

**REPUBLIC OF GUYANA
COUNTY OF DEMERARA**

**SERIAL NO. _____
MHA REF NO. _____**

MINISTRY OF HOME AFFAIRS

**AFFIDAVIT IN SUPPORT FOR WORK PERMIT/ EXTENSION OF STAY FOR
NON-NATIONAL TO WORK IN GUYANA.**

I, _____ of _____
Being duly sworn make oath and say that the particulars hereinafter set out in support of
application for Work Permit are true and correct and I rely upon same for purpose of this
application.

Signature of Applicant:

_____/_____/_____
Date:

Witness:- (i) _____

(ii) _____

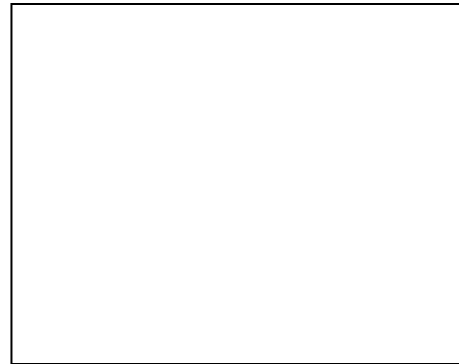


WORK PERMIT APPLICATION FORM

Section A: Particulars of Applicant / Employer:

Complete form in BLOCK letters
If area is inapplicable, please place N.A
(Form to be prepared in triplicate)

Attach one(1) Passport Size Photo here:



1. Name of Employer:

2. Name of Company:

3. Address of Company

4. Telephone No.:

5. Date registered:

Email Address

YYYY/MM/DD

6. Company registration no.:

7. Name, Nationality & Address of Directors:

- (i) _____
- (ii) _____
- (iii) _____
- (iv) _____

8. Name & Address of Guyanese employed: (additional sheets of paper may be used)

- (i) _____
- (ii) _____
- (iii) _____
- (iv) _____

9. Name & Address of Non nationals employed: (additional sheets of paper may be used)		
(i) _____		
(ii) _____		
(iii) _____		
(iv) _____		
10. Reason for employment of non-national as against Guyanese:		

11. That I have been informed and verily believe that should any of the aforesaid particulars prove to be false in material particular not only would the Work Permit, if already issued, be cancelled, but I am liable to be prosecuted in accordance with law.		
_____		_____/_____/_____
Signature of Applicant:		Date:
Witness:- (i) _____		
(ii) _____		
Section B:		
12. Name of non-national (employee):		
13. Date of Birth:	14. Place of Birth:	15. Nationality:
YYYY/MM/DD		
16. Foreign Address:		
17. Local Address:		
18. Present / last place of employment:		
19. Passport no.:	20. Place passport was issued:	21. Date issued:
		YYYY/MM/DD
22. Expiry date of passport:	23. Place of arrival in Guyana:	24. Date of arrival:
		YYYY/MM/DD
25. Occupation:	26. Position in Organization/ Company:	27. Time granted to remain:
28. Skill/ experience:		
29. Period of stay/ work permit needed for non-national:		

30. Number of Work permit with same institution:

If previously granted Work Permit please state expiry date:

YYYY/MM/DD

I, _____ of _____

Being duly sworn make oath and say that the particulars aforesaid set out in support of application for Work Permit are true and correct and I rely upon same for purpose of this application.

Signature of Applicant

Witness: 1 _____

2 _____

Sworn at Georgetown
Demerara, Guyana on this
_____ day of _____
Before me,

Commissioner of Oaths to Affidavits

FOR OFFICIAL USE:

(A). Comments of interviewing officer:

(B). Remarks by reviewing officer:

(C). Approval granted/ not granted:

(D). Date work permit issued:

