



SIERRA LEONE CIVIL AVIATION AUTHORITY

21/23 SIAKA STEVENS STREET, NDB BUILDING
FREETOWN, SIERRA LEONE,
WEST AFRICA

PERSONAL HISTORY STATEMENT FORM

PERSONAL HISTORY (To be completed by the applicant)			
1. Company name:		2. Company address:	
3. Name of applicant:		4. Position:	
5. Address of applicant:			
6. Status: <input type="checkbox"/> Permanent <input type="checkbox"/> Contracted - Full Time <input type="checkbox"/> Contracted - Part Time			
7. Qualifications relevant to item (4) position (Tick here <input type="checkbox"/> if information is continued on reverse side of this form)		Date From	Date Present
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
8. Work experience relevant to item (4) position:		Date From	Date Present
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
9. I, hereby confirm that (Print Name in full)			
(a) I have not			
(i) held a certificate or aviation document issued by a civil aviation authority that was revoked or terminated within the previous five years by reason of criminal, fraudulent, improper action or insanity on my part; nor			
(ii) contributed materially to the revocation or suspension of an aviation document issued by a civil aviation Authority			
(b) The information provided on this form is true and correct to the best of my knowledge.			
Signature..... Date			

10. For CAA Official Use Only
Received by:
Name: Position:
Signature: Date:
Attach copies of certificates/proof of experience to this form in support of information supplied.

11 For Security Clearance
Received by:
Name: Position:
Signature: Date:
Stamp.
Department

12 For Security Clearance
Received by:
Name: Position:
Signature: Date:
Stamp.
Department