Schutzbereich 2

(Schutzbereich 3, wenn 2. und/oder 3. mit „Ja“ beantwortet)

* 1. Anmeldung für Dienstliche Veranstaltungen der Bundeswehr

|  |  |
| --- | --- |
| An: | über: |
|  |  |

1. Bezeichnung/Thema/Ort :

------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Zeitraum von - bis/am:

------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Name :       Vorname:       DGrad:

------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

KrsGrp :       RK:

------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

PK (bei Gästen Geb-Datum) :       PersNr:

------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Str. HausNr: :

------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

PLZ, Wohnort :

------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Telef E-Mail: :        
 ------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Zuständiges Karrierecenter der Bundeswehr (KarrCBw):

------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------2. Gegen mich ist ein gerichtliches Strafverfahren oder ein polizeiliches/staatsanwaltschaftliches

Ermittlungsverfahren anhängig\*  
Nein:   
Ja\*:  seit (Datum):       Grund:

Aktenzeichen Gericht/Staatsanwaltschaft:        
  
 -----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

3. Ich bin in einem Strafverfahren verurteilt oder mit einer Maßregel der Besserung und Sicherung belegt worden\*   
Nein:

Ja\*:  Grund der Verurteilung/Maßnahme:

Aktenzeichen Gericht/Staatsanwaltschaft:       Rechtskräftig seit:

\*Ich bin darüber belehrt worden, dass ich alle noch nicht getilgten oder noch nicht tilgungsreifen strafgerichtlichen Verurteilungen anzugeben habe.

------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------4. Erklärung:

Hiermit erkläre ich, dass ich an folgenden Waffen ausgebildet bin:  
 Pistole P8

Gewehr G3

Gewehr G36

Maschinengewehr MG3

Maschinengewehr MG5

nSAK ausgebildet: Ja  Nein

---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------5. 5. Zusätzlich für Dienstliche Veranstaltungen im Ausland:

Geburtsort :

------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Personalausweis- oder Reisepassnummer :

------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Grenzübertritt Hinreise (Ort und Zeit) :

------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Grenzübertritt Rückreise (Ort und Zeit) :

------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Transportmittel :

(KfzTyp, pol. Kennzeichen oder Fluglinie/FlugNr**)** ------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

6. Hinweis: Gemäß der Allgemeinen Regelung „Die Reserve“ A2-1300/0-0-2 dürfen Sie der Zuziehung nur Folge leisten, wenn Sie dienstfähig sind.

     ,      ,

Ort, Datum, Unterschrift