


“FORM 1

Office Use Only	Reference No:		Date received	DD MM Y Y Y Y	Received by:	
 Turks and Caicos Islands	<p align="center">WORK PERMIT APPLICATION FORM</p> <p align="right"><i>(Regulations 33(1) and 39(1))</i></p> <p><input type="checkbox"/> EMPLOYED</p> <p><input type="checkbox"/> SELF EMPLOYED</p>					
Name of Employer						
Name of Employee						
Payment Voucher No.						
<p>INSTRUCTIONS:</p> <p>Please write in BLOCK letters and tick (✓) where relevant.</p> <p>Complete the form in its entirety.</p> <p>Ensure that the necessary documents are attached.</p> <p>Kindly indicate the persons who wish to accompany the temporary worker or are already residing in the Turks and Caicos Islands.</p> <p>Spouse _____</p> <p>Child 1 _____</p> <p>Child 2 _____</p> <p>Child 3 (additional sheet required) _____</p> <p>Child 4 (additional sheet required) _____</p>						

REQUIRED DOCUMENTS AND FEES

EMPLOYED PERSON'S APPLICATIONS

- (1) Two photographs of the foreign worker and each person to be endorsed. Only **ONE** photograph of each individual must be certified
- (2) Certified copy of the foreign worker's passport bio data page showing photograph and date and place of birth
- (3) If on island, proof of legal entry and lawful stay in the Islands
- (4) Valid Police record (Local) for renewals. (Local and Overseas-if first time)
- (5) Certificate of Good Health (please contact the Ministry of Health for further information)
- (6) Confirmation of up to date NHIP and NIB contribution (if previously employed or resident in the islands)
- (7) Cover letter outlining the need for the work permit from the prospective employer
- (8) Completed application form signed by the employer and applicant
- (9) Employer's Business license
- (10) News Paper Advertisements
- (11) Job description
- (12) Employment Contract
- (13) Academic/Professional Qualifications Certificates and Diplomas
- (14) If not from an English speaking country evidence of proficiency in both spoken and written English

FEES

- (1) A non-refundable Administration Fee which will be either \$150.00 or 10% of the work permit fee per application, which-ever is greater.
- (2) Labour Clearance Fees \$100.00 per application
- (3) A non-refundable Fast Track Service Fee of \$500 00 for Fast Track Service, if desired (i.e. 7 days processing service)
- (4) A non-refundable Repatriation Fee for each first time work permit application and/or upon a new work permit application involving a change in employer.
- (5) Any other fees owed to the Turks and Caicos Islands Government with respect to work permits

SELF-EMPLOYED APPLICATIONS

- (1) Two photographs of the applicant and each person to be endorsed. Only ONE photograph of each individual must be certified
- (2) Certified copy of the foreign worker's passport bio data page showing photograph and date and place of birth
- (3) If on island, proof of legal entry and lawful stay in the Islands
- (4) Valid Police record (Local) for renewals. (Local and Overseas-if first time)
- (5) Certificate of Good Health (please contact the Ministry of Health for further information)
- (6) Confirmation of up to date NHIP and NIB contribution (if previously employed or resident in the islands)
- (7) Cover letter outlining the need for the work permit

- (8) Completed application form signed by the applicant
- (9) Bank statement
- (10) Valid Business License
- (11) Proof of Ownership of Company
- (12) Listing of Partners/Shareholders/Certificate of Incumbency
- (13) Business and Staffing Plan including organizational structure
- (14) Academic/Professional Qualifications Certificates and Diplomas
- (15) If not from an English speaking country evidence of proficiency in both spoken and written English

FEES

- (1) A non-refundable Administration Fee which will be either \$150.00 or 10% of the work permit fee per application, which-ever is greater.
- (2) A non-refundable Fast Track Service Fee of \$500 00 for Fast Track Service, if desired (i.e. 7 days processing service)
- (3) Any other fees owed to the Turks and Caicos Islands Government with respect to work permits

ENDORSEMENT OF SPOUSE / CHILDREN

- (1) Two Photographs each
- (2) Marriage certificate
- (3) Copy of spouse / children valid passport (Bio page)
- (4) Medical (certificate of good health)
- (5) Police record (valid for six months)
- (6) In the case of a child police record is need for ten (10) years and older
- (7) A school letter is need for children (private school)
- (8) Birth certificate of spouse and child/children
- (9) The applicant/employer has to demonstrate that the employee's income is sufficient to support him/herself and family in the islands and provide for the registration of the children in a private school.
- (10) Applications are submitted in the same manner as work permits.
- (11) The fee structure is a **\$150.00** non-refundable administrative fee, as well as a non-refundable fee of **\$500** with respect to each endorsee. Both are to be paid upon application.

SECTION A INFORMATION ABOUT THE PERSON TO BE EMPLOYED

A1 Name of person (as printed in the Passport):
 TITLE: Mr. Mrs. Ms. Dr Other (Please specify)

Surname/Last Name

Given/First Names

Middle/Other names known by or have ever been known by

A2 Date of Birth:

D	D	M	Y	Y	Y	Y
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A3 Sex/Gender: Male Female

A4 Country of Birth (including province/state): _____

A5 Country of Citizenship: _____ **A6** Other Country of citizenship: _____

A7 Passport Number

A8 Expiry Date DD MM YYYY

A9 Race/Ethnicity: _____ **A10** Languages spoken: _____

A11 Details of all other valid passports that you have been issued to the person to be employed. You are required to give all information as printed in each passport.

	PASSPORT 1	Passport 2	Passport 3
Country of Issue			
Passport Number			
Expiration Date	DD MM YYYY	DD MM YYYY	DD MM YYYY

A12 Marital Status (tick one)
 Single
 Divorced - Date DD MM YYYY
 Married - Date DD MM YYYY Separated - Date DD MM YYYY

A13 Does the person have biological children? **No** **Yes** – How many? _____

A14 Does the person have legally adopted children? **No** **Yes** – How many? _____

A15 Does the person have step-children? **No** **Yes**
– How many? _____

A16 In which country is the prospective employee residing at the time of this application?

If the person is/was legally resident in the Islands please provide the following.

A17 National Health Insurance Number

A18 National Insurance Number

IMMIGRATION DETAILS FOR THE PERSON TO BE EMPLOYED IN THE TCI

A19 Did the person to be employed ever hold legal residence in the Islands? **Yes** **No**

NB: If the response to A18 is “**YES**,” you are required to complete **ONE** of the relevant sections below regarding the person’s LAST legal immigration status in Turks and Caicos Islands.

SECTION I –WORK PERMIT

A20 If the person’s last legal status was as a **Work Permit Holder** what type of work permit did he or she have? **Temporary** **Annual**

Details of last Work Permit

Name of last Employer		
Job Title/Occupation		
Last Work Permit Number		
Expiration Date		DD MM YYYY

A21 Does the prospective employee have a pending arbitration/reconciliation at the Employment Services Department or Labour Tribunal case? **Yes** **No**

SECTION II – RESIDENCE PERMIT

A22 If the person’s last legal status was as a **Residence Permit Holder** please provide the following information.

A23 Permit Number

A24 Date of Issue

Expiration Date

DD MM
YYYY

DD MM
YYY

SECTION III- ENDORSEE

A25 If the person’s last legal status was as an **Endorsee**, what type of document was he/she endorsed on? **Work Permit** **Residence Permit** **PRC**

A26 Name of Permit Holder

A27 What is the relationship of the permit holder to the prospective employee?

A28 Permit Number

A29 Date of Issue

DD MM

Expiration Date

DD MM YYYY

YYYY

SECTION IV - VISITOR

A30 Did the prospective employee **visit** the Turks and Caicos Islands in the past? **Yes** **No**

A31 What was his/her last date of entry into the Turks and Caicos Islands?

DD MM YYYY

What was his/her last date of departure from the Turks and Caicos Islands?

DD MM YYYY

SECTION B

THE PERSON TO BE EMPLOYED CONTACT INFORMATION

B1 What is the person's residential address and contact information in his/her home country?

Telephone Number

Email

B2 If the person to be employed is residing in the Turks and Caicos Islands, provide TCI contact information below.

Residential address

Telephone Number

Email

SECTION C

DETAILS FOR SPOUSE OF THE PERSON TO BE EMPLOYED

C1 Name of spouse (as printed in the Passport):

TITLE: Mr. Mrs. Ms. Dr Other (Please specify)

Surname/Last Name

Given/First Names

Middle/Other names

known by

or have

ever been known by

C2 Date of Birth:

C3

Sex/Gender: Male Female

C4 Country of Birth (including province/state): _____

C5 Country of Citizenship: _____ **C6** Other Country of citizenship: _____

C7

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

 Passport Number

C8 Occupation _____ **C9** Present country of residence _____

IMMIGRATION DETAILS FOR THE SPOUSE OF THE PERSON TO BE EMPLOYED IN THE TCI

You are required to complete each section below regarding the spouse’s present and/or previous immigration status in the Turks and Caicos Islands.

C10 Did the person’s spouse ever held legal residence in the Islands? **Yes** **No**

NB: If your response to C11 is **“YES,”** you are required to complete **ONE** of the relevant sections below regarding the spouse’s LAST legal immigration status in Turks and Caicos Islands.

SECTION I – WORK PERMIT

C11 If the spouse’s last legal status was as a **Work Permit Holder** what type of work permit did he or she have? **Temporary** **Annual**

Details of last Work Permit

Name of last Employer		
Job Title/Occupation		
Last Work Permit Number		
Expiration Date		DD MM YYYY

C12 Does the spouse of the prospective employee have a pending arbitration/reconciliation case at the Employment Services/Labour Department or Labour Tribunal? **Yes** **No**

SECTION II – RESIDENCE PERMIT

If the person’s spouse last legal status was as a **Residence Permit Holder** please provide the following information.

C13 Permit Number **C14** Date of Issue Expiration Date

	DD MM YYYY	DD MM YYYY
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SECTION III - ENDORSEE

C15 If the person’s spouse last legal status was as an **Endorsee**, what type of document was he/she endorsed on? **Work Permit** **Residence Permit** **PRC**

C16 Name of Permit Holder

C17 What is the relationship of the permit holder to the spouse?

C18 Permit Number

Date of Issue

Expiration Date

DD MM YYYY

DD MM YYYY

SECTION IV - VISITOR

C19 Did the person’s spouse **visit** the Turks and Caicos Islands in the past? **Yes** **No**

C20 What was his/her last date of entry into the Turks and Caicos Islands?
DD MM YYYY

What was his/her last date of departure from the Turks and Caicos Islands?
DD MM YYYY

IMMIGRATION DETAILS FOR THE CHILDREN OF THE FOREIGN WORKER

SECTION D

DETAILS FOR DEPENDENT CHILDREN OF THE PERSON TO BE EMPLOYED

DEPENDENT CHILD 1

D1 Name of person (as printed in the Passport):

Surname/Last Name

Given/First Names

Middle/Other names known by or have ever been known by

D2 Date of Birth:

| D | D | M | Y | Y | Y | Y |

D3

Sex/Gender: Male Female

D4 Country of Birth: _____
Citizenship _____

D5 Country of _____

D6 Passport Number _____

D7 Expiration

Date DD MM YYYY

D8 Present country of residence _____

D9 Name of school currently attending. _____

D10 If this child is residing in the Turks and Caicos Islands what is his/her current immigration status?

Endorsed on --- Work Permit Residence Permit Not Endorsed

D11 What was his/her last date of entry into the Turks and Caicos Islands? DD MM YYYY

D12 What was his/her last date of departure from the Turks and Caicos Islands? DD MM YYYY

D13 Are you seeking an endorsement for this child? Yes No I intend to do so in a future application.

DEPENDENT CHILD 2

D14 Name of person (as printed in the Passport):
Surname/Last Name

Given/First Names

Middle/Other names known by or have ever been known by

D15 Date of Birth: **D16** Sex/Gender: Male Female

D17 Country of Birth: _____ **D18** Country of Citizenship _____

D19 Passport Number _____ **D20** Expiration Date DD MM YYYY

D21 Present country of residence _____

D22 Name of school currently attending. _____

D23 If this child is residing in the Turks and Caicos Islands what is his/her current immigration status?

Endorsed on --- Work Permit Residence Permit Not Endorsed

D24 What was his/her last date of entry into the Turks and Caicos Islands? DD MM YYYY

D25 What was his/her last date of departure from the Turks and Caicos Islands? DD MM YYYY

D26 Are you seeking an endorsement for this child?

Yes No I intend to do so on a subsequent application.

SECTION E EDUCATION DETAILS FOR THE PERSON TO BE EMPLOYED

If more space is required please attach an additional page.

E1 What is the person's last level/type of formal education?

Primary School Secondary/High School Vocational/Trade School College/University

E2 Please provide details of the last two institutions attended below.

Name of Institution 1			
Address of Institution			
Country			
Date Enrolled	DD MM YYYY	Date Completed	DD MM YYYY
Course Pursued			
Certificate/Diploma/Degree Obtained	<input type="checkbox"/> Associate <input type="checkbox"/> Vocational <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Doctorate		

Name of Institution 2			
Address of Institution			
Country			
Date Enrolled	DD MM YYYY	Date Completed	DD MM YYYY
Course Pursued			
Certificate/Diploma/Degree Obtained	<input type="checkbox"/> Associate <input type="checkbox"/> Vocational <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Doctorate		

E3 List ALL Trade or Professional Bodies or Associations with which the person to be employed are affiliated:

Name of Association 1			
Address of Institution			
Country		Date of Membership	DD MM YYYY
Name of Association 2			

Address of Institution			
Country		Date of Membership	DD MM YYYY

E4 Give details of ALL disciplinary action to which you have been subject by such Body or Association:

SECTION F	CHARACTER DETAILS
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F1 For ANY offence, including any driving offence, in any country, has the **person to be employed, or anyone included in this application**, ever been:

- arrested ? **Yes** **No**
- charged ? **Yes** **No**
- convicted? **Yes** **No**
- under investigation? **Yes** **No**
- wanted for questioning? **Yes** **No**

F2 Name of Person: _____

Please state briefly the reason/circumstance of the arrest; if charged, the nature of the offence charged; if convicted the date of conviction and if sentenced, the date of sentencing.

F3 Does **anyone included in this application**, currently have an outstanding arrest warrant in any country? **Yes**
 No

F4 With respect to any country, including the Turks and Caicos Islands, has **anyone included in this application** ever been

- repatriated? **Yes** **No**
- refused entry? **Yes** **No**
- removed or deported ? **Yes** **No**

F5 If your response to any of the questions in **F3** and **F4** above is **“YES,”** provide details below. Insert a new sheet for each person where required.

F6 Name of Person: _____
 Please state briefly the reason/circumstance for the outstanding arrest warrant and or reason for denial of entry or removal from a country.

SECTION G EMPLOYMENT HISTORY DETAILS

G1 Give the following information regarding your PAST working experience starting with the most recent first. (Use extra sheets as needed):

Name of Employer 1			
Job Title			
Main tasks performed			
Country			
Date Employment Started	DD MM YYYY	Date Employment Ended	DD MM YYYY
Reason Employment Ended			

Name of Employer 2			
Job Title			
Main tasks performed			
Country			
Date Employment Started	DD MM YYYY	Date Employment Ended	DD MM YYYY
Reason Employment Ended			

SECTION H DETAILS ABOUT THE EMPLOYER AND THE JOB OFFERED

H1 Name of Company/Firm/Individual (the Employer)

H2 Company Name and address (if applicable)

H3 Telephone Number _____ **H4** Email _____

H5 Fax number _____

If applicable, please give the following information about Company/Firm/Individual Employer:

H6 Business License Number: _____ **H7** Business License Category _____
H8 Expiration Date _____ DD MM YYYY

H9 Company's National Insurance Number: _____ **H10** National Health Insurance Number: _____

H11 What will be the foreign worker's employment status in the company/firm if given a work (tick as permit appropriate):
 Employee (including trainee or intern) Partner Sole Proprietor
 Director
 Shareholder Other (please specify)

H12 What will be the foreign worker's occupation/job title if given a work permit:

H13 What will be the foreign Worker's main duties if given a work permit:

H14 How many days per month will the Foreign Worker be needed to work if given a Work Permit? _____

H15 What is the duration of the Work Permit that being sought?:

Provide the following information on foreign worker's remuneration package if given a work permit:

H16 Basic Salary \$ _____ weekly biweekly monthly

H17 Housing Allowance \$ _____
Allowance \$ _____

H18 Telephone

H19 Transport Allowance \$ _____
Allowance \$ _____

H20 Education

H21 Other Allowances (specify) \$ _____

H22 If the foreign worker's remuneration package includes a bonus program, say how bonus will be calculated:

H23 List the names and qualifications of every Turks and Caicos Islander who applied for the position being offered to the foreign worker (use extra sheet(s) as required):

Name of TCIslander #1		
Contact Information	Tel:	Email:
Qualifications		
Reason why he/she are unable to be hired		
Name of TCIslander #2	Tel:	
Contact Information	Tel:	Email:
Qualifications		
Reason why he/she are unable to be hired		
Name of TCIslander #3	Tel:	
Contact Information	Tel:	Email:
Qualifications		
Reason why he/she are unable to be hired		

SECTION I TO BE COMPLETED BY THE PERSON TO BE SELF EMPLOYED AND DETAILS ABOUT YOUR BUSINESS/COMPANY

I1 Please provide a brief description of the business, for example, who are the customers, what products/services it sells, how many Turks and Caicos Islanders are likely to be employed.
Attach an additional page if more space is required.



SECTION J

DECLARATIONS

J1 Declaration by Employer (Company/Firm/Individual):

I hereby declare that I am authorized to bind the foreign worker named in **Section A.**

I have read and I understand the applicable regulatory conditions of the grant of a Work permit, as specified in the Immigration Ordinance.

I, the Employer consents, for the purpose of assessing this application, for the Government of the Turks and Caicos Islands and any statutory authorities thereof to obtain from and verify information with any person, organization, or any other source; and further, to the release of all information thereby obtained to the Government of Turks and Caicos Islands, Statutory Authorities and authorized agents thereof.

The information as set out in this application are, to the best of my knowledge, true and correct; and that all documents submitted in support of this application are true and authentic copies of the original document.

I understand that it is an offence to provide false or misleading information under Section 97 of the Immigration Ordinance 2015 and that if found guilty, I am liable on summary conviction to a fine of \$20,000 or a term of imprisonment of four years, or to both.

Signature of Employer or Authorized Representative
DD MM YYYY

Date:

J2 Declaration by an Agency (If applicable):

(Applicable if the Employer engage the services of an Agency/Agent)

I hereby declare that I am authorized to bind the Foreign Worker named in

Section A on behalf of the Employer named in Section H:

I, the undersigned, am the Agency personnel handling this application.

I have explained the contents of the application and the applicable regulatory conditions of the grant of a Work permit, as specified in the Immigration Ordinance 2015 to the Foreign Employee and the Authorized Officer of the Employer.

The information as set out in this application are, to the best of my knowledge, true and correct; and that all documents submitted in support of this application are true and authentic copies of the original document.

I understand that it is an offence to provide false or misleading information under Section 97 of the Immigration Ordinance 2015 and that if found guilty, I am liable on summary conviction to a fine of \$20,000 or a term of imprisonment of four years, or to both.

Date: DD MM YYYY

Name and Signature of Authorized Agency Personnel

J3 Declaration by Prospective Employee:

I, _____,
have provided true and correct answers to the questions in this form to my prospective employer or agent acting on their behalf.

I understand that if false or misleading information is submitted, this application may be declined without further notice.

I agree to abide to all laws pertaining to work and residence in the Islands and to inform Immigration Officials about any changes to my circumstances (including a change in my employment or partnership status) that occur after making this application.

I agree to leave the Turks and Caicos Islands when permission of stay in the Islands has ended. If I remain in the Turks and Caicos Islands, I am to subject deportation by Immigration authorities.

I authorise any agency whether in the Turks and Caicos Islands or overseas, including but not limited to border or immigration agencies, education providers, financial institutions, foreign embassies, government authorities, healthcare providers, police or other law enforcement agencies, that holds information (including personal information) related to information on this application form and/or accompanying documentation to disclose that information to enable a decision on this application to be made and to answer enquiries about my immigration status once my application has been decided.

Date:

Signature of prospective Employee
(Please sign within the box above)

DD MM YYYY