

MAA-NOR Form 4

Acceptance of Nominated Management Personnel

Details of Management	Personnel required to be accepted	as specified in	
1. Name:			
2. Position and org. nu	mber:		
3. Qualifications releva	nt to the item (2) position:		
4. Work experience rel	evant to the item (2) position:		
Applicant's			
signature:		Date:	
On completion places	cand this form under confidential s	overte the MAA NOD	at the address siven at the web mass
https://www.fma.no/m		over to the MAA-NOR a	at the address given at the web page
MAA-NOR use only	and a size of MAAA NOD staff or analys		
Name and signature of	authorised MAA-NOR staff membe	r accepting this person	:
Signature:		Date:	
Name:	Jon A. Olsen		Head of MAA-NOR