Requirements for Clergy in Religious Orders taking up residence in the Diocese and persons in any form of consecrated life wishing to be involved in pastoral ministry in the Diocese

July 2022
Requirements for Visiting Clergy within Ireland and from outside Ireland who wish to minister at a once-off event

If a cleric is present for a single event in a parish, such as a baptism, wedding, or funeral, he should:

• Sign the sacristy register to declare his presence for a particular date and time.
• If he is not incardinated in the ecclesiastical jurisdiction, he must provide his celebret for inspection by the parish priest or other delegated person, and this should be noted beside his signature in the sacristy register.

Requirements for Clergy in Religious Orders within or outside the Republic of Ireland who will be involved in ongoing ministry in the Diocese

In advance of taking up residence, and before beginning any ministry, a cleric (or other person who wishes to be involved in pastoral ministry in the Diocese of Galway) must:

• Write seeking permission from the bishop of the Diocese of Galway, giving details of the duration and location of the visit and the type of ministry involved.
• Provide name and contact details for his bishop or superior, and contact details of the church authority to which he is incardinated.
• Provide a testimonial letter from his bishop or religious superior.
• Complete a declaration of good standing form and have his church authority complete the confirmation of good standing section. (See pages 3 & 4 of this protocol document.)
• If coming from outside Ireland, he must provide a police clearance certificate from his originating country, confirming that he has no criminal convictions.
• Undertake a vetting check through the Western Province Vetting Service. (See pages 5, 6 & 7 of this protocol document.)
• Attend a safeguarding information session with Mr Kevin Duffy, Diocesan Safeguarding Officer, and familiarise themselves with the Safeguarding Policy Handbook and other policies/forms for the diocese: www.galwaydiocese.ie/safeguarding/policies
# DECLARATION & CONFIRMATION OF GOOD STANDING

The Diocese of Galway reserves the right to grant or refuse permission to be involved in ministry within the Diocese of Galway.

## DECLARATION SECTION: TO BE COMPLETED BY APPLICANT

<table>
<thead>
<tr>
<th>Name of applying priest:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Email:</td>
<td></td>
</tr>
<tr>
<td>Phone:</td>
<td></td>
</tr>
<tr>
<td>Date of birth:</td>
<td></td>
</tr>
<tr>
<td>Date of ordination:</td>
<td></td>
</tr>
<tr>
<td>Name and address of church authority:</td>
<td></td>
</tr>
</tbody>
</table>

Why do you want to minister in this diocese?

Date on which you seek to begin ministry in this diocese:

### CURRENT APPOINTMENT
- **Address 1:**
  - Date from:  

### PREVIOUS APPOINTMENT
- **Address 2:**
  - Date from:  
  - Date to:  

- **Address 3:**
  - Date from:  
  - Date to:  

- **Address 4:**
  - Date from:  
  - Date to:  

*DETAILS OF ADDITIONAL APPOINTMENTS SHOULD BE GIVEN ON A SEPARATE SHEET AND ATTACHED TO THIS FORM.*

Are you coming to this diocese temporarily?

Yes:  
No:  

Have you ever been suspended or otherwise canonically disciplined?

Yes:  
No:  

If ‘Yes’, give details.
Have you any criminal record, or had criminal charges brought against you?
- Yes: [ ] No: [ ]
If ‘Yes’, give details:

Have you experienced any behavioural problems, past or present, which would indicate that you might deal with children or vulnerable adults in an inappropriate manner?
- Yes: [ ] No: [ ]
If ‘Yes’, give details:

Have you ever been involved in an incident or exhibited behaviour that called in to question your fitness or suitability for priestly ministry due to alcohol misuse, substance misuse, sexual misconduct, financial error, or any other lapse of judgement?
- Yes: [ ] No: [ ]
If ‘Yes’, give details:

If approved for temporary ministry, I agree to abide by the requirements of diocesan Safeguarding Policy and Procedures, and will attend a safeguarding information session with Mr Kevin Duffy, Safeguarding Officer for the Diocese of Galway. I confirm I have read the Child Safeguarding Policy Statement for the diocese.

I authorise the verification of the information provided on this form as to my previous ministries and personal information. I also authorise the appropriate necessary sharing of the information I provide to the Diocese of Galway.

Applicant signature: ____________________________ Date: ________________

**CONFIRMATION SECTION**

TO BE COMPLETED BY THE APPLICANT’S CHURCH AUTHORITY

Do you approve the applicant’s request to minister in the Diocese of Galway?
- Yes: [ ] No: [ ]

I verify the information provided in this form as to the applicant’s previous ministries and personal information. I authorise the appropriate and necessary sharing of the information I provide to the Diocese of Galway.

Signature of applicant’s church authority: ____________________________ Date: ________________

ATTACH SEAL:

*DATA PROTECTION: The Diocese of Galway will process the personal data contained in this form in its legitimate interests in connection with your application for ministry in the diocese. The data will be stored for as long as is necessary. For further information, see the Diocesan Privacy Policy or contact the Data Protection Officer at dpo@elphindiocese.ie*

**DIOCESE OF GALWAY OFFICE USE ONLY:**

Approved: ____________________________ Date: ________________

Chancellor / Diocesan Secretary
Western Province Diocesan Vetting Service

Vetting Invitation

Please complete using BLOCK CAPITALS and return form to the following address:
WESTERN PROVINCE DIOCESAN VETTING SERVICE, GALWAY PASTORAL CENTRE, NEWTOWNSMITH, GALWAY CITY
DO NOT send this form directly to the National Vetting Bureau or to any Garda Station

Section 1 - Personal Information

Under Section 26 (b) of the National Vetting Bureau (Children & Vulnerable Persons) 2012, it is an offence to make a false statement for the purpose of obtaining a vetting disclosure.

Forename(s)

Middle Name:

Surname:

Date of Birth: D D / M M / Y Y Y Y

Email Address:

Contact Number:

Role Being Vetted for:

Current Address:

Line 1:

Line 2:

Line 3:

Line 4:

Line 5:

Eircode/PostCode:

Section 2 – Applicant’s Consent and Signature

I have provided documentation to validate my identity as required and I consent to the making of this application and to the disclosure of information by the National Vetting Bureau to the Liaison Person pursuant to Section 13(4)(e) National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016.

Please tick:

Applicant’s Signature: ___________________________ Date: D D M M Y Y Y Y

Ref No: ___________________________
**Western Province Diocesan Vetting Service**

**Vetting Invitation**

Please complete using **BLOCK CAPITALS** and return form to the following address:

**WESTERN PROVINCE DIOCESAN VETTING SERVICE, GALWAY PASTORAL CENTRE, NEWTOWNSMITH, GALWAY CITY**

**DO NOT** send this form directly to the National Vetting Bureau or to any Garda Station

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### Section 3 – Organisation Information

<table>
<thead>
<tr>
<th>Name of Organisation Requesting Vetting <strong>(Diocese/Parish/School/Diocesan Agency)</strong></th>
<th>Diocese of Galway</th>
</tr>
</thead>
</table>
| **Contact Person** **(Bishop/Priest/Chairperson of Board of Management/Agency Manager)** | Rev. John Gerard Acton  
Diocesan Secretary |
| **Address of Organisation** | Diocesan Office  
The Cathedral  
Gaol Road  
Galway H91 A780 |
| **Email Address for contact Person:** | jgacton@galwaydiocese.ie |
| **Contact Number:** | 091 563566 |
| **Roll Number (Schools Only):** | N/A |

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**The Applicant has provided documentation** to validate their identity in accordance with the National Vetting Bureau (Children and Vulnerable Persons) Act 2012 to 2016

Please tick:  

[ ] List Documents Provided: 

**Contact Person Signature:**

Date:

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### Notes:

*Valid Forms of Identity must include Photo ID, Proof of Date of Birth and Proof of Current Address. e.g. Passport plus Current Utility Bill.*

The Contact Person should return this to:

**VETTING ADMINISTRATOR**

**WESTERN PROVINCE VETTING SERVICE**

**GALWAY DIOCESAN PASTORAL CENTRE**

**NEWTOWNSMITH**

**GALWAY CITY**
### Forms of Photographic Identification

<table>
<thead>
<tr>
<th>Identification</th>
<th>Score</th>
<th>Tick</th>
</tr>
</thead>
<tbody>
<tr>
<td>Irish driving license or learner permit (credit card format)</td>
<td>80</td>
<td></td>
</tr>
<tr>
<td>Passport (from country of citizenship)</td>
<td>70</td>
<td></td>
</tr>
<tr>
<td>Irish certificate of naturalisation</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td>Birth certificate</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td>Garda National Immigration Bureau (GNIB) card</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td>National Identity card (EU/EEA/Swiss citizens)</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td>Irish driving licence or learner permit (old paper format)</td>
<td>40</td>
<td></td>
</tr>
</tbody>
</table>

#### Employment ID:
- Card issued by employer (with name and address) 35
- Card issued by employer (name only) 25

#### Letter from employer within last 6 months confirming name and address 35

#### P60, P45, or payslip (with home address) 35

### Other Forms of Identification

<table>
<thead>
<tr>
<th>Identification</th>
<th>Score</th>
<th>Tick</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utility bill (e.g. gas, electricity, broadband) less than 6 months old</td>
<td>35</td>
<td></td>
</tr>
<tr>
<td>Printed online bill is acceptable. Mobile phone bills are not acceptable.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social services card or medical card</td>
<td>25</td>
<td></td>
</tr>
<tr>
<td>Social services or medical card including photograph</td>
<td>40</td>
<td></td>
</tr>
<tr>
<td>Bank / building society / credit union statement</td>
<td>35</td>
<td></td>
</tr>
<tr>
<td>Credit / debit card / passbook (only 1 per institution)</td>
<td>25</td>
<td></td>
</tr>
<tr>
<td>National age card (issued by An Garda Síochána)</td>
<td>25</td>
<td></td>
</tr>
</tbody>
</table>

#### Membership card:
- Club, union or trade, professional bodies 25
- Educational institution 25

#### Correspondence:
- From an educational institution/SUSI/CAO 20
- From an insurance company regarding an active policy 20
- From a bank/credit union or government body or state agency 20

### Children under 18 years (any one of the following):
- Birth certificate 100
- Passport 100
- Written statement by the Principal confirming attendance at an educational institution, on headed paper from that institution 100

### Recent arrival in Ireland (less than 6 weeks):
- Passport 100

### Vetting subject is unable to achieve 100 points:
- Affidavit witnessed by a Commissioner for Oaths 100

**Total Score:**

Documents provided must add up to a score of 100.
CHILDSAFEGUARDING POLICY STATEMENT

of the

DIOCESE OF GALWAY, KILMACDUAGH & KILFENORA

As a constituent member of the Catholic Church in Ireland, we recognise and uphold the dignity and rights of all children, are committed to ensuring their safety and well-being, and will work in partnership with parents/guardians to do this. We recognise each child as a gift from God, and we value and encourage the participation of children in all activities that enhance their spiritual, physical, emotional, intellectual, and social development.

All Church personnel (including clergy, religious, staff, and volunteers) have a responsibility to safeguard children through promoting their welfare, health, and development in a safe and caring environment that supports their best interests and prevents abuse.

If you have a suspicion, concern, knowledge, or allegation that a child is being or has been abused, please contact our designated Diocesan Liaison Person:

Mr Kevin Duffy
Diocesan Pastoral Outreach Centre, Newtownsmith, Galway
Mob. 087 6141736

If you wish to report directly to the statutory authorities, please contact either:

- An Garda Síochána at 1800 555 222, through the emergency number 999 or 112, or your local Garda station; or

- Your local Tusla Child and Family Agency Duty Social Worker at:
  - Galway/Roscommon 091 546235
  - Mayo 094 9042030
  - Clare 061 482792