

# Application for a Work Permit for Employment

Control of Employment Act 2014

**Send completed form with the required fee to:**

*(For information on fees and methods of payment please see page 7)*

Work Permit Office, JobCentre  
Nivison House, 31 Prospect Hill  
Douglas, Isle of Man, IM1 1ET

Please complete in BLOCK CAPITALS and in black ink.

Further information, including a full 'Guide to Work Permits', is available and can be obtained from the address above or via our website <http://www.gov.im/categories/working-in-the-isle-of-man/work-permits/>. Please refer to this information prior to completing this application form.

You may provide further information to support your application in addition to completing this form. You are encouraged to make as strong a case as possible with your initial application as, in the event of refusal, the scope for appeals is limited.

## Part 1

**1.** Title (Mr, Mrs, Ms, Miss, etc.)

Name of contact

Name of employer

Business address of employer

Postcode

Telephone number

Email address

Would you prefer to receive all communication electronically? **Yes**  **No**

Are the contact details different to the employers details? **Yes**  **No**

If **Yes**, please enter details below.

Name of contact

Address of contact

Postcode

Telephone number

Email address

**2.** Nature of business

**3.** How many Isle of Man Workers are already employed by you?

What percentage is this of your total workforce?  %

**4.** What is the job title and precise nature of the employment? (please note the term 'Director' is insufficient)

Part 1 (continued)

5. What is the salary or wage? £   
 Per: hour  week  month  year

Are there to be additional bonuses or tips etc.? Yes  No

If **Yes**, please give details of bonuses or tips.


What are the weekly hours of work? (e.g. 37.5)

Is accommodation provided? Yes  No

If **Yes**, please give details including the charge made to the employee.


6. From what date is the employee required? 

D	D	M	M	Y	Y	Y	Y
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How long is the employment expected to last?  Day(s)  Month(s)  Year(s)  Indefinite

7. Please give reasons for wishing to employ the person named in Part 2.


If the post is of particular importance, please give reasons why? *(Please continue on Page 8 if insufficient space)*


If you think the employment of this person may bring any special economic or social benefit to the Island, please give details of the nature of that benefit. *(Please continue on Page 8 if insufficient space)*


8. For what period is the permit required? *(Permits can be approved for periods of up to 5 years for the same fee)*

1 Year  2 Years  3 Years  4 Years  5 Years  Other

If 'Other' please confirm the period required to be covered by the permit.

From 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

 To 

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

9. Please give the following information about the steps taken to fill the vacancy.

Where or how was the employment advertised?


For how long was the employment advertised?  weeks  months

How many applications were received?

How many Isle of Man Workers applied?

## Part 1 (continued)

## 10. Why were the Isle of Man Workers considered unable to carry out the employment?

(Please continue on Page 8 if insufficient space)


## Part 2 (Potential employee details)

1. Title (Mr, Mrs, Ms, Miss, etc.)  Gender Male  Female  Other (state) Surname First names Previous name(s)  
(if any) Email address Telephone number 2. Date of birth        Town of birth Country of birth UK/EEA Citizen? Yes  No Nationality 

(If born outside the United Kingdom or the EEA please supply a copy of the passport and Visa if applicable)

If a non EEA National, have you confirmed the potential employee has leave to enter and remain and is permitted to work in the Island under the Immigration Act? Yes  No 3. Is English their first language? Yes  No If **No**, do they speak: Little or no English  Conversational English  Fluent English 

Please give details of their proficiency in English including any appropriate qualifications.


4. Address in the Isle of Man (if applicable)   
  
 Postcode 5. Last address outside the Isle of Man (or current home address)   
  
 Postcode 6. National Insurance Number   -   -   -   -  7. Are they: Single  Married  In a Civil Partnership  Co-habiting 8. Are they: Currently resident in the Island  Moving to the Island for this employment 9. Date of arrival in the Isle of Man

Part 2 (continued)

10. Does the individual have any criminal convictions, in the Isle of Man or elsewhere, which are not considered spent for the purposes of the proposed employment? Yes  No

A conviction which is treated as 'spent' under the provisions of the Island's Rehabilitation of Offenders Act 2001, need not be disclosed in answer to this question. If in doubt, please, refer to the guidance for further information.

If **Yes**:

What was the offence?

When did it occur?   /

Where did it occur?

What was the penalty?

*(Please continue on Page 8 if insufficient space)*

11. Is the employment for a craftsman or craftswoman in the building industry? Yes  No

If **Yes**, is the employee included on the Register of Craftsmen and Craftswomen? Yes  No   
*(see notes below)*

If **Yes**, please give their registration number

If **No**, does the employee hold another form of industry recognised skills card? Yes  No

If **Yes**, please give details and supply a photocopy of their card *(Please continue on Page 8 if insufficient space)*

12. If the business is to undertake sub-contract work on a construction project, please state the name and contact details of the main contractor, details of the project and start and finish dates of the contract.

**Notes**

Work permits are not normally granted in respect of craftsmen or craftswomen in the building industry who are not registered under the **Register of Craftsmen and Craftswomen** or do not hold another form of industry recognised 'Skills Card'. Further details can be obtained by calling (01624) 682393, or our website: <https://www.gov.im/categories/business-and-industries/construction/register-of-craftsmen-and-craftswomen/>

**Family Members (or other relevant persons) living as part of the employee's household**

13. Will any family members (or other relevant persons) be living with, or likely to live with, the employee as part of their household? Yes  No

If **YES**, please give details of:

Number of relevant persons:	No. <input style="width: 30px;" type="text"/>	
Age(s) of relevant persons:	Age <input style="width: 30px;" type="text"/>	Age <input style="width: 30px;" type="text"/>
	Age <input style="width: 30px;" type="text"/>	Age <input style="width: 30px;" type="text"/>
	Age <input style="width: 30px;" type="text"/>	Age <input style="width: 30px;" type="text"/>

## Statistical Information

14. Please complete the relevant boxes below otherwise it may delay the processing of your application.

**Employer's Business Sector (please select 1 box only)**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> (001) Agriculture, Forestry & Fishing | <input type="checkbox"/> (040) Ship Management              | <input type="checkbox"/> (082) Accountancy Services           |
| <input type="checkbox"/> (005) Manufacturing Food & Drink      | <input type="checkbox"/> (045) Wholesale Distribution       | <input type="checkbox"/> (083) Education/Teaching             |
| <input type="checkbox"/> (010) Manufacturing Engineering       | <input type="checkbox"/> (050) Retail Distribution          | <input type="checkbox"/> (084) Medical & Health Services      |
| <input type="checkbox"/> (021) Manufacturing Other             | <input type="checkbox"/> (055) Insurance                    | <input type="checkbox"/> (085) Tourist Accommodation          |
| <input type="checkbox"/> (022) Mining & Quarrying              | <input type="checkbox"/> (060) Banking                      | <input type="checkbox"/> (086) Other Professional Services    |
| <input type="checkbox"/> (025) Construction                    | <input type="checkbox"/> (065) Other Financial Institutions | <input type="checkbox"/> (087) Residential/Nursing Homes      |
| <input type="checkbox"/> (031) Electricity                     | <input type="checkbox"/> (070) Property Owning/Management   | <input type="checkbox"/> (091) Other Catering & Entertainment |
| <input type="checkbox"/> (032) Gas & Other Energy              | <input type="checkbox"/> (075) Other Business Services      | <input type="checkbox"/> (093) E-gaming                       |
| <input type="checkbox"/> (033) Water                           | <input type="checkbox"/> (076) Information Technology       | <input type="checkbox"/> (095) Miscellaneous services         |
| <input type="checkbox"/> (035) Transport & Communications      | <input type="checkbox"/> (081) Legal Services               | <input type="checkbox"/> (100) Public administration          |

**Occupation of proposed worker (please select 1 box only)**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> (1100) Management                     | <input type="checkbox"/> (5113) Gardener/Landscaper           | <input type="checkbox"/> (6100) Nursing                               |
| <input type="checkbox"/> (1200) Other Professions              | <input type="checkbox"/> (5119) Farming/Agriculture/Fisheries | <input type="checkbox"/> (6200) Hotel/Caterer/Bar Work                |
| <input type="checkbox"/> (1253) Beauty                         | <input type="checkbox"/> (5215) Welder                        | <input type="checkbox"/> (7100) Retail/Sales/Wholesale/Buyer          |
| <input type="checkbox"/> (2120) Engineering: Skilled           | <input type="checkbox"/> (5230) Mechanic                      | <input type="checkbox"/> (7200) Customer Service Occupations          |
| <input type="checkbox"/> (2130) IS/Telecommunications          | <input type="checkbox"/> (5241) Electrician                   | <input type="checkbox"/> (8120) Groundwork/Plant Operator             |
| <input type="checkbox"/> (2200) Healthcare                     | <input type="checkbox"/> (5312) Bricklayer                    | <input type="checkbox"/> (8130) Production/Assembly Operative         |
| <input type="checkbox"/> (2300) Education/Teaching/Nursery     | <input type="checkbox"/> (5313) Roofer                        | <input type="checkbox"/> (8211) Driver: HGV, PSV etc.                 |
| <input type="checkbox"/> (2400) Finance & Accountancy          | <input type="checkbox"/> (5314) Plumber                       | <input type="checkbox"/> (8212) Driver: Other                         |
| <input type="checkbox"/> (3110) Scientific/Chemist             | <input type="checkbox"/> (5315) Joiner                        | <input type="checkbox"/> (9120) Construction: Unskilled               |
| <input type="checkbox"/> (3113) Engineering: Unskilled         | <input type="checkbox"/> (5316) Glazier                       | <input type="checkbox"/> (9230) Cleaning Services                     |
| <input type="checkbox"/> (3130) Information Technology         | <input type="checkbox"/> (5319) Construction: Other skilled   | <input type="checkbox"/> (9270) Other elementary services occupations |
| <input type="checkbox"/> (3300) Protective Service Occupations | <input type="checkbox"/> (5321) Plasterer                     | <input type="checkbox"/> (9999) Not known                             |
| <input type="checkbox"/> (3400) Culture & Sport Occupations    | <input type="checkbox"/> (5322) Flooring/Tiling               |   |
| <input type="checkbox"/> (3500) Consultant (Business/Legal)    | <input type="checkbox"/> (5323) Painter & Decorator           |   |
| <input type="checkbox"/> (4100) Insurance/Banking Admin        | <input type="checkbox"/> (5400) Textiles & Printing           |   |
| <input type="checkbox"/> (4200) Other Admin/Clerical           | <input type="checkbox"/> (8141) Scaffolder                    |   |

**Type of qualification required for the position (please select 1 box only)**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> No qualifications                                     | <input type="checkbox"/> Up to 4 GCSEs at A to C, NVQ1, GNVQ (Foundation) | <input type="checkbox"/> 5 GCSEs or more at A to C, NVQ2, GNVQ (Intermediate) |
| <input type="checkbox"/> A-levels, ONC, OND, full trade, NVQ3, GNVQ (Advanced) | <input type="checkbox"/> Degree, HNC, HND                                 | <input type="checkbox"/> Post Graduate or Full Professional                   |

**Experience required for the position (please select 1 box only)**

- |                                     |                                    |                                    |
|-------------------------------------|------------------------------------|------------------------------------|
| <input type="checkbox"/> None       | <input type="checkbox"/> 1-2 years | <input type="checkbox"/> 3-5 years |
| <input type="checkbox"/> 6-10 years | <input type="checkbox"/> 10 years+ |                                    |

Does the post require any specific skills, qualifications or experience not listed above? (*Please continue on Page 7 if insufficient space*)

**Fair Processing Notice**

Any personal data submitted will be processed for the purpose of determining this application for a Work Permit in accordance with the provisions of the Control of Employment legislation, including analysis for management purposes and statutory returns. As part of this process personal data may be disclosed to the Social Security and Income Tax Divisions of Treasury to confirm employment status and to the Immigration authorities to confirm workers Immigration status, and also to the Police to confirm unspent criminal convictions are outstanding. I understand that the Department for Enterprise will process any such information in accordance with the Data Protection Act 2002.

## 15. Rehabilitation of Offenders

Are you satisfied that the potential employee has read and understands the information below on the Rehabilitation of Offenders Act 2001? **(You must answer Yes or No)**      Yes       No

The Rehabilitation of Offenders Act 2001 allows certain convicted persons who have not been reconvicted after certain lengths of time, to consider their convictions 'spent'. The following paragraphs briefly summarise this legislation.

The Act enables individuals (except those who are exempt by virtue of the Rehabilitation of Offenders Act 2001 (Exceptions) Order 2001), to refrain from disclosing details of convictions **unless**;

- it involved a custodial sentence for a term exceeding 30 months or for 'Life', or
- it was a sentence of detention during Her Majesty's Pleasure, in relation to young offenders.

Otherwise, those convicted at the age of 17 years or over may consider as spent the following convictions after the following periods of time:

Sentence	Rehabilitation period
A sentence of custody for a term not exceeding 6 months.	7 Years
A sentence of custody for a term exceeding 6 months but not exceeding 12 months.	8 Years
A sentence of custody for a term exceeding 12 months but not exceeding 18 months.	9 Years
A sentence of custody for a term exceeding 18 months but not exceeding 30 months.	10 Years
A fine or any other sentence subject to rehabilitation under the Act, <b>except</b> a conditional discharge, a probation order, a curfew order, an attendance centre order, a reparation order, a Court bindover, a care order or a supervision order.	5 Years
An Absolute Discharge. Where the conviction imposed any disqualification, disability, prohibition or other time limited penalty.	6 months from the date of the conviction to the date it ceases to have effect.
A Conditional Discharge. A Recognisance to Keep the Peace, or be of Good Behaviour. A Probation Order. A Curfew Order. An Attendance Centre Order. A Reparation Order.	1 Year from the date of conviction, or a period beginning with that date and ending when the sentence ceases or ceased to have effect (whichever is the longer).
Hospital Order.	5 years from the date of conviction or 2 years from the end of the hospital order (whichever is the longer).

*(Rehabilitation periods for persons under the age of 17 at the time of their conviction will generally be half of those specified above)*

Declaring convictions does not automatically exclude applicants from gaining a Work Permit. Each case is considered on its merits.

### Note

The above summary should not be regarded as a complete or authoritative statement of the;

- Rehabilitation of Offenders Act 2001, and
- Rehabilitation of Offenders Act 2001 (Exceptions) Order 2001, and
- Rehabilitation of Offenders Act 2001 (Exceptions) (Amendment) Order 2005.

**In case of doubt, you should seek your own legal advice.**

## Declaration

I apply for a permit to employ the person named in Part 2 of the application and declare that to the best of my knowledge and belief the information I have given is true and complete. I understand that records relating to the recruitment process, identification verification and relevant background checks (or employee declaration) should be maintained and available for inspection by the Department upon request.

I undertake to inform the Department within 14 days if, after the permit is granted, the person fails to commence employment or should they leave the employment following commencement,

For permits granted for periods less than 5 years, should you wish to renew the permit you must complete and return the renewal portion on the permit not less than 1 month before the expiry date.

I understand that any person who makes a false statement in order to obtain a permit is guilty of an offence for which he/she may be imprisoned for up to 6 months, or fined up to £7,500 or both. A permit may be revoked if the application is found to contain a false statement or to omit a material particular.

**Signature**

**Date**

D	D	M	M	Y	Y	Y	Y
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**Print name**

## Work Permit Fee

An application for a work permit must be accompanied by a fee of **£60**. This fee is not refundable if your application is refused.

## Credit/Debit Card Payment

Visa 
 MasterCard 
 Maestro 
 Delta 
 Switch 
 Solo

Amount to be charged to my account **£**

Name on card

Card number

Start date 

M	M	Y	Y
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 Expiry date 

M	M	Y	Y
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Security code  (3 digits on signature strip) Issue number (Switch only)

Card billing address if different to the address of the person applying

Postcode

## Payment by Account (by prior arrangement only)

Company name

Account number

Name of authorising person

## Other Payment Methods

Cash should not be sent through the post, however, payment can be made in person at the public counter within the JobCentre, Prospect Hill, Douglas. Cheques should be made payable to **'Isle of Man Government'**.

