**Garda Vetting Form**

**Scoil Chiaráin C.B.S.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **First Name** | **Middle Name** | **Surname** | **D.of B** | **Email** | **Contact phone number** | **Role for vetting** | **Current Address** |
|  |  |  |  |  |  | Parent volunteer |  |