



# International Civil Aviation Organization

## Nomination Form

Training activity title: \_\_\_\_\_ Dates: \_\_\_\_\_  
Training Activity \_\_\_\_\_  
Location: \_\_\_\_\_

### PART 1 (PLEASE PRINT)

Nominee's Name: \_\_\_\_\_  
(Surname) (First name) (Middle name) ☐ M ☐ F  
Sex

Mailing address: \_\_\_\_\_  
\_\_\_\_\_

Phone # with country code: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Fax # with country code \_\_\_\_\_

#### Aviation background (check correct one):

☐ CAA (State or Regulatory) ☐ Airport ☐ Airline ☐ Ground services  
☐ Catering company ☐ Cargo ☐ Mail ☐ Aviation Security consultant

#### Law enforcement or security background (check correct one):

☐ Private security ☐ Military ☐ Police Other: \_\_\_\_\_

#### AVSEC Background:

No. of years operational experience: \_\_\_\_\_

Duties: \_\_\_\_\_

1. Current Job Title: \_\_\_\_\_ No. of Years: \_\_\_\_\_

Supervisor's name and email address: \_\_\_\_\_

Brief description of daily duties and responsibilities:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

No. of staff supervised as part of your duties: \_\_\_\_\_

2. **AVSEC training courses completed:** (local, regional or international)  
*Title of course*

*Year*

**Nominee's statement**

I (*name*) \_\_\_\_\_ undertake to:

1. conduct myself at all times in a professional manner in keeping with my status as a participant in this training activity;
2. refrain from engaging in political, commercial or other activity detrimental to the host country or ICAO; and
3. participate fully in the training activity, including group discussions, exercises and homework assignments

I hereby acknowledge that:

1. I am capable of writing and speaking in the language in which the training activity will be conducted; and
2. all information I have provided is true and correct.

Nominee's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PART 2 (PLEASE PRINT)**

Sponsoring Organization: \_\_\_\_\_ nominates:

\_\_\_\_\_ to attend the above mentioned ICAO  
(Surname) (First name) (Middle name)

sponsored training activity and in doing so, certifies that:

1. all information provided in this application is verifiable upon request;
2. it will be responsible for costs associated with transport to and from the training activity, lodging, any meals not provided by the Aviation Security Training Centre (ASTC), and other incidental costs;
3. the nominee is medically fit and in possession of medical insurance coverage for any sickness or medical emergency that may arise during the above training activity;
4. the nominee meets any prerequisite for this training activity and/or is part of the "target" population sought by ICAO, as outlined in the invitation letter;
5. the nominee is currently, or will be within the next 90 days, assigned to a position that reflects the objectives of the training activity; and
6. the nominee will arrive for the beginning of the training activity and will be available for the entire event.

\_\_\_\_\_  
(Signature of authorizing authority)

\_\_\_\_\_  
(Printed name of authorizing authority)

\_\_\_\_\_  
(Title of authorizing authority)

\_\_\_\_\_  
(Date)

**AFFIX OFFICIAL SEAL OR STAMP**