

Third Degree Security Vetting Questionnaire

NOTE:

- Please use block letters and ink to complete the Questionnaire;
- Circle the correct answer;
- All sections of the Questionnaire must be completed;
- Where a question is not applicable or the answer is not known, please enter /;
- If there is not enough space for an answer, use an additional sheet of paper, sign it and enclose it with the Questionnaire;
- Unauthorised copying of this Questionnaire after completion is forbidden.

IDENTIFICATION DETAILS																					
Forename																					
Surname																					
Names of parents																					
Personal register number	<table border="1" style="width: 100%; height: 15px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																				
Tax number	<table border="1" style="width: 100%; height: 15px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																				
Previous forenames and surnames (If YES, state which and when you changed them)	YES NO																				
Date of birth																					
Place of birth																					
Country of birth																					
Citizenship																					
Do you have dual citizenship? (If YES, which)	YES NO																				
Have you had any other citizenship? (If YES, which, date of change or termination and reason)	YES NO																				
PERMANENT RESIDENCE ADDRESS																					
(street, number, place)																					
TEMPORARY RESIDENCE ADDRESS																					
(street, number, place)																					
TELEPHONE NUMBERS																					
Mobile telephone numbers																					
Numbers at work																					
Numbers at home																					
PASSPORT AND PERSONAL ID CARD																					
Passport number																					
Date of issue/expiry																					
Issuing authority																					
Personal ID card number																					
Date of issue/expiry																					

FOR ACTIVE MILITARY PERSONNEL	
Personal rank	
Year when awarded/promoted	

EMPLOYMENT DETAILS	
Professional qualification	
Present position/job title	
Name and address of present employer	

MARITAL STATUS

Are you married, cohabiting, divorced, widowed?	
Forename and surname of spouse or common-law spouse	

PARENTS, BROTHERS, SISTERS AND CHILDREN DETAILS

Forename and surname	Kinship	Place and date of birth	Registered permanent residence	Temporary residence	Employment

INFORMATION ON CRIMINAL AND MINOR OFFENCES

Are any criminal proceedings in process against you? (If YES, state for which offence, at which court and since when)	YES NO
Are any minor offence proceedings in process against you? (If YES, state for which offence, at which court and since when)	YES NO

<p>Have any valid or invalid court verdicts or decisions been issued against you?</p> <p>(If YES, state which verdict or decision, for which offence, at which court and when)</p>	<p>YES NO</p>
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SECURITY INFORMATION	
<p>Have you completed a security questionnaire or made a security statement in the Republic of Croatia or another country for reasons other than visa, residence or citizenship?</p> <p>(If YES, state in which country, time of completion and reason)</p>	<p>YES NO</p>
<p>Have you had contact with members of the police, military or security and intelligence services of other countries?</p> <p><u>Does not refer to official contacts.</u></p> <p>(If YES, describe circumstances, nature of contact, time and place)</p>	<p>YES NO</p>
<p>Have you had contact with persons (organizations) that pose or have posed a threat to the security of the Republic of Croatia, the security of other countries or values protected by international law?</p> <p><u>Does not refer to official contacts.</u></p> <p>(If YES, describe circumstances, nature of contact, time and place)</p>	<p>YES NO</p>
<p>Have you had contact with persons (organizations) engaged in criminal activity?</p> <p><u>Does not refer to official contacts.</u></p> <p>(If YES, describe circumstances, nature of contact, time and place)</p>	<p>YES NO</p>

NOTES

(You can use this section to write the information you consider important for the security vetting procedure or information which can corroborate that which is stated in the Questionnaire.)

Consent for the Third Degree Security Vetting

By completing and signing this Questionnaire, I hereby consent to the competent security and intelligence agency to check and process the information provided in this Questionnaire and to undertake the procedures stipulated by law for the implementation of the third degree security vetting procedure.

Place and Date:

Signed:
