



Application Form

Cadets' International Week (CIW)

National Defence Academy of Latvia, Latvia, Riga, 06/04/26 to 10/04/26

Remarks:

- Please fill in the yellow & blue fields only.
- Fill in 1 form for both representatives.

CADET 1

Male	Female	Rank, ac. degree(s)	FAMILY NAME	First name(s)

Date of birth DD MM YYYY	Nationality	Passport or ID number	Passport or ID validity until DD MM YYYY

Branch of Service (if available)	Sending institution

Phone number (include country code)	E-mail address
Special dietary or food requirements due to medical or religious reasons	If yes, please specify food you cannot consume
No	Yes

Insert below your picture (preferably a passport picture) – preferably in jpg-format <u>or</u> attach the picture to the mail.

CADET 2

Male	Female	Rank, ac. degree(s)	FAMILY NAME	First name(s)

Date of birth DD MM YYYY	Nationality	Passport or ID number	Passport or ID validity until DD MM YYYY

Branch of Service (if available)	Sending institution



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Phone number (include country code)		E-mail address
Special dietary or food requirements due to medical or religious reasons		If yes, please specify food you cannot consume
No	Yes	

Insert below your picture (preferably a passport picture) – preferably in jpg-format <u>or</u> attach the picture to the mail.

Arrival at Riga International Airport (RIX)	Other (please specify)	On (arrival date) DD MM YYYY	At (arrival time [if available])
Departure from Riga International Airport (RIX)	Other (please specify)	On (departure date) DD MM YYYY	At (departure time [if available])

Please fill in your institution's point of contact's (POC's) data below.				
Male	Female	Rank, ac. degree(s)	FAMILY NAME	
			First name(s)	
POC's phone number (include country code)			POC's e-mail address	
In case of emergency, please give the point of contact (POC).				
Male	Female	Rank, ac. degree(s)	FAMILY NAME	
			First name(s)	
POC's phone number (include country code)			POC's e-mail address	

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