

FIRST SCHEDULE
FORM 2

Foreign Nationals and Commonwealth Citizens
(Employment) Act, 1973

APPLICATION FOR WORK PERMIT
TO ENGAGE IN AN OCCUPATION FOR REWARD OR PROFIT

- 1. Name of Applicant.
2. Date of Birth.
3. Place of Birth.
4. Nationality.
5. Passport No.
Place of Issue.
Date of Issue.
Expiry Date.
6. Address Here.
7. Last Address if Applicant has lived outside the State within the past two years.
8. Status Single [ ] Married [ ] Divorced [ ]
Separated [ ] Widow or Widower [ ]
(Indicate by ticking appropriate Space).
9. Family relationship with any person belonging to Saint Vincent and the Grenadines
10. Date of arrival or expected date of arrival.
11. Occupation which applicant has followed for last two years.
12. Occupation in which applicant proposes to engage in Saint Vincent
13. If applicant is to be engaged in an occupation with a person, company partnership, firm business or any other body or organisation already established and belonging to Saint Vincent and he Grenadines - give name and address see Part II.
14. If applicant proposes to be self employed - state here
15. Give qualifications, training and experience in paragraph 12.
16. Proposed period for which work permit is desired.
From ..... To .....
17. Will wife or husband, children or any other member of family of applicant be accompanying or joining the applicant in Saint Vincent and the Grenadines
18. If so, state names of wife, husband, children or family with date, place of birth and nationality.
Name Date of Birth Place of Birth Nationality
19. Have you or any of your dependants ever been debarred from entering any country or deported from any country.
If yes give particulars and dates

I hereby declare that the above information is true and correct.

Date..... Signature of Applicant

PART II

(To be completed by employer or in case where applicant is to be self employed)

- 20. Name and address of employer .....
- 21. Type of business or occupation carried on in Saint Vincent and the Grenadines .....
- 22. Date when such business or occupation started in Saint Vincent and the Grenadines .....
- 23. Is such business or occupation registered as a Company, Partnership or registered under the Business Names Act.  
Please state dates of Registration .....
- 24. Where applicant is to be self employed and about to operate a business what provision has been made by the applicant of permitting persons belonging to Saint Vincent and the Grenadines to participate in the financial structure of such a business- give details.....
- 25. State (1) Total Number of persons employed and/or engaged, or to be employed and/or to be engaged.....
  - (2) Number employed and/or engaged, or to be employed and/or to be engaged in each category at
    - (a) Managerial.....
    - (b) Professional .....
    - (c) Technical. ..
    - (d) Otherwise. ....
  - (3) Number of employees belonging to Saint Vincent and the Grenadines employed and/or engaged, or to be employed and/or to be engaged .....
  - (4) Number employed and/or engaged, or to be employed and/or to be engaged in each category at (2) above..
  - (5) Number of Commonwealth Citizens employed and/or engaged, or to be employed and/or to be engaged in each category at (2) above.....
  - (6) Number of Foreign Nationals employed and/or engaged, or to be employed and/or to be engaged in each category at (2) above .....
- 26. Description of post to be followed by applicant referred to in Part I.....
- 27. Steps taken to fill the position referred to at paragraph 26.
  - (a) Advertisement (1) Local .....
  - (2) Abroad .....
  - (3) Name of paper/magazine/periodical of Agency .....
  - (b) Use of circular/or enclosure to High Commissioners .....
  - (c) Personal contact or introduction .....
  - (d) Requisition from Labour Department .....
  - (e) Other sources. ....
- 28. What programme (if any) has employer instituted for training of persons belonging to Saint Vincent and the Grenadines—Give details of programme .with dates and other relevant information. ....

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*Signature of Employer*  
*(or Self Employer)*