**AVSEC Form-003A**

**1. Background Checklist**

**1.1 Preamble**

Background Checks shall be carried out for all employees who work on the landside and airside restricted areas of the airport.

1. Background checks shall also be carried out for all people, including Civil Aviation Inspectors who are granted unescorted access to the airside.
2. Every file for all employees of each entities and organisations at HKIA or inspectors of NCAA shall have the following information contained in this form.

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| **SECTION 1:**  **Employees Personnel Details** | | | | | | | | |
| **Original identity document/passport/, must be submitted to the permit office**  Yes  No | | | **Foreign passports must be submitted with a valid work permit, business permit and visa**  Yes  No | | | | | |
| Do you currently have a permit?  Yes  No | | | Human Resource Managers Name and Surname | |  | | | |
| Company |  | | Department | |  | | | |
| Company Tel |  | | Company physical  Address | |  | | | |
| Surname |  | | First Full Name | |  | | Initials |  |
| Job Title / Function |  | | Gender | | Male  Female | | | |
| NAM Citizen | Yes  No | | ID Number (Please attach) | |  | | | |
| Date of Birth |  | | | | | | | |
| Country of Origin |  | | Passport Number | |  | | | |
| Employee No: |  | | Contact Number | |  | | | |
| Home Address: |  | | | | | | | |
| Suburb |  | City | |  | Postal Code |  | | |

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| **Authorisation By Employee (Tick In The Box) Before**  **Candidate Is Send To Police For Background Checks** | | | |
| Do you have a criminal record | Indicate if you agree to a Criminal verification by NAMPOL.  Yes  No | | |
| Employers Backgrounds Checks | Indicate if you agree to an Employers Background Checks.  Yes  No | | |
| **Signature of Applicant** |  | **Date of Application** |  |

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| **SECTION 2**  **Nampol To Perform Background Checks In The Following Order:** | | | | |
| a) Criminal Record Background checks shall be conducted by NAMPOL | **This part shall be verified and confirmed by Namibian Police Officer** | | | |
| b) No employer with operational requirements on landside and airside shall employ or hire people to take up employment at HKIA unless such person or people has been cleared by Namibian Police. | Verified By NAMPOL. | Yes  No | | |
| Cleared  or Not Cleared | | | |
| c) No access card shall be issued to people without positive Police Clearance |
| **Signature and Date Stamp of Namibian Police** |  | | **Date of Verification** |  |

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| **SECTION 3**  **Employer To Perform Educational Background Check**  All Stakeholders at HKIA with operational requirements on both landside and airside are require to verify educational qualifications and credentials for potential employees. In doing so, all stakeholders with employees at HKIA has to follow the following guidelines as issued by Namibia Civil Aviation Authority/NCASP Appendix S:   * Verify by phone and check with the last school or tertiary institution. * If possible, get written confirmation that the candidate has been schooling at the particular institution or school * At least three reference must be provided by the applicant | | | |
| **References: #1** | | | |
| **Name of School or Tertiary Institution:** |  | | |
| **Contact Details** |  | | |
| **Consistency of the educational**  **reference give**  **(tick in the block)** | Yes | No | |
| **Brief Description of the Details received from references** |  | | |
| **Signature of the Authorised Persons** |  | **Date of Verification** |  |

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| **References: #2** | | | | |
| **Name of School or Tertiary Institution:** |  | | | |
| **Contact Details** |  | | | |
| **CONSISTENCY OF THE EDUCATIONAL REFERENCE GIVE**  **(tick in the block)** | Yes | No | | |
| **Brief Description of the Details received from references** |  | | | |
| **Signature of the Authorised Persons** |  | | **Date of Verification** |  |

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| **References: #3** | | | | |
| **Name of School or Tertiary Institution:** |  | | | |
| **Contact Details** |  | | | |
| **CONSISTENCY OF THE EDUCATIONAL REFERENCE GIVE**  **(tick in the block)** | Yes | No | | |
| **Brief Description of the Details received from references** |  | | | |
| **Signature of the Authorised Persons** |  | | **Date of Verification** |  |

**Office Only:**

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| **SECTION 5**  **CERTIFIED CORRECT BY** | | | | |
| **Human Resources Manager or Any Senior Official Authorised to Cary out Background Checks** | | | | |
| **Name of Institution/Organisation:** |  | | | |
| **Contact Details** |  | | | |
| **Certified Correct** | Yes | No | | |
| **If not give Reasons** |  | | | |
| **Signature of Human Resource Manager** |  | | **Date of Verification** |  |

**Take Note:** Any incorrect information provided by the employer, or the applicant will result in the permit not being issued and the application will be cancelled.

**Verification by Permit Office:**

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| **SECTION 5**  **CERTIFIED CORRECT BY** | | | | |
| This part must be completed after the follow up calls has been made to the references as provided by applicants’ employer to ensure compliance and accuracy of information provided. No permanent permit shall be approved if information provided is not accurate | | | | |
| **Name of Verifying Officer:** |  | | | |
| **Contact Details** |  | | | |
| **Verified Correctly** | Yes | No | | |
| **If NO give Reasons** |  | | | |
| **Signature of Verifying Officer** |  | | **Date of Verification** |  |
| **Verifying Officers**  **Stamp Number** |  | | | |

**Take Note:** Any incorrect information provided by the employer, the applicant or the verifying officer will result in further penalties and the application cancellation.