AN GARDA SÍOCHÁNA



NATIONAL VETTING BUREAU

PARENT/GUARDIAN CONSENT FORM (NVB 3) Under 16 Years Old Cannot Be Garda Vetted

Applicant	Deta	ils																								
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Surname:	\vdash		_			,																				
Date Of Birth: / Confir											rm	Age:	: <u> </u>													
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Forename(s):																										
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Relationship to applicant:												Father:				Mother:					Guardian:					
Contact Nu	mber:	Г	T	T	T	T				Τ				Τ	1		Τ	Τ		Ī	T			1	1	
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Parent/Guardian Signature:														Da	ate	:: 	Γ	T	7 /	Г	<u> </u>	1	丁		1	