



FORM 2  
 (Section 8)  
 Government of Anguilla  
 MINISTRY OF LABOUR  
 VISITING PROFESSIONAL/TECHNICAL  
 WORK PERMIT APPLICATION

Attach 2  
photos here.

1. Name of employer: .....
2. Contact information of employer:
  - email: ..... / .....
  - cell or tele: ...../...../.....
  - Address:.....
  - .....
3. Place of employment (if different to employer): .....
  - .....
  - email: ...../.....
  - cell or tele: ..... / .....
  - Address: .....
  - .....
4. Indicate the type of specialist skill needed: .....
5. Why does the business require this type of specialist skill?.....
6. Explain why the specialist person cannot reside permanently on Anguilla: .....
7. How did you make contact with the visiting professional/technical person: .....

.....  
.....

8. Name of visiting professional/technical person: .....

.....

9. Expected start date:.....

10. Contact information:

email: ...../.....

cell or tele: ...../.....

Address outside of Anguilla: .....

.....

Address in Anguilla: .....

.....

11. Identity Information:

Country of birth.....

Date of birth:.....; age:.....

Nationality: .....

Passport number: .....

12. Can the employee communicate in English: *Reading* Y  N ; *Writing* Y  N ; *Speaking* Y  N ?

13. Qualifications and experience: Attach the curriculum vitae of the person limited to the relevant skill.

14. In the past 10 years, has the applicant been convicted of any criminal offence for which a sentence of imprisonment was imposed - in any jurisdiction? Y N. If yes, provide the following details:

Date	Offence	Sentence
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

15. Does the Applicant have an outstanding arrest warrant in any country? Y  N . If yes, provide details of this: .....

.....  
.....  
.....  
.....

16. Has the Applicant ever been restricted from entering any country or deported from any country?

Y  N . If yes, provide details:

Date	Country	Sentence
.....	.....	.....
.....	.....	.....
.....	.....	.....

**DECLARATION**

I declare that the information provided by me in this application is true to the best of my knowledge and belief.

I understand that any incorrect, misleading or untrue information or the withholding of any relevant information may delay the processing of the work permit or may result in the application being denied.

Name of employer/employer’s representative: .....

Signature of employer/employer’s representative: .....

Position held: .....

Date: ...../...../.....



*(If a Company)*