

IN CONFIDENCE

[To be completed in Block Letters in Ink or Typed]

MARITIME SAFETY AUTHORITY OF FIJI

N.V. Form "A"

All columns must be completed or endorsed "not available" or not applicable	Subject	Spouse	Father	Mother
1. Full Name (a)				
Aliases (If any) (b)				
2. a) Present residential address b) Home address (If different from (a) above)				
3. Nationality a) Now b) at birth if different				
4. Date of Birth				
5. Place of Birth				
6. Date of Marriage (where applicable)				
7. Occupational and place of employment at present				
8. Proposed employment and place of employment				

I certify that the above information is correct and complete to the best of my knowledge and belief. I understand that any false information or omission may render me liable for disqualification which may include annulment of my appointment to the public service. If naturalized give date and Cert. No

Signature: _____

Date: _____