PLEASE SIGN ALL PAGES OF THE FORM

Clear

BIOGRAPHICAL DATA
To be completed in capital letters. Corrections are not allowed. If there is no data, make a dash.

PERSONAL DATA	
Given name or names	**Surname or names**
Estonian personal code or date of birth *(dd.mm.yyyy)*	**Gender** ☐ male ☐ female

DATA ON EDUCATION *Data on educational establishments in chronological order. Use an additional sheet, if necessary. If you completed a military course or obtained a rank in any of the educational establishments, then complete the additional form 1.*

period *(initial and final date in form dd.mm.yyyy)*	**name of the educational establishment, speciality** *(if you use abbreviations, please also provide the full name)*
..... -	.....
..... -	.....
..... -	.....
..... -	.....
..... -	.....
..... -	.....
..... -	.....
..... -	.....
..... -	.....
..... -	.....
..... -	.....
..... -	.....

DATA ON EMPLOYMENT *Data on jobs in chronological order. Use an additional sheet, if necessary*

period *(initial and final date in form dd.mm.yyyy)*	**name of the employer/company, position** *(if you use abbreviations, please also provide the full name)*
..... -	.....
..... -	.....
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I confirm that all the provided data is correct. I am aware that the submission of incorrect data is punishable.	
Date *(dd.mm.yyyy)*	**Signature of the applicant or his/her legal representative**

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DATA ON CIVIL STATUS PROCEDURES *Data on civil status procedures in chronological order. Use an additional sheet, if necessary*

period *(initial and final date in form dd.mm.yyyy)*	**name of the procedure**
..... -	.....
..... -	.....
..... -	.....
..... -	.....
..... -	.....
..... -	.....
..... -	.....
..... -	.....
..... -	.....

BIOGRAPHICAL DATA

Marital status

☐ married/registered partnership ☐ in common-law marriage ☐ divorced ☐ single ☐ widowed

Do you have any family members?

☐ yes *(complete the additional form „Data concerning close relatives and family members“* ☐ no

Education *(the highest graduated educational level)*	**Social media accounts**

Are you holding a residence permit or a right of residence in another country?

☐ yes *(the country, type and validity period)* ..... ☐ no

.....

Have you been punished for a criminal offence?

☐ yes ☐ no

Are you serving/have you served in the armed forces of any country (other than a NATO Member State) as a compulsory conscript and/or as a career military officer (including contractual)?

☐ yes *(please complete the additional form 1)* ☐ no

Are you currently a member of a military reserve force of any country (other than a NATO Member State)?

☐ yes *(please complete the additional form 1)* ☐ no

Are you engaged/have you been engaged in military activity outside Estonia?

☐ yes *(please complete the additional form 1)* ☐ no

Do you work/have you worked for, cooperated with, or otherwise been associated with (e.g. family member) the intelligence or security services or another power structure of any country (other than a NATO member state)?

☐ yes *(please complete the additional form 1)* ☐ no

Do you work/have you worked for state or non-state armed organisations or units (e.g. in the police, detention facilities and other law enforcement units, border guard, surveillance and security company, private mercenary army etc.) in a country other than a NATO Member State?

☐ yes *(please complete the additional form 1)* ☐ no

Are you/have you been a member of a criminal organisation, a terrorist organisation or an extremist group, or are you/have you been in contact with anyone who is/was their member?

☐ yes *(organisation name and time)*..... ☐ no

Have you been in a territory controlled by a terrorist organisation or an extremist group?

☐ yes *(territory and time)*..... ☐ no

Have you come into contact with or do you know how to handle firearms, explosives or explosive devices?

☐ yes *(please add explanation in free format)*..... ☐ no

Do you think people can be treated differently because of their nationality, race or religion?

☐ yes *(please add explanation in free format)*..... ☐ no

Have you committed crimes against humanity or war crimes?

☐ yes *(please add explanation in free format)*..... ☐ no

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Date *(dd.mm.yyyy)*	**Signature of the applicant or his/her legal representative**

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OTHER IMPORTANT INFORMATION RELATED TO THE APPLICATION *If necessary, use additional sheet.*
……

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Date *(dd.mm.yyyy)*	**Signature of the applicant or his/her legal representative**

SHALL BE COMPLETED BY AN OFFICIAL	
Accepted for procedure *(dd.mm.yyyy)*	**Name, signature**