

INFORMATION TO APPLYING COMPANY

This appendix should be attached to the form "Application for a criminal records check for aviation security" if the application is for persons under the age of 18.

The undersigned guardian(s) hereby consent that criminal records check may be conducted for:

Surname	Forename(s) (all given names)	Personal identity number (YYMMDD-XXXX)
Applying company		VAT/Organisation number

Guardian signature 1, In case of joint custody, the certificate must be signed by both guardians.

City		Date
Signature	Name (in block letters)	
Personal identity number (YYMMDD-XXXX)		
Address		
Post code	City/Country	

Guardian signature 2, In case of joint custody, the certificate must be signed by both guardians.

City		Date
Signature	Name (in block letters)	
Personal identity number (YYMMDD-XXXX)		
Address		
Post code	City/Country	

An **original** signed and completed form must be sent to:

Transportstyrelsen
Sjö- och luftfartsavdelningen
Sektionen för sjöpersonal
Registerkontroll
603 71 Norrköping