

***After completion of this form, the form must be sent electronically to your
SCK•CEN contact person and to toegang@sckcen.be.
Only electronically completed forms B1 will be accepted.***

SCK•CEN contact person:

**For more information, please
contact SCK•CEN Access Control:**

tel.:+ 32 14 33 20 11
tel.:+ 32 14 33 20 14
e-mail: toegang@sckcen.be



**DOCUMENT B.1:
“Identification form: person”**

| | | |
|--|-------------------|------------------|
| Name: | First name: | Given name: |
| Date of Birth: | | |
| Place of Birth: | Country of Birth: | |
| Language: | | |
| Nationality: | | Sex: |
| Number of the National Register: | - | - |
| <i>If you do not have a Belgian number of the National Register, please provide your passport number and/or your ID card number.</i> | | |
| ID card number: | | Passport number: |
| Legal domicile: | | |
| Street: | Number: | PO box: |
| City: | Postal code: | |
| Country: | | |
| Place of residence, if different from domicile: | | |
| Street: | Number: | PO box: |
| City: | Postal code: | |
| Country: | | |
| Private phone: | | Mobile phone: |
| E-mail: | | |
| Living in Belgium since: | | |
| Name of the firm: | | VAT No: |
| Position at establishment: | | |