

**REGIONAL SEMINARS ON AWARENESS ON RISK ASSESSMENT PROCESSES AND ON DOC 10084:
RISK ASSESSMENT MANUAL FOR CIVIL AIRCRAFT OPERATIONS OVER OR NEAR CONFLICT ZONES
(NAIROBI, KENYA, 23 TO 25 JUNE 2025)**

NOMINATION FORM

Participant information (Please complete the information clearly in BLOCK letters)				
Last (family) name			First name	
Name of the authority, organization or company				
Current position			Experience in the aviation industry, Conflict Zones area (Position and duration)	
Contact information (Work)				
Street and number			Postal Code	
City		State or Province		Country
Telephone (Country code - City code - Number(s))			E-mail	