

APPLICATION FORM

Declaration of Conduct

Complete the form in print. When submitting your application to the Public Service Center, you must produce a $\frac{\text{valid identity}}{\text{document}}$, recent detailed Census registration print out (3 months validity) and pay the appropriate fee.

1 To be completed by the applicant

1.1 Applicant's details

| | | male | | female | (if ma | rried nle | ase n | give your maiden name) |
|--|-----------------------|-----------------------------|----------|----------|----------|--|--------|--|
| | Surnan | | | | (| eu, p | ouce g | rve year maiden namey |
| 2 | ı | | | | | | | |
| Surname | Given names (in full) | | | | | | | |
| Given names (in full) | | | | | | | | |
| , | Day | Month Yea | ar | | | | | |
| | 1 1 | 1 1 1 | - | 1 1 | 1 | | | |
| Pate of birth | Place c | of hirth | | | | | | Country of birth |
| | riace o | Place of birth | | | | | | i |
| ace and country of birth | <u> </u> | | | | | | | |
| | Street | Street and number | | | | | | Area |
| urrent Address | | | | | | | | |
| | | | | | | | | |
| | Countr | Country | | | | town/city | | |
| and the same of th | 1 | | | | | | | |
| ountry and town/city | Nation | National the Atlanta | | | | | | |
| | Nationality/ties | | | | | | | |
| ationality/ties | | | | | | | | |
| | ID No / Passport No: | | | | | | | |
| D No / Passport No: | | | | | | | | |
| | Teleph | one number | | | | | | Email address* |
| elephone number and email address | | | | | | | | |
| ubmitted application. | | | | _ | | | _ | itally at the provided email address about the applicable) |
| | | Public Sector | Employ | yment | (Gover | nment | orgar | nization has to fill out and sign section 2) |
| | | Private Sector | r Emplo | oyment | (orga | nization has to fill out and sign section 2) | | |
| | | Educational S | ector E | mploy | ment (| organiza | ation | has to fill out and sign section 2) |
| | | Operating Lice section 2.2) | | for a ca | atering/ | /bar/rest | auran | nt/adult entertainment establishment (specify in |
| | | Directorship | | | (| (specify | in se | ection 2) |
| | | Business Lice | nse | | (| (specify | in se | ection 2.2) |
| | | Vending Licen | ıse | | (| (specify | in se | ection 2.2) |
| | | Weapon Licen | ıse | | (| (specify | in se | ection 2.2) |
| | | Foreign Visa A | Applicat | tion | r | name co | untry: | : |
| | _ | | | | ŗ | purpose: | | Education/ Work/ Vacation / Other: |
| | | Emigration Pu | ırposes | ; | г | name co | untry: | : |
| | | Residency Pur | rposes | (Local) | 1 | IGD refe | rence | number: |
| | | Scholarship P | urpose | s / Edu | cation | Institutio | on | |
| | П | Adoption | | | | | | |

1.3 Judicial documentation

Have you been in contact with the Police or Justice officials?

| | | No | | | | | |
|----------------|-----|---|--|--|--|--|--|
| | | Yes (please provide an elucidation) | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | 1.4 | Applicant's signature | | | | | |
| | | | | | | | |
| | | The applicant hereby declares that he/she has completed this form in full and truthfully. | | | | | |
| | | Place Day Month Year | | | | | |
| Place and date | | | | | | | |
| Signature | | <u>I</u> | | | | | |

To be completed by the organization/institution requiring the Declaration of Conduct. The organization is obliged to provide a copy of the related vacancy/job description, and to outline the function, the function level as well as the function contact details.

2.1 Details of organization/institution

| | Name of organization/institution | | | | | | |
|---------------------------|---|--|--|--|--|--|--|
| Name of | | | | | | | |
| organization/institution | Name of contact person | | | | | | |
| Name of contact | | | | | | | |
| person | Street and number | Area: | | | | | |
| | 1 | 1 | | | | | |
| Address | | | | | | | |
| | Telephone no. | Country | | | | | |
| Felephone no. and country | | <u> </u> | | | | | |
| 2.2 | Purpose of the application | | | | | | |
| | ☐ Employment | | | | | | |
| | Job (to which the application relates; e.g. teacher, cla | eaner, transport manager) | | | | | |
| | | , , | | | | | |
| | | _ | | | | | |
| | Description of tasks (if possible, enclose a job descrip | otion) and job level | | | | | |
| | [| | | | | | |
| | Other purpose | | | | | | |
| | Description (e.g. type of operating license, type of bulicense; type of weapon and first application or rener | usiness license, type of vending license, type of weapon wal of current valid weapon license) | | | | | |
| 2.3 | Specific screening profile Is the Declaration in connection with one of the jobs of the solution in connection with one of the solution. | or purposes mentioned below? (NB: Check only one box) | | | | | |
| | ☐ Political office holder | | | | | | |
| | ☐ (Special) enforcement officer | | | | | | |
| | ☐ Holiday host family | | | | | | |
| | ☐ Health care and welfare of people or anima | als | | | | | |
| | Legal services | | | | | | |
| | ☐ Education This screening profile is applicable to anyone to care institutions | working in an educational institution, day- and after school | | | | | |
| | ☐ Taxi industry; taxi drivers permit | | | | | | |

2.4 General screening profile

> Check where applicable

Information

Screening will be based on the features of the job you have checked, so it is important to make sure that the features checked correspond to the job/tasks or other purpose concerned.

| | Being authorized to consult and/or process data in computer systems |
|-----|---|
| | Handling sensitive/confidential information |
| | Having knowledge of security systems, control mechanisms and verification processes |
| Мо | ney |
| | Handling cash, transferable money and/or (digital) securities |
| | Having budgetary authority |
| Go | ods |
| | Monitoring production processes |
| | Having access to goods |
| | Having access to materials, property, objects etc. that, if used inappropriately or incorrectly, pose a risk to people and/or animals |
| Sei | rvices |
| | Providing services (advice, security, cleaning, catering, maintenance, etc.) |
| | Services in individual living environment |
| Bu | siness transactions |
| | Making decisions on offers (conducting negotiations and concluding contracts) and awarding contracts Making decisions and interacting with parties within the organization only Making decisions and interacting with parties outside of the organization as well Level of security clearance applicable Signing authority/representation authority |
| Pro | ocesses |
| | Maintaining/converting/operating production machinery and/or other devices, vehicles and/or aircraft |
| | Transporting and/or delivering goods, post and packages otherwise than via an in-company transport system |
| | Transporting passengers |
| Ма | nagement |
| | Managing people and/or (part of) an organization |
| Per | rsons |
| | If you check 'Persons' as a risk area, there must be a difference in level of authority between the persons cerned. It is not about dealing with colleagues. |
| | Being responsible for the care of minors Being responsible for the care of persons requiring assistance such as the aged and the disabled Transporting passengers Childcare (This should only be used in combination with other features) |

2.5 Special circumstances

> Indicate any special circumstances in connection with the application.

The location where applicant does his job may be relevant to the application's assessment. For instance, if you provide cleaning services at a childcare center, the assessment will be conducted differently than if you do so in an office.

For other special circumstances, see the explanatory notes accompanying the application form.

No (continue to 2.6)

Yes (please explain)

Con behalf of the organization/institution, the undersigned hereby declares that he/she has completed this form in full and truthfully.

Place

Day Month Year

Place and date

Signature of contact person

Stamp of organization/institution

3. To be completed by the PSC (Public Service Center)

| Application number | | |
|-------------------------------|--|----------------|
| Any special remarks | ☐ No (continue with the next question) | |
| | ☐ Yes (please explain) | |
| | <u> </u> | |
| Ready to be further processed | Yes | |
| | | |
| | No (please explain and contact Ministry of Justice if necessary) | |
| | 1 | |
| | | |
| | | |
| | | |
| | Application form has been completed in full, and applicant's identity has been | an verified. |
| Name of PSC officer | I | |
| T 11: 1 C DOG 15: | | |
| Initials of PSC officer | | |
| | Place | Day Month Year |

Place and date



Explanatory notes

For persons completing the application form for a Declaration of Conduct

Complete the form with care and without spelling mistakes.

1. To be completed by the applicant

1.1 Applicant's details

Surname: Enter your surname.

Place of birth: Indicate the town/city where you were born, as it was called at the time of your birth.

Country of birth: If you were born outside of Sint Maarten, indicate the country where you were born, as it

was called at the time of your birth.

1.2 Purpose of application

Note: A Declaration can only be provided for a specific job position and not for general job opportunities.

For employment purposes the organization has to fill in and sign section 2.

Other purpose: Not all applications for a Declaration are accepted for processing. Only the purposes mentioned

in this section are applicable. For example, applications for a Declaration for the purpose of a marriage, rotary or associations do not fall under purpose for a Declaration. For more information on the conditions for processing an application, contact the Public Service Center

(PSC).

Operating License: If you are applying for a Declaration in order to obtain an operating license, you have to specify

the type of license in section 2.2: a catering/bar/restaurant/adult entertainment

Business License: If you are applying for a Declaration in order to obtain a business license, you have to specify

the type of business and the type of services you will be providing in section 2.2

Vending License: If you are applying for a Declaration in order to obtain a vending license, you have to specify

the type of goods or services you will be providing in the public space that is not a store in

section 2.2

Weapon License: If you are applying for a Declaration in order to obtain a weapon license, you have to specify

the type of weapon (speargun, firearm, crossbow etc.) and indicate if it regards a first

application for a weapon license or a renewal of a weapon license.

Emigration purpose: Please be advised that certain foreign authorities do not request a Declaration of Conduct but

another type of document. A DOC/VOG is for example not similar to Police Record as requested

by the authorities of the United States of America.

2. To be completed by the organization/institution requiring the Declaration

The application will <u>not</u> be processed if the organization/institution requiring the Declaration has not checked a general or specific screening profile. The organization/institution must provide insight into the function, the function level and the level of representation/authorization and or level of security clearance applicable for the function in relation to which the Declaration is sought.

2.1 Details of organization/institution

Name of

contact person: Enter the name of the person representing the organization/institution

2.2 Purpose of the application

Employment: The job for which the Declaration is requested.

Description of tasks: Describe the tasks and responsibilities that come with the job. The vacancy or job description

must be included.

Other purpose: Specify the type of operating license, business license, vending license or weapon license.

2.3 Special circumstances

For instance, if one of your tasks is to substitute for a management colleague, or if you carry out your tasks in a highly confidential environment, or if your job is concerned with the rehabilitation of offenders.

Important!

As the organization/institution requiring the Declaration, you have a role in preventing fraud. By initialing the application form at the bottom of each page, you will be helping prevent fraud. You are also responsible for verifying the authenticity of the Declaration you receive.