

Police Clearance Certificate

Certificate No.: _____
Date of Issue: _____
Place of Issue: _____

Personal Details

Full Name:
Date of Birth:
Nationality:
Passport No.:
Address:

This is to certify that, according to our records and information available, the above-mentioned person has no criminal record and is of good conduct for the period stated below.

Period Covered:

This certificate is issued upon the request of the individual for official use.

Authorized Signatory

Official Seal / Stamp