

## St. HILDA'S SERVICES

Grace Park Road, Athlone, Co. Westmeath, Ireland.

Tel: 090-6475825 Fax: 090-6476394 Email: info@sthildas.ie

### ENQUIRY FORM

SURNAME:				PREVIOUS NAME (if any):			
FORENAME:				ALIAS:		PPS NO.:	
DATE OF BIRTH:				PLACE OF BIRTH:			
HAVE YOU EVER CHANGED YOUR NAME?: Yes <input type="checkbox"/> No <input type="checkbox"/>							
IF YES, PLEASE STATE FORMER NAME:							
PRESENT ADDRESS/ALL PREVIOUS ADDRESSES:							
House No.	Street	Town	County	Post Code	Country	Year From	Year To

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

No  Yes  Please provide details \_\_\_\_\_

DATE	COURT	OFFENCE	COURT OUTCOME

#### DECLARATION

TO: Commissioner, An Garda Síochána, Garda Central Vetting Unit, Racecourse Road, Thurles, Co. Tipperary.

I, the undersigned who have applied to work as a Carer **working with children and adults with intellectual disability** for **St Hilda's Services** hereby authorise An Garda Síochána to furnish to **Ability West** a statement that there are no convictions recorded against me in the Republic of Ireland or elsewhere, or a statement of all prosecutions, successful or not, pending or completed, in the State or elsewhere as the case may be. I understand that Ability West will forward this statement to St Hilda's Services.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
( )

Authorised Signatory: \_\_\_\_\_  
( ) HRM Department

According to Garda records there are no previous convictions against the above named applicant:   
or the following convictions appear on Garda Records:

**NOTE:** Checks were carried out by this office based on the information supplied.  
The convictions supplied may apply to the subject of your enquiry. Please verify before use.

Signed: \_\_\_\_\_ Member I/C

C.V.U