(Specimen form of the candidate's application for the selection and of declaration of good faith)

CANDIDATE'S APPLICATION FOR THE SELECTION AND DECLARATION OF GOOD FAITH

_		_ 20
	(date)	
	(place of drawing up)	
Ι,		, hereby request to be allowed
	(forename, surname)	
to participate in the selection to)	
	(name, legal form of the	ne company)
the Board / Supervisory Boacompetences:	ard (delete as appropriate) in	n the following published areas of
1		;
2		;
3		

I hereby confirm that I have made myself familiar with the provisions of the Description of the Selection of Candidates to the Collegial Supervisory or Management Body of a State or Municipal Enterprise, of a State- or Municipality-owned Enterprise, or its Subsidiary, approved by the Resolution No 631 of the Government of the Republic of Lithuania of 17 June 2015 on the Approval of the Description of the Selection of Candidates to the Collegial Supervisory or Management Body of a State or Municipal Enterprise, of a State- or Municipality-owned Enterprise, or its Subsidiary (hereinafter - the Description), I meet all the requirements for candidates, neither me nor persons of my immediate circle am/are related by any sort of relations to the Company to whose Collegial Body I am applying for position, or neither me nor persons of my immediate circle am/are related by any sort of relations to other individuals and legal entities, the relationship with whom could give rise to a conflict of interest while I am in the position of the member of the Collegial Body.

I hereby confirm that the information below and answers to the questions are honest and correct. I specify all legal entities with which I am or have been associated in the last one year as a participant of that legal entity, a member, manager or employee of the Collegial Body or Committee.

I hereby agree that the entity initiating the selection has the right to make a reasoned written request to law enforcement, control and other authorities, bodies or companies for information about me that is in their possession.

I consent / do not consent (delete where not applicable) to processing of my personal data by the Monitoring Agency, as it is defined in the Description, to inform me of the announced selections, and to inviting me to apply for the vacant positions of an independent member of the

I agal form and name of the local antity		
Legal form and name of the legal entity	Nature of the relationship with the legal entity	
es / No questions:		
. Have you specified all legal entities with went the last one year as a participant of that lemployee of the Collegial Body or Commervices?	legal entity, a member, manager or	
2. Are you a person with legal capacity?		
B. Have you been deprived of or has your righten Management / Supervisory Body of a positions been restricted?		
Have you been found guilty of a serious or against property, property rights and proper order, the financial system, the civil service a ecurity or governance procedures, and y criminal record?	ty interests, economy and business nd the public interest, justice, public	
i. Do you meet the established independence to comply with them continuously throughout the Collegial Body?	at the term of office of a member of	
6. Have you been revoked in the last 5 years egal entity for improper performance of duti		
ease send notifications on the selection and	its results by e-mail to:	
obile phone:		