



**Parliamentary Observer Registration Form  
 Parliamentary Elections in Ukraine, 26 October 2014**

<b>Registration Date:</b> (dd.mm.yy)	
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**PERSONAL INFORMATION** (Please answer each section clearly, completely and use only English transcription)

<b>Family Name:</b>			
<b>First Name:</b>		<b>Mobile in the field:</b> (country code +number)	
<b>Nationality:</b>		<b>Email:</b>	
<b>Passport Number:</b>		<b>Languages:</b>	ENG RUS FR SP IT GER
<b>Passport Type:</b>	Diplomatic Regular Service		

**CONTACT PERSON** (Person in charge of practical arrangements)

<b>First Name &amp; Surname:</b>	
<b>Mobile:</b>	<b>Email:</b>

**TRAVEL INFORMATION**

<b>Arrival Date:</b> (dd.mm.yy)		<b>Departure Date:</b> (dd.mm.yy)	
<b>Arrival Time:</b> (hh:mm)		<b>Departure Time:</b> (hh:mm)	
<b>Arrival Flight:</b>		<b>Departure Flight:</b>	
<b>TRANSPORTATION To/From the Airport (in KYIV)</b>	Not Required (Embassy/ Own arrangements/ etc)	Required	

**DEPLOYMENT ON ELECTION DAY**

<b>Preference of Deployment Partner:</b> (if any)	
<b>Car on Election Day</b>	OSCE Embassy Own Arrangements
<b>Interpretation on Election Day</b>	OSCE Embassy Own Arrangements
<b>E-day Interpretation</b>	ENG RUS FR SP IT GER

<b>Participated in the May 2014 EOM to Ukraine?</b> If YES - which city?	YES	NO
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**PREFERENCE FOR DEPLOYMENT LOCATION**

<b>Kyiv city</b>	
<b>Willingness to travel by car outside Kyiv city (up to 90 minutes)</b>	
<b>Willingness to overnight outside Kyiv</b> (The International Secretariat will provide suggestions based on requirements)	

**Please return this form together with a passport copy by 10 October 2014 to  
 Ms. Iryna Sabashuk OSCE PA Secretariat tel: +45 33 37 80 47 fax +45 33 37 80 30  
[eom@oscepa.dk](mailto:eom@oscepa.dk)**