

The Immigration and Deportation Act, 2010 (Act No. 18 of 2010)

The Immigration and Deportation (General) Regulations, 2011

| | | ATION FOR AN | | | | | |
|-------|---|------------------------------------|----------------------|-----------------|-----------------|---|--|
| Plea | (Section 28 of t ase complete in block letters | Shaded fields for official use | Permit/Visa | No. 18 of 2010) | | | |
| 1 ica | se complete in block letters | only | Date and Time | | | | |
| Info | mation Required | Information Prov | Information Provided | | | 1 | |
| | | PAI PERSONAI (To be complete | L DETAILS | | · | | |
| 1. | (a) Surname | | <u></u> | | | П | |
| | (b) Other names in full | | | | | | |
| 2. | Sex (Tick ($$) as applicable) | Male | | Female | | | |
| 3. | Date of birth (dd/mm/yyyy) | | | | <u> </u> | | |
| 4. | Place of birth | Town | | Country | | | |
| 5. | Nationality | | | | <u> </u> | | |
| 6. | (a) Passport No. | | | | | | |
| | (b) Place of issue | | | | | | |
| | (c) Date of issue (dd/mm/yyyy) | | | | | | |
| | (d) Date of expiry (dd/mm/yyyy) | | | | | | |
| 7. | Occupation | | | | | | |
| 8. | Address in country of permanent | | | | | | |
| | residence | | | | | | |
| | (a) Physical address | | | | | | |
| | (b) Postal address | | | | | | |
| | (c) Telephone No./Mobile No. | | | | | | |
| | (d) Email | | | | | | |
| 9. | Countries of residence during five years immediately preceding this application | | | | | | |
| | Town | Country | From (dd | /mm/yyyy) | To (dd/mm/yyyy) | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | T () = - | | | | | |
| 10. | Highest education standard attained | (a) Education | | | | | |
| | (Attach certified copy of each | Institution | Qualificat | ion obtained | Year obtained | | |
| | certificate obtained) | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | (1) P (; ; | 1 /m 1 · 1 | | | | |
| | | (b) Professional/Technical | | | | | |
| | | Institution | Qualificat | ion obtained | Year obtained | | |

| 11. | Previous relevant work experience | | | | | | | | |
|-----|--|------------------------|---------|-----------|---|--------------|----------------|---|----|
| 11. | Name of Employer | Nature of | emple | wment | | Perio | 1 of er | nployment | |
| | rante of Employer | 1 vatare or | cinpic | упси | | 1 01100 | <i>a</i> 01 C1 | прюутили | |
| | | | | | | | | | |
| | | | | | | | | | |
| 12. | Does your spouse or parent hold an in | | | | | | | | |
| 13. | If your answer to question is yes, pleas | se provide the | | | | | | | |
| 1.1 | Investor's Permit No. | (1 (1 T | | 1D | | -1 2010 | d T | | 1 |
| 14. | (a) Have you ever applied for a permi Deportation Act, Cap. 123? If yes, give | | ration | ana Dep | portation P | ct, 2010 or | tne in | nmigration an | a |
| | Permit applied for | | applic | ation | | Status of a | applica | ation (pending | σ. |
| | r crimit application | Date of application | | | granted or rejected) | | | 5/ | |
| | | | | | | | | , , | |
| | | | | | | | | | |
| | | | | | | | | | |
| | (b) If the application was rejected, sta | te reasons for rejec | tion: | | | ••••• | | | |
| | | ••••• | | ••••• | • | | ••••• | | |
| 15. | Have you or your spouse ever been re | stricted from enter | ing an | v countr | v or depoi | ted or repa | triate | d from any | |
| 10. | country? If yes, give details below | streted from emer | ing an | y courti | y or depoi | teu or repu | illiate | a mom any | |
| | Country in which entry restricted or | Year of restrict | ion, de | portatio | n or | | Reas | sons | |
| | from which deported or repatriated | repa | triatio | n | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 16. | Have you been convicted of an offence | Lundon onti lotti tiri | thin o | r outoid | 7ambia? | If you area | ifu de | staile belows | |
| 10. | Trave you been convicted of an offence | e under any law wi | umi o | outside | e Zambia: | ii yes, spec | iny de | talis below. | |
| | Nature of offence: | | | | | | | | |
| | Date of conviction: | | | | | | | | |
| | Sentence: | | | | | | | | |
| 17. | Are you fluent in English or any langu | age indigenous to | Zambi | ia? If ye | s, which la | nguage(s)? | | | |
| | | ••••• | | | • | | ••••• | • | |
| | | PAI | RT II | | | | ••••• | • | |
| | | FAMILY | | ILS | | | | | |
| 18. | Marital status | Single Ma | rried | Wi | idowed | Separat | ed | Divorced | |
| 19. | Full names of spouse (if married) | Surname | | | | First Name | e | | |
| 20. | Date and country of birth of spouse | | | | | | | | |
| | (a) Date of birth (dd/mm/yyyy) | | | | | | | | |
| | (b) Place of birth(c) Town and country of birth | | | | | | | | |
| 21. | Number of children/dependants (if | Children | | | Der | endants | | | |
| 21. | any) | Cilitaren | | | DCF | CHaurts | | | |
| 22. | Particulars of children | Name | | Sex | Date of b | irth | Place | e of birth | |
| | | | | | (dd/mm | /yyyy) | (Tov | vn and countr | y) |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 22 | Particulars of dependants | Nama | | Cov | Date of b | inth | Dlage | e of birth | |
| 23. | 1 articulars of dependants | Name | | Sex | Date of t | 11 UI | 1 lace | z OI DII III | |
| | | | | | | | | | |
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| | | | | | | | | | |
| 24. | Appendices | - | | | | | | | |
| | Two recent passport size photographs | | | | | | | | |

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|-------|--|---------------|--|--|--|--|--|
| | Certified copy of current passport | | | | | | |
| | Certified copy of each academic and professional certificate obtained | | | | | | |
| | Letter of offer of employment/ Contract of employment | | | | | | |
| | Certified copy of marriage certificate, if applicable | _ | | | | | |
| | | + | | | | | |
| | Certified copy of birth certificate of each child/dependant | | | | | | |
| I her | DECLARATION I hereby declare that the information furnished by me in this application is true, correct and complete to the best of my knowledge. | | | | | | |
| | I understand that any incorrect, misleading or untrue information or the withholding of any relevant information may affect the issuance of an employment permit or shall result in the revocation of the permit. | | | | | | |
| | Name of applicant Signature | | | | | | |
| ••••• | Date | | | | | | |
| | PART III AUTHORISATION OF APPLICATION AND DETAILS OF EMPLOYMENT (To be completed by employer) | | | | | | |
| 1. | *Application/Authorisation of application | | | | | | |
| | I/we (name of employer) of (physical address) do hereby | | | | | | |
| | *apply/authorize the application, by the person whose particulars are provided in Part I, for an employment permit to enable the said person serve as (state occupation in Zambia) in (state name of employer) for the period *Delete whichever is not applicable | | | | | | |
| 2. | Details of employment offered: | | | | | | |
| | I/we (name of employer) of (postal address) being engaged in (state profession/business) wish to employ the person whose particulars are provided in Part I. (a) Place of employment (b) Job description (c) Period of employment offered (d) Annual salary offered (e) What steps have you taken to employ Zambian citizens to fill this vacancy (give full details) (f) What was the result of the steps taken (under paragraph (e) (if any)? (i) Name of trainee (ii) Period of training (iii) If you do not have a Zambian citizen trained from this post, fill in the following: (A) Minimum entry qualification required for this post (B) Steps taken to engage a Zambian trainee | | | | | | |
| | (g) If this application is approved, will the prospective employee be instrumental in training Zambian citizens? If so, state how | | | | | | |
| | | | | | | | |

| DECLARATION | | | | | | |
|---|--|---|------------------------|--|--|--|
| I hereby declare that the foregoing particulars are correct in every detail. | | | | | | |
| | | | | | | |
| Name of authorised person acting on behalf of employer | | | Signature Signature | | | |
| | | | | | | |
| Position | | • | Date | | | |
| | | | | | | |
| OFFICIAL ST | AMP | | | | | |
| | | | | | | |
| NOTES TO APPLICANT | | | | | | |
| (a) The law requires that applica | nts apply for their employment pern | | | | | |
| for their permits whilst in the | s approved. However, Government country. | employees, volunteers and i | missionaries may apply | | | |
| | not be valid beyond the date of expir | | | | | |
| | and his/her spouse and minor child shall automatically cease to be valid i | | | | | |
| (d) Any application for a variation of the conditions or period of validity of this permit must be made to the Director-General of Immigration. | | | | | | |
| (e) It is an offence to commence of | | | | | | |
| (i) without a valid employment permit; or(ii) under a new employer before change of employer and/or occupation on the Employment Permit is approved. | | | | | | |
| (ii) under a new employer before change of employer and/ of occupation on the Employment Fernit is approved. | | | | | | |
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| | | | | | | |
| Received by: | Officer (Name and Signa | | | | | |
| Officer (Name and Signature) Amount Received: | | | | | | |
| Receipt No.: | | | | | | |
| Employment Permit No: | | | | | | |
| File Ref. No.: | | | | | | |
| Date and place of issue: | | | | | | |
| Remarks: | | | | | | |
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