

An Garda Síochána	Use Only
Reference No.:	

GAA	Reference:		

An Garda Síochána GARDA VETTING APPLICATION FORM

NOTE TO APPLICANT

- > This form may only be used by members of the Gaelic Athletic Association
- 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 Ulster Council GAA, 8-10 Market Street, Armagh, BT61 7BX.
- Do not send this form to The Garda Central Vetting Unit or to any Garda Station

To be completed by the Applicant

SURNAME:	PREVIOUS NAME (if any):	
FORENAME:	ALIAS:	
DATE OF BIRTH:(dd/mm/yy)	PLACE/CITY OF ORIGIN:	
CONTACT TELEPHONE NUMBER:		
HAVE YOU EVER CHANGED YOUR NAM	TE? Yes No	
IF YES PLEASE STATE FORMER NAME:		

Please state all addresses from year of birth to present date							
House No.	Street	Town	County	Post Code	Country	Year From	Year To
							1.

Have you ever b	een convicted of a	n offence in the R	Republic of Ireland or elsewhere?		
No Yes	Please	provide details			
DATE	DATE COURT		CE COURT OUTCOME		
CLUB:	TEAM:		ROLE:		
		LARATION OF API			
I, the undersigned, w Síochána to furnish to	ho have applied for a p	osition as a *	hereby authorise An Garda nvictions against me in the Republic of Ireland or		
or elsewhere as the o	case may be, subject to	/ or prosecutions suc	excessful or not, pending or completed, in the State lter implemented by the Minister for Justice and		
Equality on 31 Marc	n 2014.		ner implemented by the Minister for Justice and		
	int:		Date:		
* this field is manda	tory	<u> </u>			
To be completed by G.	AA Authorised Signator	ry only			
Anthonical Cimer					
Authorised Signator: PLEASE PRINT ALSO			(GAA)		
Authorised Signatory Registration Number: Date:					
To be completed by the Garda Central Vetting Unit					
Checks were carried out by this office in accordance with current Garda Vetting policy and based on the information supplied in					
this application form. The results are as indicated below: No convictions					
Convictions					
Prosecutions are pending					
NOTE: Checks were carried out at this office based on the information supplied. The convictions <u>may</u> apply to the subject of your enquiry. Please verify information disclosed with the applicant.					
		,			
Signed:		Member I/C	G.C.V.U.		