FORM 1

National Industries Park

☐ **VISIT** ☐ **EMPLOYMENT** ☐ **RELEASE TRANSFER** ☐ **LOCAL TRANSFER**

(APPLICATION SHOULD BE TYPED IN CAPITALS)

IS THE APPLICANT CURRENTLY IN UAE?

IS THE PERSON FOR WHOM THIS APPLICATION IS REQUESTED IN THE UAE NOW? ☐ YES ☐ NO

(If Yes, additional payment will be incurred)

Name: (Mr./Mrs./Miss) _____
(as per the passport)

Father's name: _____ Mother's Name: _____

Husband's Name: _____ Sex: ☐ MALE ☐ FEMALE

Languages Spoken: (1) _____ (2) _____ Nationality: _____

Marital Status: _____ Place of Birth: _____

Date of Birth: _____ Religion: _____

Birth Country: _____ Education: _____

Designation: _____

Basic Salary: DHS _____

Accomodation ☐ Yes ☐ No ☐ Allowance _____ Food ☐ Yes ☐ No ☐ Allowance _____

Transport ☐ Yes ☐ No ☐ Allowance _____ Other Allowance _____

Medical Type: ☐ PRIVATE INSURANCE ☐ GOVERNMENT

Passport Type ☐ NORMAL ☐ DIPLOMATIC ☐ TRAVEL DOCUMENT

Passport No : _____ Place of Issue: _____

Country of Issue: _____ Date of Issue: _____ Date of Expiry: _____

Address: _____

(Outside UAE): _____ Telephone: _____

Company's Name: _____

License No : _____ Contact Person & Tel No : _____

Details of the accompained person - endorsed in Applicant Passport **(ONLY FOR VISIT VISA)**

Name: _____

Relation with applicant: _____ Sex ☐ MALE ☐ FEMALE

Date of Birth: _____ Place of Birth: _____ Birth Country: _____

This applicarion should be accompanied with:

1. Two (2) photocopies of the passport.
2. One (1) passport size photo with application and Two (2) with passport.
3. Bank Guarantee : 1.5 times Basic Salary +one way IATA fare.
4. Company Letter (for Visit Visa)

Authorised Signature _____

Title _____

Date Submitted _____

FOR NIP OFFICIAL USE

Bank Guarantee ☐ Yes (Amount Dhs:----------) ☐ WAIVED ☐ EMPLOYMENT ☐ VISIT ☐ TRANSFER ☐ MEDICAL TEST ☐ HEALTH CARD

Date Received: _____

Post No.: _____

Remarks: _____

Amount: Dhs _____ Receipt No.: _____

Approved: Manager - Customer Service

CEC No.: _____ Date of Issue: _____ Date of Expiry: _____

Entry Permit No.: _____ Date of Expiry: _____

Internal Transfer w.e.f: _____ Date of Joining: _____

Internal Approvals (1): _____

Internal Approvals (2): _____

R.P No.: _____ Date of Issue: _____ Date of Expiry: _____