

OSCE PA SHORT-TERM OBSERVER REGISTRATION FORM PARLIAMENTARY ELECTIONS IN MOLDOVA ON 28 NOVEMBER 2010

PERSONAL DATA

	Surname												
	First Name												
	Passport Number					Diplomatic Passpor		t?	Yes		No		
,	(Please sei	nd a scanne	ned copy of your passport to the International Secretariat with this form)										
	Member's email												
	Mobile phone nur (in field)	mber											
	Citizenship												
	Date of Birth		Place of Birth										
	Languages				•				•				
(Please remember: English is the official language of the Delegation) ARRIVAL/DEPARTURE DATA													
	Arrival Date		Arrival Ti		Гіте			Flight Number					
	Departure Date	Departure Date		Departure Time				Flight Number		-			
Visa required upon arrival at the airport in			port in C	hisinau			Yes		N	0			
DEPLOYMENT													
	Preference for place of deployment												
J	(We encourage Members to choose deployment outside Chisinau)												
	Preference of dep												
ļ													
	Transportation to and from the airport				OSCE		Embassy	(Other				
	(Transport by the OSCE will entail a cost, which will be collected in cash)												
	Car on Election Day				OSCE		Embassy		Own arrangements				
	Interpretation on Election Day				OSCE		Embassy		Not needed				

Please return this form to Petra@oscepa.dk, Fax +45 33 37 80 30 by Wednesday 10 November