

## ROYAL GIBRALTAR POLICE VETTING APPLICATION FORM

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:	
	D	D	М	М	Y	Υ	Υ	Y	Place of Birt	h/ Origin:	
Date of Birth:									-		
Have you ever changed your name? Yes No											
IF YES PLEASE STATE FORMER NAME:											

Please state all addresses applicant has resided at during the last 7 years. If Applicant has moved to Gibraltar from abroad within the last 10 years please state last address prior to moving to Gibraltar.						
House No:	Street/ Block	Town	Country	From	То	
IMPORTANT NOTE: PLEASE ENSURE THAT ALL DATES ARE COVERED WITH A FULL, LEGIBLE ADDRESS. DO NOT LEAVE						
ANY GAPS IN YEARS PROVIDED. THE ROYAL GIBRALTAR POLICE WILL NOT ACCEPT FORMS COMPLETED INCORRECTLY.						



"Working together to make our community safer"

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:						
······································						
Position to be held by Applicant						
Signature of applicant: Date						
NAME IN FULL ( )						
To be completed by agency or organisation requiring vet.						
Name of Agency or Organisation						
Position Applicant is to be employed in						
Will applicant be involved with:						
Yes No						
Children Vulnerable Persons Yes No Driving Duties						
*Delete where applicable Authorised Signatory Date						
······						
NAME IN FULL (	)					
Notes:						
<i>Child"</i> means a person under the age of 18 years;						

"Vulnerable Adult" means a person aged 18 or over who has a condition of

the following type-

- (a) a substantial learning or physical disability;
- (b) physical or mental illness or mental disorder, chronic or
- otherwise, including an addiction to alcohol or drugs; or (c) a significant reduction in physical or mental capacity.

## FOR OFFICE USE ONLY

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

**Records Office Stamp** 

**Referred to OIC Force Intelligence** 

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



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