

STATEMENT OF CONSENT

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The information collected on this form is in conjunction with the Norwegian Particulars Form. The document shall be completed and signed by the person who has stayed in Slovenia. The completed form will be processed electronically. **Write clearly**, preferably in capital letters.

I, the undersigned, herby de their competent authorities,		eing subject to a records check in Slovenia by for the purpose of security						
Norwegian ID number								
Date of birth (6 digits) (dd/m	m/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:								