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| *OFFICIAL USE ONLY: REFERENCE NUMBER* |  |

IMMIGRATION ORDINANCE 1999, section 38(A)(1-2), 17F(7), 17H(7). Schedule 2(8)

IMMIGRATION (GENERAL) REGULATIONS 2021, section 24 (3)(a)

**FALKLAND ISLANDS GOVERNMENT**

**REGISTERED EMPLOYER SCHEME**

**EMPLOYMENT PERMISSION REQUEST**

**To be completed by Permit Holder / Exempt individual**

**This form is for prospective employees currently holding a Work Permit or an Accompanying Dependent Permit to complete if wishing to take up employment that is NOT on the Workforce Shortage List. Or they are holders of a Residence Permit, or Exempt individuals wishing to take up any employment. Or they are any of the above categories of person wishing to take up Self-Employment.**

|  |  |  |
| --- | --- | --- |
| **1.** | **I (full name)** |  |
| **2.** | **of (full address)** |  |
| **3.** | **request permission to undertake employment for -** | |
|  | **name of employer** |  |
|  | **address of employer in Falkland Islands** |  |
|  | **in the capacity of (job title)** |  |
|  | **at (location in Falkland Islands)** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Proposed start date** | Click here to enter a date. | **Finish date** | Click here to enter a date. |

**Note: cannot exceed any existing permit validity dates**

**4.** **My current permit is a –**

|  |  |
| --- | --- |
| **Work Permit** |  |
| **Accompanying Dependent Permit** |  |
| **Residence Permit** |  |

|  |  |
| --- | --- |
| **Valid until** | Click here to enter a date. |

|  |  |
| --- | --- |
| **Exempt** |  |

**5.** **I have checked the current Workforce Shortage List and the above job is NOT included**

**Tick to confirm**

**Note:** **I understand I cannot commence work in the above role without first receiving the relevant permission from Customs & Immigration**

|  |  |
| --- | --- |
| **Date** | Click here to enter a date. |

**OFFICIAL USE ONLY**

**RESPONSE TO EMPLOYMENT PERMISSION REQUEST**

**From the Falkland Islands Customs & Immigration Service**

To –

|  |  |
| --- | --- |
| **Name** |  |
| It is acknowledged that on this date | Click here to enter a date. |

**You requested permission to undertake employment in a role not included on the Workforce Shortage List / requested employment permission as a holder of a Residence Permit / Exempt individual / requested person to take up Self-Employment –**

With -

|  |  |
| --- | --- |
| **Employer name** |  |

|  |  |
| --- | --- |
| **in the capacity of (job title)** |  |

**In this case -**

**Permission has been granted**

**Permission has not been granted**

**Notification from the above named employer is now required to be sent to Customs & Immigration using - FORM 5a RES4 Employer Notification**

**(not applicable for Self-Employment requests)**