

RGP Use Only **Reference No:**

NOTE TO APPLICANT

The enquiry form must be completed by the applicant in full using **Block Capitals** and Non Applicable details must be entered as N/A.

Writing must be clear and legible.

SURNAME:	Previous Name (if any): e.g. Maiden Name		
FORENAME:	ALIAS:	ID No:	
Date of Birth:	Place of Birth/ O	rigin:	
Have you ever changed your name? Yes	No		
IF YES PLEASE STATE FORMER NAME:			

House No:	Street/ Block	Town	Country	From	То

"Working together to Maintain a Safe Community"



The contents of this document will be processed in strict compliance with the Royal Gibraltar Police's policy on Data Protection which has been compiled in accordance with the provisions of the Data Protection Act 2004.

Declaration of Applicant				
I hereby authorise the Royal Gibraltar Police to supply the results of this vetting request to:				
Signature of applicant: Date Name in full)				
To be completed by agency or organisation requiring vet. Name of Agency or Organisation				
Position to be held by Applicant Authorised Signatory Date				
Name in full ()				

According to Royal Gibraltar Police records there are no previous convictions recorded against the above named applicant:

CMU Stamp

Referred to OIC Force Intelligence

OR the attached convictions appear on Royal Gibraltar Police records and have been forwarded to the requesting agency:

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