

THE REPUBLIC OF UGANDA **NON-ALIGNED MOVEMENT SUMMIT, KAMPALA 2024**

SECURITY FORM

GENERAL

- 1. The security planning and implementation for the summit is within the jurisdiction of National Security service acting in a coordinated joint operations concept.
- 2. Thus, the questionnaire focuses on collecting the critical information necessary in planning close protection of the Heads of Delegation/Principals, VIPs and delegates in general.
- 3. The form should be filled by Member states and returned by 15 September 2023.

SECTION A - Head of Delegation (HOD) Information (Please fill in block letters)

Name of Country					
Head of Delegation Particulars	Prefix				
	Full names				
	Official title				
	Sex	Male		Female	
Spouse	Prefix				
	Full Names				
	Official title				
	Sex	Male		Female	
Working language	English		Arabic		
	French		Others Specify		
Dietary preferences and Restrictions	Vegetarian				
	Non vegetarian				
	Halal				
	Any other (Specify)				
Health conditions (If any)					
Other Critical					
information					
If the HOD is accomp	anied by a spouse, fil	I separate	e forms for	reach. Ii	ndicate an

official title or designation i.e. President, Prime minister, Spouse, Minister etc.



<u>SECTION B</u> – Threat Assessment and Excursions

a. Are there any	leisure activities that the VIP prefer?
If any, specify	
b. Do you anticip	pate any threats to target your delegation during the summit?
If any, specify	
SECTION C - Acco	mpanying Security and Flight Details (Please fill in block letters)
Will the HOD be o	accompanied by armed security? YesNo
If Yes specify num	ber
Do you have a pe	ersonal physician for the HOD? YesNo
What mode of Tro	avel will HOD use? If Air, tick appropriately below
Private Aircraft	Charter Aircraft Commercial Aircraft
If Private Aircraft is to be used, specify	(1) Type
	(2) Capacity (persons)
Other mode of transport, specify	