



STATEMENT OF CONSENT

Use of this form

The document shall be completed and signed by the person who has stayed in Finland. The completed form will be processed electronically. **Write clearly**, preferably in capital letters.

I, the undersigned, hereby declare, that I consent to being subject to a records check in Finland by their competent authorities, covering record relevant for the purpose of security

Date of birth (6 digits) (dd/mm/yy)

Surname

Previous surnames, if any

First and middle names

Previous first and middle names, if any

Place of birth

Country of birth

Nationality

Signature:

Place:

Date: