



CLANNA GAEL FONTENOY

COMMUNITY | CLUB | TEAM

GAA E-VETTING PROCESS

2021

PLEASE FOLLOW THE THREE STEPS BELOW:

INTRODUCTION

- **Step 1** is an identification verification by the Club
- **Step 2** is an online vetting form
- **Step 3** is completion of the National Vetting Bureau application form, which is received after completing 1 and 2 above

STEP 1 - IDENTIFICATION VERIFICATION

- Include the following three items in an email to cco@cgfgaa.ie
- Please complete document in Word [link – TBC]
- A copy of your passport
- A recent utility bill (within 6 months)

STEP 2 - ONLINE VETTING

Complete the online GAA Online Vetting Application Form:

<https://public.flowforma.com/?token=GAA-eVetting>

Notes:

1. Select GAA: Camogie and LGFA are all recognised under GAA
2. Dublin County Board
3. Ignore GAA membership number as we are moving to a new registration system
4. Please use your personal not work email address
5. Assuming you followed Step 1, **answer yes** to the last two questions
6. Include a copy of your passport and utility bill (similar Step 1) – **Click Yes** to enable upload
7. Submit

STEP 3 - ONLINE VETTING

- Based on Step 2 you will receive an email from the National Vetting Bureau (NVB) which will be accompanied by a vetting application form that you are required to complete and return to the NVB
- Please keep an eye on your emails/spam folders for a response (usually takes a couple of weeks)
- This NVB Vetting Application Form must be completed within 30 days. You will then receive an email with letter confirming your vetting application has been completed usually within 2 weeks

IMPORTANT: If you do not complete final step you will need to restart the process at Step 1 again!

It is recommended that you have at hand, all the addresses at which you have lived since birth, and the years that you lived there, as these are required.

Feel free to contact me if you have any queries – cco@cgfgaa.ie

Suzanne McKenna

Children's Officer @ Clanna Gael Fontenoy



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IDENTIFICATION VERIFICATION

2021

APPLICANT INFORMATION

Full Name: DOB:

Last

First

Address:

Street Address

City

Post code

Phone: Email

Club role

Age Group coaching
(Year of Birth)

E SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

Signature: Date: