**APPLICANT’S REGISTRATION FORM **

The applicant (first name and surname) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

requests to be tested for the issue of the following licence or instrument rating

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby declare that:

* I have read and understood the procedures relating to the theoretical knowledge examinations as required in Regulation (EU) No. 1178/2011 as amended;
* I have been provided with clear instruction about access procedures and computer-based exams;
* I give my consent to the storage of my personal image and my data for the sole purpose of the issue of the licence or rating for which I am registering;
* I have read and understood the notes and obligations contained on the next page.

ID\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ expiry date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rome/Malpensa \_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_