

# Police Clearance Certificate

**Police Department**  
[City/Region Name]

## Personal Information

Full Name:

Date of Birth:

Nationality:

Address:

## Certificate Statement

This is to certify that the individual named above has no criminal record and is of good conduct according to the records available with this police department as of the date of issue.

## Issued by

Authorized Officer:

Date of Issue:

Signature: \_\_\_\_\_