

Enter Line Manger Details here



SURNAME:				PREVIOUS NAME (if any):			
FORENAME(S):				ALIAS (if any):			
DATE OF BIRTH: (dd/mm/yy)				PLACE OF BIRTH:			
HAVE YOU EVER CHANGED YOUR NAME?				YES		NO	
IF YES PLEASE STATE FORMER NAME:							
PLEASE STATE <u>ALL</u> ADDRESSES FROM YEAR OF BIRTH TO PRESENT DATE (incl all addresses outside the Republic of Ireland):							
HOUSE NO.	STREET	TOWN	COUNTY	POST CODE	COUNTRY	YEAR FROM (YYYY)	YEAR TO (YYYY)

Have you ever been convicted of an offence in the Republic of Ireland or elsewhere?

No Yes If yes, please provide details below & also details of all prosecutions, successful or not, pending or completed, in the State or elsewhere

DATE	COURT	OFFENCE	COURT OUTCOME

DECLARATION OF APPLICANT

I, the undersigned who have applied to work as / employed as * _____ hereby authorise An Garda Síochána to furnish to the Health Service Executive (HSE), a statement that there are no convictions against me in the Republic of Ireland or elsewhere, or a statement of convictions and / or prosecutions, successful or not, pending or completed, in the State or elsewhere as the case may be, subject to the administrative filter implemented by the Minister for Justice and Equality on 31st March 2014. * this field is mandatory.

I am aware that any information resulting from this inquiry may be shared for recruitment, selection and appointment purposes within the HSE and other HSE-funded organisations in the event that I apply for employment / positions within any area of the HSE or any HSE-funded organisation.

Signature of Applicant: _____

Date: _____

Please Print Name: _____

FOR HSE OFFICE USE ONLY

Line Manager _____ Location: _____

Authorised Signatory (GVLO) _____ Reg. No: _____

Please Print Name: _____ 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 Pending

NOTE : Checks were carried out at this office based on the information supplied. The convictions may apply to the subject of your enquiry. Please verify information disclosed with the applicant.

Signed: _____ Member I/C

G.C.V.U.

