Safeguarding – Diocese of Ossory

Declaration/I.D. Verification Form 1.1A T3

To be completed by Applicant and given to your Employer

Legislation in the republic of Ireland has, at the core, the principal that the welfare of children, young people and vulnerable adults must be the paramount consideration. The Diocese of Ossory therefore asks that everyone working or volunteering, who will come into contact with children/young people/vulnerable adults, abide by good practice by completing and signing this declaration:

Do you have any prosecutions pending or have you ever been convicted of a criminal offence or been the subject of a Caution or a Bound Over Order? **Please state Yes or No** _____

If you answer YES, please give details, including dates, to your employer (School or Parish) on a separate page.

Have you ever been the subject of disciplinary procedures or been asked to leave employment or voluntary activity due to inappropriate behaviour towards a child? **Please state Yes or No** _____

If you answer YES, please give details, including dates, to your employer (School or Parish) on a separate page.

Applicant's name (Print) _____ **DOB** _____

Surname previously known by: _____ **Place of birth** _____

Address: _____

_____

School / Parish: _____

School /Parish Email address _____

Declaration: I understand that, if it is found that I have withheld information or included any false or misleading information above, I may be removed from my post whether paid or voluntary, without notice. I understand that the information will be kept securely by the Diocese of Ossory at the Diocesan Safeguarding Office. I hereby declare the information I have provided is accurate.

Applicant's signature: _____ **Date:**_____

I.D. Verification – to be completed by Parish Priest/ School Principal/ BOM Chairperson

I confirm that I have verified the identity of the applicant by viewing original copies of **one** of the following documents. (Please tick) Passport ☐ Driving Licence ☐ Public Services Card ☐ **and two other documents e.g.Utility Bill** – Electricity _____ ☐, Phone_____

☐, Addressed payslip ☐, Valid Medical Card ☐. Bank Document ☐ Child Benefit Book ☐

Other (Please name)_____

For TY Students - Letter from TY School Principal: ☐

Signed: _____ Dated_____

Diocese Of Ossory

Please do not send actual /or copies of I.D. documents to Safeguarding Office.
Schools/Parishes should photocopy identification documents and store securely