



Royal Falkland Islands Police

(Tel: +500 28100 / Fax: +500 28110 / Email: seniorclerk@police.gov.fk)

FORM V2

Vetting Certificate Application Form (Early Years / Charity)

FAO: Nursery Liaison Officer

Early Years, Infant & Junior
School, John Street, Stanley

Surname		Forename	
Previous / Other Names			
Date of Birth		Place of Birth	
Address on Falkland Islands			
Last Address outside of Falkland Islands (if applicable)			
Current Postal Address (if different to above)			
Contact Details (Tel / Mob / E-mail)			

I will be supplied with **FALKLAND ISLANDS LOCAL VETTING CHECK**.

Should the check reveal I have any convictions recorded:-

☐

I wish for you to supply me with a copy of my current convictions.

☐

I wish for you to supply me with a copy of ALL my convictions (Current and Spent).

***Note:** Even if you have no convictions recorded with this Office, in order for a vetting certificate to be satisfactorily completed, you are still required to tick one of the above boxes which will supply this department with the necessary authority to release the information required.

I hereby undertake to indemnify the Royal Falkland Islands Police against any liability or civil claim, which may be incurred by the police or any individual serving or former member of police including civilian staff, as a result of the provision of this vetting certificate.

Signature of Applicant (and Legal Guardian if applicant is under 18 years of age)		Date	
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Office Use Only:

Date Received		Payment Method	
Cert Reference		Amount Charged	
Cert Completed By		Invoice No	
Signature		Debtor ID	

Sign and forward the completed form to Royal Falkland Islands Police, Ross Road, Stanley, FIQQ 1ZZ, for the attention of the Senior Clerk.