

PERMISSION TO CONTINUE WORKING AMENDMENT APPLICATION TO ADD OR REMOVE DEPENDANT(S)

Completed applications should be addressed to:

The Director of WORC, P.O. Box 1098, Cayman Islands, KY1-1102

Do not leave any question blank. If a question does not apply to you insert "Not Applicable" or "N/A" in the space provided.

If you have Permission to Continue Working and you wish to add or remove Dependant(s), use complete this form.

If you have an application for Permanent Residence pending and wish to add or remove dependants you must complete this application and also complete and attach Form R37A - Dependant Information Form Request to Include Dependants. In this case, Form R37A will be appended to your application for Permanent Residence.

NOTES: (i) This form should be used where the employer is seeking to share the work permit with an additional employer or the Job title is to be changed or the work permit commencement date is to be changed. (ii) Use separate sheet of paper if necessary. (iii) Retain a copy of all applications and amendments. (iv) If the employer / additional employer is a company; all communication will be sent to the contact information associated with the company's Trade & Business License as held by the Department of Commerce and Investment.

DO NOT USE LIQUID PAPER OR CORRECTION TAPE, IF AN ERROR IS MADE CROSS OUT AND INITIAL THE CHANGE(S) OR USE A FRESH PAGE

			APPLICATION FORM CON	NTAINS 3 PAGE	
I have a Permanent Residency Application Pending			an appeal pending		
	Applic	cant Details			
1. File Number (if known)	Also known as "Work Reference Number")				
Name as it appears in valid Passport					
2. Surname (Last Names)	Given Names (First Names)		Maiden Name (if applicable)	Maiden Name (if applicable)	
3. Date of Birth DD/MM/YY					
4. Employer's Name (if applicable)					
Depend	dant Details - Please selec	ct one or both of the followi	ng options.		
5. Add dependant(s)					
Name	Date of Birth	Nationality	Relationship		
	DD/MM/YY				
	DD/MM/YY				
6. Remove dependant(s)					
Name	Date of Birth	Nationality	Relationship		
	DD/MM/YY				
	DD/MM/YY				
Provide reason(s) for dependant(s) removal					



PCW AMENDMENT TO ADD OR REMOVE DEPENDANT(S)

Do Not leave any question blank. If a question does not apply to you, insert "Not Applicable" or "N/A" in the space provided. Use separate sheet of paper if necessary.

Declaration

I declare the information contained in this application to be correct to the best of my knowledge and belief and I am aware that it is a criminal offence to make a statement or representation that is false in a material fact which I know to be false or do not believe to be true.

In accordance with Section 56(4)(b) of The Immigration (Transition) Act, 2021, I hereby agree to submit to being Fingerprinted/Palm-printed for the purpose of identity verification and criminal checks domestically and internationally.

Applicant's signature

Date (dd/mm/yy)

Date (dd/mm/yy)

Employer's signature (if applicable) Agency signature not acceptable



Amendment Form Checklist To Add or Remove Dependant(s) to a Permission to Continue Working Application

This list is a summary of general requirements for ALL applicants.

The Director of WORC and the CS&PR Board reserve the right to request additional information or documentation.

Administrative non-refundable fee of C.I. \$100, (please note dependant & non-refundable, repatriation fee is payable if approved, not at time of application)
Application form duly completed, signed and dated by applicant and employer (if applicable). Please do not leave any question blank. If a question does not apply to you, insert, "not applicable" or "n/a" in the space provided.

IF ADDING A DEPENDANT UNDER THE AGE OF 18

- Certified Copy of birth certificate
- Copy of passport bio-data page
- A letter from a **local school** confirming acceptance/attendance
- $^{-}$ Employment Letter from both parents including hours worked per week, monthly income and other benefits received
- Income and expense report (if monthly combined salary falls below \$3,500)

IF ADDING A DEPENDANT OVER THE AGE OF 18

- Certified Copy of birth certificate
- Copy of passport bio-data page
- Copy of marriage certificate/civil partnership certificate, if applicable
- If full-time student, a letter from attending **school** confirming acceptance/attendance
- Employment Letter including hours worked per week, monthly income and other benefits received. (You may submit an employment letter for your spouse if you feel it will aid your application.)
- Signed and sealed, Police Clearance Certificate, less than 6 months old, from last place of residence
- Medical declaration cover letter, may be no older than one year old at date of submission
- Income and expense report (if monthly combined salary falls below \$3,500)

IF APPLICANT IS THE FATHER, IS UNMARRIED, AND ADDING A CHILD AS A DEPENDANT

- Proof of legal custody of the child
- Copy of passport bio-data page
- Employment Letter from father's employer including hours worked per week, monthly income and other benefits received.
- A letter from a local school confirming acceptance/attendance
- Income and expense report (if monthly combined salary falls below \$3,500)

*Please note if application is approved the dependant fee and non-refundable repatriation fee is due

REMOVE DEPENDANT

- Application fully completed, signed and dated by **applicant** and **employer**
- Documentation supporting removal of dependant (i.e. divorce decree / Legal document of separation)