

To the Ministry of Defense of Ukraine

\_\_\_\_\_  
(Surname, name, patronymic of candidate, full and in  
genitive case, passport series and number, the issuing  
body and the date of issuance)

registered: \_\_\_\_\_

\_\_\_\_\_  
residing at the address: \_\_\_\_\_

\_\_\_\_\_  
tel. \_\_\_\_\_  
(home number, mobile number)

\_\_\_\_\_  
(e-mail address)

### APPLICATION

Please allow me to participate in the selection for the positions of Independent Members of the Supervisory Board of the State Enterprise of the Ministry of Defense of Ukraine "Defense Procurement Agency".

I hereby \_\_\_\_\_ (consent or do not consent) to the disclosure of the content of my documents after the completion of the selection procedure.

I attach the following documents to my application:

- \_\_\_\_\_ ;
- \_\_\_\_\_ .

(full description of the list of attached documents)

I confirm the accuracy of the information in the documents submitted by me.

I understand the terms for the participation and the selection procedure.

\_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
signature

