

**DECLARATION**  
**(Authorization for Certificate of Criminal Record Application)**

\_\_\_\_\_ (name), holder of identification document \_\_\_\_\_ (type) numbered: \_\_\_\_\_; sex: \_\_\_\_\_; father's name: \_\_\_\_\_; mother's name: \_\_\_\_\_; place of birth: \_\_\_\_\_; date of birth: \_\_\_\_\_(D)/\_\_\_\_\_(M)/\_\_\_\_\_(Y); address: \_\_\_\_\_.

Due to \_\_\_\_\_ (please state reason of not able to apply in person), delegate \_\_\_\_\_ (name of representative), holder of identification document \_\_\_\_\_ (type) numbered: \_\_\_\_\_; address: \_\_\_\_\_, as my representative to apply for a certificate of criminal record for the purpose of \_\_\_\_\_.

Declarant: \_\_\_\_\_

(Signature should be identical with that on the identification document)

Date: \_\_\_\_\_(D)/\_\_\_\_\_(M)/\_\_\_\_\_(Y)

-Any amendments, defacements or deletions made on the declaration should be affirmed by the declarant with a signature aside, and the signature should be identical with that on the identification document.

-Appendix : Copy of identification document of declarant.  
(For any false of declaration, criminal responsibility must be taken)