



Immigration & Nationality

WORK PERMIT APPLICATION FORM FOR AN EU/EEA OR SWISS NATIONAL

This application form is to be used by an employer in the Bailiwick of Guernsey to employ a national from the European Union, European Economic Area, or Switzerland under the General Employment Scheme which can be found at www.gov.gg/immigration

Documents to submit with the completed application form.

- Photocopy of applicant's passport. ID cards are not acceptable.
- A completed criminal declaration form by the employee. *This must accompany the completed application form.*

Where do I submit the completed application form? It is recommended that you email the application, wherever possible to immigration@gba.gov.gg Following receipt of an application we will make contact with the employer for payment by either card, cheque or cash.

Alternatively, post the application and supporting documents to:

Guernsey Border Agency, Immigration and Nationality, New Jetty, White Rock, St Peter Port, GY1 2LL

Please tick the appropriate columns

Type of Application	Fee	Please tick	Which Island is the application for?	Please tick
Short term work permit (1 year)	£100		Herm	
Work permit (up to 3 years)	£300		Sark	
Work permit (up to 5 years)	£500		Alderney	
Change of employment	£75		Guernsey	

For employment in Sark or Alderney

For employment in Sark and Alderney, to meet the General Employment Scheme policy for the Bailiwick of Guernsey, this application form will need to be countersigned by a representative of the Sark Chief Pleas or States of Alderney.

Declaration to be completed by a representative of the Sark Chief Pleas or States of Alderney:

I can confirm that to the best of our knowledge there is a need for the employment in Sark as a

_____ (insert job title).

Name of person and position countersigning application _____

Signature for and on Behalf of Sark Chief Pleas _____

SECTION 1 – APPLICANT DETAILS

Title (Mr, Mrs, Ms, Miss, Other): _____

Surname / Family name (as it appears on your passport): _____

Forename(s) (as it appears on your passport): _____

Any other names by which you have been known: _____

Date of birth: Day _____ Month _____ Year _____

Gender: Male _____ / Female _____ (please tick)

Nationality: _____

Passport / ID card Number: _____

Date of issue: _____ Date of expiry: _____

Current address: _____

Telephone Numbers: Home _____ Mobile _____

E-mail address: _____

FAMILY DETAILS

Complete this section if the applicant will be accompanied by any family members.

Full name.
Date of Birth.
Nationality.
Relationship to applicant.

Full name.
Date of Birth.
Nationality.
Relationship to applicant

Full name.
Date of Birth.
Nationality.
Relationship to applicant

SECTION 2 - Your arrival in the United Kingdom (UK) and Islands

Date and place of arrival in the UK and Islands, or INTENDED date of travel.

SECTION 3 – Employment details

Full name and address of Employer:

Name of contact and position of dealing with the application

Telephone number _____ Email address _____

Length of employment contract _____

Job title _____

Please describe main duties and responsibilities of the post.

Employer Declaration and Indemnity Agreement

This declaration must be signed by the employer in the Bailiwick of Guernsey, whose name appears on this application (“the Employer”).

Name of person you wish to employ: _____

- The Employer hereby applies to the States of Guernsey Committee *for* Home Affairs for permission to employ the person named on this application
- The details given in this application are true and complete to the best of the Employer’s knowledge and belief. The Employer understands that if the Employer knowingly fail(s) to provide any relevant information, or the Employer provide(s) information which is false or misleading, the matter may be referred to the appropriate authorities.
- The Employer understands that the Guernsey Immigration and Nationality may carry out any necessary checks on additional paperwork submitted in support of this application.


- The Employer understands that all the information provided with this application will be treated in confidence but agrees that it may be disclosed to the other States Departments and relevant authorities to enable them to carry out their functions.
- The Employer understands that the States of Guernsey may contact any Government authority, including police, judicial and State authorities in all countries in which the person has resided, to seek the release to the insular authorities of all records and information they may possess on the person's behalf concerning investigations, arrests, charges, trials, convictions and sentences.
- **The Employer hereby promises and undertakes to pay the States of Guernsey on demand firstly all monies which are due to the States of Guernsey from the employee and which are unpaid by or on behalf of the employee on the date of demand, and which fall due in the period starting on the date of commencement of the employee's employment with the Employer and ending on the date of issue by the Division to another employer of a work permit in respect of the employee; and secondly all costs of repatriating the employee.**
- The Employer also promises and undertakes to effect and maintain medical health insurance in respect of the employee during the period set out above.

Employer name _____

Employer Signature _____ Date _____

Position _____

For and on Behalf of (the employer) _____

 **The Committee for Home Affairs will process any personal data which you provide, via this form, in accordance with the Data Protection (Bailiwick of Guernsey) Law, 2017. Further information about how your personal data is processed by the States of Guernsey can be found at <https://www.gov.gg/CHttpHandler.ashx?id=121170&p=0> and www.gov.gg/GBA Immigration and Nationality Fair Processing Notice.**

For Official Use Only:

	Done	COMMENTS
W		
P		
CRS and CID		
PM approved		

PERMIT DETAILS:

Number: _____ Date of issue: _____

Duration of permit: _____

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