

Sign in this field with a **blue** pen – the signature must not touch the frame

Name (in capital letters): \_\_\_\_\_

DOB or D-number: \_\_\_\_\_


Place and date: \_\_\_\_\_

Sign in the field above, use a blue pen. The completed form may be submitted electronically or by mail. If submitted electronically, the form must be scanned in colour. The signature will be inserted on the issued certificate.

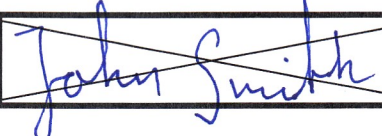
By signing this form, the applicant confirms that the information given in the application is correct and complete. The applicant also accepts the terms of certification as laid down in the Regulations of December 2001 No. 1523 concerning qualifications and certificate for seafarers.

Examples of signature:

Correct



Incorrect



PLEASE DO NOT USE THE SECTION BELOW THIS LINE

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For the Norwegian Maritime Authority only:

Journaldato

Mottattdato