STATUTORY DECLARATION OF ACCEPTANCE PERTAINING TO THE PROCESSING OF PERSONAL DATA FOR SECURITY CLEARANCE

The undersigned (Military Rank/Specia	alty)(Name,
Surname)	
(Father's Name)	(Mother's Name)
	, ID Card No, serving
in, soon to be	e assigned duties requiring Personal
Security Clearance in	(Department)
, being familiar wit	th the penalties provided for in the
provisions of Par. 6, Article 22 of Act 15	99/1986 on false statements, hereby
declare that:	
a. I have been fully informed b	y (supervisor's Name)
of	(Department) on classified information
security regulations, as well as on pers	onal security clearance procedures
provided for in the Greek National Secu	ırity Regulation.
b. I wish to be security cleared	for handling classified materiel up to
(classification level).	
c. I consent to have my sensitive	ve personal data processed, as part of the
necessary vetting required for the issua	ance of my Personal Security Clearance.
1	Place - Date
SIGNATURE AUTHENTICATION	
	(Signature)

Note:The present document is completed by hand by the person to be security cleared

Commander or Director