be able to process your information.
- On this page (An Garda Siochana Form (NVB 2) in the section marked **Miscellaneous**, line four states “All applicants will be required to provide documents to validate their identity.”
- The **Club Secretary, Club Child Protection Officer or a Reasonable Person** is now required to validate the identity of the vetting applicant. Please see page entitled **IABA Proofing Identification for Garda Vetting Applications section 3**, sign after validating the applicant’s identification and return with the completed vetting form.
- The following **Responsible Persons** may also verify applicant’s identification and sign this form:
  - **IABA Staff**
  - **County/Provincial Secretaries and Child Protection Officers**
  - **The designated person may be one of the following: Garda | School Principal | Manager | Doctor | Solicitor**
- The National Vetting Bureau now insists that any applicant who is submitting a vetting form **must** provide two forms of identification. A photocopy of their **passport** or **driving licence** accompanied by a copy of a **utility bill** e.g. gas, electricity, television, broadband (must not be less than 6 months old. Printed online bills are acceptable. Mobile phone bills are not acceptable) must be provided with your vetting form.
- If the applicant is unable to provide these documents please visit our website [www.iaba.ie](http://www.iaba.ie) - the grants and documents section (appropriate forms for vetting ID documents) for a list of alternative forms of identification.
- The IABA issues Vetting ID cards to successful applicants as proof that they have completed the vetting process. In order for these cards to be issued, the applicant must provide a passport sized photograph of themselves and also include the appropriate administration fee of €15.
- **Please return the completed form to Mr David Britton, Irish Athletic Boxing Association, The National Stadium, South Circular, Dublin 8.**

If you have any further questions or queries please contact David Britton National Child Protection Officer at [david@iaba.ie](mailto:david@iaba.ie) or 0860453904.



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### IABA Proofing Identification for Garda Vetting Applications

Thank you for agreeing to complete the Garda Vetting process. Before we can process your Garda Vetting Form, it is a Garda Vetting requirement that you complete an Identification Check. This form must be signed by one of the following **Club Secretary, Club Child Protection Officer or a Reasonable Person** and forwarded along with copies of your ID to **Mr. David Britton Irish Athletic Association, National Stadium, South Circular, Dublin 8**. Simply complete this form by following the steps below.

#### **Step 1 (to be completed by Applicant):**

Identification Details (to be verified by Club Secretary, CPO or a Reasonable Person)

Full Name: \_\_\_\_\_

Signed: \_\_\_\_\_

Current Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Email: \_\_\_\_\_

Role or Position, being Vetted for: \_\_\_\_\_

Club: \_\_\_\_\_

**ID PROOFING MUST BE VERIFIED, IN PERSON, BY THE CLUB SECRETARY, CHILD PROTECTION OFFICER OR REASONABLE PERSON AS DEFINED IN THE IABA VETTING FORM GUIDELINES.**

#### **Step 2 (to be signed by Club Secretary/CPO):**

I have checked the identity of the applicant in the attached Garda Vetting application form against the requested documents and confirm that this is the person applying for a Disclosure Certificate. I have informed the applicant that this information will be passed to IABA and they have agreed to share their personal Information with IABA and appropriate, relevant organisations.

Name: \_\_\_\_\_

Signed: \_\_\_\_\_

Role: \_\_\_\_\_

Club: \_\_\_\_\_

Contact Number: \_\_\_\_\_

#### **WARNING:**

**It is an offence if you knowingly make a false statement for the purpose of obtaining, or enabling another person to obtain a Disclosure.**



## **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
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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.



Organisation Address:

Irish Athletic Boxing Association
National Stadium
145 South Circular Road
Dublin 8

Your Ref No:

[Empty box for Ref No]

NVB Reference No:

I A B 0 0 1 - [Empty boxes for NVB Reference No]

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): [Grid]
Middle Name(s): [Grid]
Surname: [Grid]
Gender: Male: [ ] Female: [ ]

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

Forename(s): [Grid]
Middle Name(s): [Grid]
Surname: [Grid]

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

Place of Birth: [Grid]

Country Of Birth: [Grid]

Passport No: [Grid]

Mother's Maiden Name: [Grid]

Current Address: Year From: [Y Y Y Y] Year To: PRESENT
Line 1: [Grid]
Line 2: [Grid]
Line 3: [Grid]
Line 4: [Grid]
Line 5: [Grid]
Eircode/Postcode: [Grid]

Also known as:
Name/Alias: [Grid]

**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: 

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Line 2: 

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Line 3: 

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Line 4: 

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Line 5: 

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Eircode/Postcode: 

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**Year From:**  

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**Year To:**  

Y	Y	Y	Y
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Line 2: 

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Eircode/Postcode: 

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**Year From:**  

Y	Y	Y	Y
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**Year To:**  

Y	Y	Y	Y
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Line 3: 

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Eircode/Postcode: 

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**Year From:**  

Y	Y	Y	Y
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**Year To:**  

Y	Y	Y	Y
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Line 1: 

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Line 2: 

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Eircode/Postcode: 

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**Year From:**  

Y	Y	Y	Y
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**Year To:**  

Y	Y	Y	Y
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Line 1: 

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Line 2: 

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Line 5: 

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Eircode/Postcode: 

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**Year From:**  

Y	Y	Y	Y
---	---	---	---

**Year To:**  

Y	Y	Y	Y
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### 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: **Irish Amateur Boxing Association**

Authorised Liaison Person Details:

Forename: 

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Surname: 

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Liaison Reg No: 

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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: 

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Role Being Vetted For: 

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

If Yes, please state Affiliate Organisation: 

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### 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: 

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**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
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**Year To:**  

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

**Year From:**  

Y	Y	Y	Y
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**Year To:**  

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

**Year From:**  

Y	Y	Y	Y
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**Year To:**  

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

**Year From:**  

Y	Y	Y	Y
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**Year To:**  

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

**Year From:**  

Y	Y	Y	Y
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**Year To:**  

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

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