



**Request for a complete record of the criminal convictions from the Commissioner of Police as per Article 3 (3)(4) of Chapter 77 of the Laws of Malta**

**1. Requesting authority (Please mark as appropriate)**

<input type="checkbox"/>	<b>Transport Malta</b>	<input type="checkbox"/>	<b>Financial Intelligence Analysis Unit</b>
<input type="checkbox"/>	<b>Armed Forces of Malta</b>	<input type="checkbox"/>	<b>Public Service Commission</b>
<input type="checkbox"/>	<b>Malta Gaming Authority</b>	<input type="checkbox"/>	<b>Malta Financial Services Authority (MFSA)</b>
<input type="checkbox"/>	<b>Council for the Teaching Profession</b>	<input checked="" type="checkbox"/>	<b>Authority on the Responsible Use of Cannabis</b>

**2. Details of Data Subject**

<b>Name and Surname</b>	
<b>Document Number (id card/passport)</b>	
<b>Father's Name</b>	
<b>Mother's Name</b>	<b>Nee'</b>
<b>Date of Birth</b>	
<b>Country of Birth</b>	
<b>Place of Birth</b>	
<b>Nationality</b>	
<b>Address</b>	
<b>Mobile Number</b>	

Data Subject's signature consenting the Commissioner of Police to submit a complete record of his/her criminal convictions to the Requesting Authority indicated above:

\_\_\_\_\_

Date: \_\_\_\_\_

---

Criminal Records Office  
Police General Headquarters  
Floriana

Tel : 22942261/2