**Beach Lifeguard – June/Sept. 2023**

|  |  |  |  |
| --- | --- | --- | --- |
|  | HEAD LIFEGUARD | | |
| If you are interested in being considered for the post of Head Lifeguard, please indicate with an “X” in the box. |  |  |  |

## *The application form, when completed, should be emailed directly to* [*recruitment @mayococo.ie*](mailto:recruitment@mayococo.ie)

## *on or before* 4.00p.m. on Monday, 13th February 2023.

### PLEASE SEE INSTRUCTIONS FOR SUBMITTING APPLICATION

|  |  |
| --- | --- |
| **1. NAME IN FULL: (BLOCK LETTERS)** |  |
| **2. HOME ADDRESS:** | ………………………………………………………………  ………………………………………………………………  ……………………………………………………………… |
| **4. PRESENT ADDRESS:**  **(IF DIFFERENT FROM ABOVE)** | ………………………………………………………………  ………………………………………………………………  ……………………………………………………………… |
| **5. TELEPHONE NUMBER/S:** | **HOME:** ……………………………………………… |
| **MOBILE:** ……………………………………………… |
| **6. E-MAIL ADDRESS** |  |
| **7. ARE YOU IN GOOD HEALTH AND FREE FROM ANY PHYSICAL CONDITION THAT WOULD AFFECT YOUR ABILITY TO PERFORM THE DUTIES OF BEACH LIFEGUARD?** | **YES NO** |
| **IF NOT, PLEASE GIVE BRIEF DETAILS OF THE CONDITION:** | ………………………………………………………………  ………………………………………………………………  ……………………………………………………………… |
| **8. WHAT IS YOUR CURRENT OCCUPATION?** |  |
| **9. IF OFFERED EMPLOYMENT AS BEACH LIFEGUARD, WHAT DATE WOULD YOU BE AVAILABLE TO TAKE UP FULL-TIME DUTY?** | ……………………………………………………………… |

1. **Detail & attach as applicable, your CURRENT BEACH LIFEGUARD, CARDIAC FIRST RESPONDER, OCCUPATIONAL FIRST AID & EMERGENCY FIRST RESPONDER CERTIFICATES:**

**N.B. ONLY THE ABOVE CERTIFICATES (ORIGINALS) MUST BE SUBMITTED WITH THIS APPLICATION.**

|  |  |  |
| --- | --- | --- |
| **AWARDING AGENCY** | **CERT./AWARD OBTAINED** | **DATE CERT./AWARD EXPIRES** |
|  | **BEACH LIFEGUARD** |  |
|  | **CARDIAC FIRST RESPONDER** |  |
|  | **OCCUPATIONAL FIRST AID** |  |
|  | **EMERGENCY FIRST RESPONDER** |  |

1. **LIST ALL YOUR PREVIOUS EMPLOYMENTS OR WORK EXPERIENCE IN DATE ORDER:**

|  |  |  |  |
| --- | --- | --- | --- |
| **DATE**  **FROM TO** | | **EMPLOYER** | **POSITION HELD** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

I, the undersigned, HEREBY DECLARE all the foregoing particulars to be true and to give my permission for any enquiries to be made to establish such matters as qualifications, experience, character and for the release by other people, agencies, garda/police authorities or organisations of such information as may be necessary to Mayo County Council for that purpose. This may include enquiries prior to employment from past/present employers and the submission of the application is taken as to consent to this.

## I, the undersigned, have fully completed the Garda Vetting Form & understand that this must be attached to the Beach Lifeguard application.

**If under 18 years of age you must have the Parent/Consent Form fully completed along with the Garda Vetting Form.**

### SIGNED: DATE:

**PARTICULARS FOR THE POSITION OF BEACH LIFEGUARD**

**1) CHARACTER:**

Candidates shall be of good character.

**2) AGE:**

Candidates must be 18 years of age on **30th June 2023 (or on taking up employment).**

**3)** **QUALIFICATIONS:**

Candidates must hold a Water Safety Ireland Beach Lifeguard Award or equivalent, as recognised by the International Lifesaving Federation (ILSF).

Candidates will gain extra marks at interview for the following Pre-Hospital Emergency Care Council (PHECC) qualifications: Cardiac First Responder, Emergency First Responder and Occupational First Aid.

**4) RECRUITMENT:**

Candidates will be required to undergo a practical test in basic life support, swimming ability and swimming rescue at their own expense on **Saturday, 8th April, 2023** and an interview at a later date. See attached practical test examination sheet.

Candidates whose names are on a panel and who satisfy the Local Authority that they possess the qualifications declared for the position and that they are otherwise suitable for employment may within the life of the panel be employed as appropriate vacancies arise.

**All eligible candidates must attend both the interview and practical test in order to be considered for inclusion on a panel from which Beach Lifeguards may be appointed.**

**It is mandatory for all successful candidates to attend at Induction Training which will be held in May, 2023. All successful applicants will be notified of the date and venue, in due course.**

**5) GARDA VETTING:**

The National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016 commenced on the 29th April 2016. As a result **Mayo County Council must now verify the identity of candidates who are to be vetted. The attached is a list of acceptable identification documentation, each candidate must reach 100 points. For example, if a candidate submits a driving licence (new credit card format) – 80 points and a birth certificate - 50 points then their total is 130 points and therefore they meet the 100 point criteria.**

**6) HEALTH:**

Candidates must be in a good state of health and be free from any ailments which would render them unsuitable to hold the position.

**7) RATE OF WAGES:**

**Head Lifeguard:-** €671.45 per week (39-hour/6-day week) payable as follows: Monday-Sunday €111.91 per day (12-noon to 6:30pm); Double Time on Bank Holidays €223.82 per day (12-noon to 6:30pm);

€17.22 per hour.

**Beach Lifeguard:-** €594.50 per week (39-hour/6-day week) payable as follows: Monday-Sunday €99.08 per day (12-noon to 6:30pm); Double Time on Bank Holidays €198.16 per day (12-noon to 6:30pm); €15.24 per hour.

1. The employment is temporary and pensionable and will continue for Summer Season 2023 only.
2. Successful applicants may be offered either weekday or weekend employment at the discretion of Mayo County Council.
3. The successful candidates may be based at any of the following or other locations:

Achill Island (Keel, Keem, Dugort); Westport (Bertra); Louisburgh (Old Head, Carramore, Carrowniskey); Mulranny; Belmullet (Shore Road Pool); Killala (Ross).

**Mayo County Council will have sole discretion to assign candidates to specific locations and to transfer candidates from one location to another as considered necessary.**

**PLEASE NOTE THE FOLLOWING INSTRUCTIONS:**

* All application forms must be typed, submitted fully completed and inclusive of all the requested documentation (i.e.scanned copy of certificates), and emailed directly to [recruitment@mayococo.ie](mailto:recruitment@mayococo.ie) on or before

**4.00p.m. on Monday, 13th February 2023.**

* All **incomplete applications** will be deemed **invalid** after the closing date and will not be included in the competition.
* Please return this application form in PDF format by email, with subject “**Beach Lifeguard – Your name”**
* Copies of certificates to establish your eligibility for this position are required to be submitted with the application form as **one complete PDF Document.**
* In the event that a candidate does not have access to a computer, or encounters technical difficulties preventing them from submitting an application by email, a hard copy of the application may be accepted. Four copies of the application form must be submitted in this case, and these should reach the **Human Resources Section**, Aras an Chontae, the Mall Castlebar, Co. Mayo no later than the closing date specified above.
* The responsibility rests with the applicant to ensure the application form, in full, is received on time by the **Human Resource Department** of Mayo County Council. Any applications received after the closing date and time will not be included in the competition.
* All Sections/Questions in this document must be completed in full **(a Curriculum Vitae will not be accepted).**  In order, to ensure that each candidate is treated fairly and equally the interview board will only be provided with candidate’s application forms. Once the application form is submitted to the Human Resource Department of Mayo County Council, candidates are not permitted to alter/make additions or make deletions to their application in any way.
* Mayo County Council may decide, by reason of the number of persons seeking admission to the competition to carry out a short-listing procedure. The number of persons to be invited to interview shall be determined by Mayo County Council. Shortlisting will be based on qualifications, relevant experience, and information submitted on the application form.
* It is the candidate’s responsibility to inform the Human Resource Department of Mayo County Council of any change of address.
* Before signing this form, please ensure that you have replied fully to the questions asked. You should satisfy yourself that you are eligible under the regulations. The Council cannot undertake to investigate the eligibility of candidates in advance of the interview/examination and hence persons who are ineligible but nevertheless enter may thus put themselves to unnecessary expense. Mayo County Council will not be responsible for any expenses which may be incurred by the candidate in attendance for interview.
* Original certificates will be required prior to any appointment.
* **CANVASSING BY OR ON BEHALF OF THE APPLICANT WILL AUTOMATICALLY DISQUALIFY.**

**BEACH LIFEGUARD - DUTIES**

* Beach Lifeguards will be responsible for the performance of their duties and will work under the immediate supervision of the Water Safety Development Officer or their nominee.
* Beach Lifeguards shall read, be familiar with and adhere to the Safety Statement for Beach Lifeguards; participate in induction training and cooperate with other safety training provided by the Council as required. Any issues of health and safety concern shall be referred to the Water Safety Development Officer, the Executive Engineer – Coastal or the Health and Safety Officer. The procedure for reporting issues of concern is set out in the Safety Statement.
* Any other as may be assigned by the Council from time to time

**THE BEACH**

* All equipment must be checked daily (each morning) to see that it is in working order and ready for use. Any defects notified should be reported immediately to the Council. To inspect all lifesaving and first aid equipment on arrival for duty to ensure that adequate stocks are available and in good working order.
* Indication flags should be placed in prominent positions. The following flag system is to be used:
* Red flag signifies that bathing is considered temporarily unsafe.
* Red over yellow flag signifies that bathing between any two such flags is under supervision of Beach Lifeguard.
* No flag is flown if there is no Beach Lifeguard on duty.
* To ensure that from the start of the duty period that the appropriate flags are flown and are changed or re-locate as necessary during the day.
* To ensure at the conclusion of the duty period each evening that all flags are removed and that all equipment is checked and securely stored in the appropriate place.
* Except when the beach is empty, the Beach Lifeguard should be on patrol or on look-out outside the hut. The Beach Lifeguard should never be inside the hut except when relieved for meals etc. or when they are certain there is nobody on the beach. They should not allow their concentration to be diverted in conversations with the public or in reading. The primary duty of the Beach Lifeguard is to prevent accident situations from developing. The can-buoy should be strategically placed so that it may be used at a moment’s notice. Special vigilance is required where there are rocks or an outflow of a river, as there are likely to be undertows or currents.
* Where Beach Lifeguards have to leave to partake of meals, arrangements should be made that one Beach Lifeguard will be on duty during the other’s absence for such purpose and to patrol his/her area in addition to his/her own. Where one Beach Lifeguard only is employed, the following procedure should be adopted regarding the lunch hour:-
* No flag should be flown when he/she is off duty for his/her meal.
* The meal must be arranged at a time other than the peak bathing hours.
* Where two Beach Lifeguards are on duty on a particular beach –
* One Beach Lifeguard shall remain at a vantage point from which a full view of the beach can be had and remain on a constant lookout,
* The other Beach Lifeguard shall maintain a patrol of the beach and in such a manner that any give point along the beach is visited at least once in every 15 minutes.
* Brief reports should be exchanged when they meet but lifeguards should never be seen to congregate together or with other groups.
* To carry out a Beach patrol which shall be maintained along the beach and when the tide is in, the patrol shall be maintained as close as to the beach as possible.
* To provide constant observation and supervision of activities at public bathing places in order to prevent drowning accidents.
* To inspect the patrol area and where possible to remove any dangerous or offensive items. If the lifeguard cannot deal with the matter he should immediately report to his supervisor.
* To ensure that the lifeguard station is kept clean and tidy and in a state of readiness for emergencies.
* To ensure that except for emergency assistance or official business, **no one** other than lifeguard personnel is permitted in the lifeguard station.
* Where required, assist in opening and closing the public toilets at the start and end of their shift or at an agreed time. The Beachguards are also to report on the condition of the toilets in their Log Books and notify in the case of serious uncleanliness or damage.
* At appropriate times when checking the ring buoys and other safety equipment on the beach.
* Beach Lifeguards may be required to assist in conducting aquatic events and water safety programs.
* Beach Lifeguards shall carry out all appropriate duties as laid down in the Irish Water Safety Lifeguard Handbook

**LOG BOOK/ ADMINISTRATION**

* Beach Lifeguards should enter on the log book, times of commencing and ceasing duty, morning, meal-time and evening, each day and should make a note of any incident such as rescues, etc. The Log Book should be available at all times for inspection by any duly authorised member of the County Council’s staff.
* To record in a daily log book:
* The names and attendance times of all guards on duty.
* The general weather and tidal conditions.
* What flags were flown and when they were changed during the day.
* Any information which may assist the Authorities in improving the service.
* The Beach Lifeguards will be required to keep an “Accident and Incident Record” Book.
* The Head Beach Lifeguard at each location will, in addition to carrying out all of the duties, etc., of Beach Lifeguard (including taking full part in any roster arrangements), be responsible for ensuring that the Beach Lifeguards at his/ her location comply fully with the terms of the duties, responsibilities and general regulations of the post.
* To assist the Water Quality Section, Environment Department, at various times over the summer season, if required and to report any presence of debris or offal in the water and/or water discolouration to the Water Quality Section or the Water Safety Development Officer.
* To complete all appropriate rescue and first aid forms.
* The Beach Lifeguards should take into consideration that all reports they write are considered as public records and can be requested and released under the Freedom of Information legislation.

**BATHERS**

* Beach Lifeguards must always be courteous to bathers and give them the necessary information regarding state of tides, currents and parts of strand which are not safe for bathing.
* If, in the Beach Lifeguard’s opinion, bathers are about to enter water at a point which is considered dangerous owing to currents, shifting sands, etc., they should immediately warn them and give the reasons.
* Practice a philosophy of prevention over reaction in carrying out the service.
* To provide emergency rescue service in the case of accidents.
* Going immediately to the assistance of persons in difficulties in the water and rendering to such persons the necessary attention; To render first aid when possible.
* To provide advice to the public regarding facilities, state of tides, currents, parts of beach which are not safe for bathing, hazards, water safety etc. To proactively implement this, including but not restricted to, by carrying out Public Relations & Educational patrols during quiet times.
* If the bathers are acting in an indecent manner, the Beach Lifeguard should bring this fact to the notice of the Garda Siochana at the earliest opportunity.

**HEAD BEACH LIFEGUARD - DUTIES & RESPONSIBILITIES**

***In addition to the duties and responsibilities of that of a Beach Lifeguard, the Head Lifeguard shall:***

1. Have overall responsibility for the operation of the Lifeguard service on their appointed Beaches *including compilation of weekly rotas which are to be notified to each Beach Lifeguard and forwarded to Water Safety Development Officer and officer assigned to process Lifeguard Wages.*
2. Ensure the formation and maintenance of a team dynamic within the Beach Lifeguard team on their appointed Beaches.
3. Monitor weather and sea conditions when compiling the weekly rotas.
4. *Ensure that wages timesheets are submitted to the Corporate Development Section weekly in a timely manner together with notification of any changes to staff rotas for that period.*
5. Ensure sufficient training exercises take place each week and notify the Water Safety Development Officer of such training.
6. Ensure each member of the Lifeguard team, on their appointed Beaches, familiarises themselves with the Beach Lifeguard service in place on those Beaches.
7. Inspect the Lifeguard Log Books and Statistics Book at each location in his/her area to ensure that they are completed and signed daily.
8. Handle any complaints made to the team with regard to the Beach Lifeguard service or any public amenity on/near the Beaches by reporting such complaints to the Water Safety Development Officer, in writing.
9. Act in a mentoring capacity to Beach Lifeguards on their team by:
   1. Setting an example through their actions e.g. patrolling effectively etc.
   2. Answering any questions they may have and dealing with any concerns they raise.
   3. Ensure duties are performed to the required standards in accordance with the terms and conditions of the contract of employment and all Health and Safety legislation.
10. Have the final decision within the team with regard to:
    1. Whether operational duties require the restriction of lunch times.
    2. The number of Lifeguards to be on patrol at any given time.
    3. Any other considerations where sound judgement is required.
11. Report any misconduct by a member of the Lifeguard team on their appointed Beaches to the Water Safety Development Officer.
12. Act as the primary contact between their Beach Lifeguard team and the Water Safety Development Officer.
13. Monitor all equipment and supplies provided and report any depletions or wear and tear to the Water Safety Development Officer for replenishment/replacement.
    1. A thorough inspection of all equipment is to be performed at the start of the day and any missing/broken equipment is to be immediately reported.
14. Complete an end of season evaluation report for their appointed Beach with input from their Lifeguard team. Such an evaluation should focus on:
    1. How the season went (positive and negative aspects).
    2. Potential improvements, however minor, in the operation of the Lifeguard service (new equipment, changes in procedure etc.).

Such an evaluation should be completed, signed by all those who contributed and submitted **by email** to the Water Safety Development Officer.

1. Any other as may be assigned by the Council from time to time.

## A picture containing background pattern Description automatically generatedAN 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. It is permitted to have more than one address in any given year.

|  |  |  |  |
| --- | --- | --- | --- |
| 1 | 9 | 6 | 3 |

### 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**

**Organisation Address:** Mayo County Council Personnel Department Aras an Chonate, The Mall Castlebar

Co. Mayo

## NATIONAL VETTING BUREAU

**Your Ref No:**

**NVB Reference No:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **M** | **C** | **C** | **0** | **0** | **1** |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

### - -

**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? Forename(s):

Middle Name(s): Surname:

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **D** | **D** | **/** | **M** | **M** | **/** | **Y** | **Y** | **Y** | **Y** |  | | | | | | | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Date of Birth: Place of Birth: Country Of Birth: Passport No:

Mother’s Maiden Name:

Yes: No:

If No, please provide details:

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: Year From:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Line 2:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 3: Year To:**

**Line 4:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 5:**

**Eircode/Postcode:**

**Line 1: Year From:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Line 2:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 3: Year To:**

**Line 4:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 5:**

**Eircode/Postcode:**

**Line 1: Year From:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Line 2:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 3: Year To:**

**Line 4:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 5:**

**Eircode/Postcode:**

**Line 1: Year From:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Line 2:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 3: Year To:**

**Line 4:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 5:**

**Eircode/Postcode:**

**Line 1: Year From:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Line 2:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 3: Year To:**

**Line 4:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 5:**

**Eircode/Postcode:**

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

**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: **Mayo 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: Year From:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Line 2:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 3: Year To:**

**Line 4:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 5:**

**Eircode/Postcode:**

**Line 1: Year From:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Line 2:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 3: Year To:**

**Line 4:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 5:**

**Eircode/Postcode:**

**Line 1: Year From:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Line 2:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 3: Year To:**

**Line 4:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 5:**

**Eircode/Postcode:**

**Line 1: Year From:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Line 2:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 3: Year To:**

**Line 4:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 5:**

**Eircode/Postcode:**

**Line 1: Year From:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Line 2:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 3: Year To:**

**Line 4:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Y** | **Y** | **Y** | **Y** |

**Line 5:**

**Eircode/Postcode:**

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

**Page Of**

## A picture containing background pattern Description automatically generatedAN GARDA SÍOCHÁNA NATIONAL VETTING BUREAU

**PARENT/GUARDIAN CONSENT FORM (NVB 3)**

**Applicant Details**

**Forename(s):**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| D | D | **/** | M | M | **/** | Y | Y | Y | Y |  | | | | | | | | | | | | | | | |

**Surname: Date Of Birth:**

## 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):**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | | | | | | | | | | | | | | |  | **Mother:** | | | |  | **Guardian:** | | | |  |

**Surname:**

**Relationship to applicant: Father:**

**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** |