



**BUSINESS STAFFING PLAN BOARD**

**Application for the Grant or Renewal of a Business Staffing Plan**

The form should be addressed to:  
The Secretary of the Business Staffing Plan Board, P.O. Box 1098, Grand Cayman KY1-1102, CAYMAN ISLANDS.

**NOTES:** 1) Please provide a copy of the company's Organizational Chart.

APPLICATION FORM CONTAINS 8 PAGES

Please choose one option.

Application for the grant of a Business Staffing Plan

Application for the renewal of a Business Staffing Plan

Business Staffing Plan No. \_\_\_\_\_

**PART I**

1. Name of Business \_\_\_\_\_

2. Postal Address: \_\_\_\_\_

3. Contact Person \_\_\_\_\_

4. Telephone \_\_\_\_\_

5. Email Address \_\_\_\_\_

6. Nature of Business (if you are a conglomerate or a group of companies, list/explain) \_\_\_\_\_

7. Under which law is the business licensed to operate? \_\_\_\_\_

8. Total number of employees \_\_\_\_\_

9. Number of Caymanian employees (including Caymanian Status holders) \_\_\_\_\_

10. Number of non-Caymanian employees (Note: the Board pays particular attention to the current ratio of Caymanians to non-Caymanians, and the 5-year projected ratio.)

11. Of the non-Caymanian employees how many are:

a) Permanent Residents with the right to work? \_\_\_\_\_

b) Residency & Employment Rights Certificate Holders? \_\_\_\_\_

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**PART 2**

12. Please complete the table below in respect of all CAYMANIAN employees, continuing on an extra page if necessary:

	FULL NAME	ACADEMIC, PROFESSIONAL, OR TECHNICAL QUALIFICATIONS OR CERTIFICATIONS (IN ADMINISTRATIVE/ SUPERVISORY POSITIONS AND ABOVE)	TITLE OF POSITION(S) OCCUPIED	NO. OF YEARS IN THE ORGANIZATION
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

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**PART 2, QUESTION 12 CONTINUED**

	FULL NAME	ACADEMIC, PROFESSIONAL, OR TECHNICAL QUALIFICATIONS OR CERTIFICATIONS (IN ADMINISTRATIVE/ SUPERVISORY POSITIONS AND ABOVE)	TITLE OF POSITION(S) OCCUPIED	NO. OF YEARS IN THE ORGANIZATION
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				
33				
34				
35				
36				
37				
38				
39				
40				

**Grant or Renewal of a Business Staffing Plan**

**PART 3**

13. Please complete the table below in respect to all NON-CAYMANIAN employees, continuing on an extra page if necessary:

Position NO.	FULL NAME	NATIONALITY	TITLE OF POSITION(S) OCCUPIED	IMMIGRATION CATEGORY (SEE NOTE 1)	POSITION HELD SINCE	Workers Ref. Number
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						

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**PART 3, QUESTION 13 CONTINUED**

POSITION NO.	FULL NAME	NATIONALITY	TITLE OF POSITION(S) OCCUPIED	IMMIGRATION CATEGORY (SEE NOTE 1)	POSITION HELD SINCE	Workers Ref. Number
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						
36						
37						
38						
39						

**NOTE 1**

WPH = WORK PERMIT HOLDER  
PR/RTW = PERMANENT RESIDENT WITH RIGHT TO WORK

WPH/MTC = WORK PERMIT HOLDER MARRIED TO CAYMANIAN  
RERC = RESIDENCY & EMPLOYMENT RIGHTS CERTIFICATE HOLDER

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**PART 4**

14. Out of the employees listed in Part 3, excluding those who are Permanent Residents or holders of a Residency & Employment Rights Certificate (RERC), please indicate the likelihood of each position being filled by a Caymanian, a Permanent Resident or a RERC holder, and the anticipated length of time in respect of each position before that happens.

POSITION NO. (TAKEN FROM PART 3)	TITLE OF POSITION(S) OCCUPIED <i>(see note 1 below)</i>	LIKELIHOOD OF POSITION BEING FILLED BY A CAYMANIAN OR PERMANENT RESIDENT/RERC HOLDER (STATE QUALIFICATIONS AND THE COMPETENCIES REQUIRED FOR THE POSITION, AND ANY UNIQUE SKILLS OF THE INCUMBENT, MENTION ANY CHALLENGES, SUCH AS LABOUR MARKET AVAILABILITY) <i>(see note 2 below)</i>	IF LIKELY, INDICATE TIME LINE

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**PART 4, QUESTION 14 CONTINUED**

POSITION NO. (TAKEN FROM PART 3)	TITLE OF POSITION(S) OCCUPIED <i>(see note 1 below)</i>	LIKELIHOOD OF POSITION BEING FILLED BY A CAYMANIAN OR PERMANENT RESIDENT/RERC HOLDER (STATE QUALIFICATIONS AND THE COMPETENCIES REQUIRED FOR THE POSITION, AND ANY UNIQUE SKILLS OF THE INCUMBENT, MENTION ANY CHALLENGES, SUCH AS LABOUR MARKET AVAILABILITY) <i>(see note 2 below)</i>	IF LIKELY, INDICATE TIME LINE

- NOTES**
- (1) Title of position occupied must be same as corresponding position number in Part 3
- (2) If it is unlikely that this position could ever be filled by a Caymanian or Permanent Resident/RERC holder, please give reasons.

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**PART 5**

15. Please outline below the anticipated percentage & numerical growth in staffing of the business and its future plans for the next three to five years (Provide an organizational chart, include ratio of Caymanians to non-Caymanians.)

16. Please outline the commitment of the business to education and development locally including scholarships, training schemes and in-house training. Provide information regarding direct and/or indirect investments in educational activities. Provide training report, and progress reports. If in-house scholarship programme, provide details of current scholarship recipient.

17. Please provide a general statement of the company's recruitment policy. Provide general policies. The board may also find the following useful: Details on promotion and succession policies, and details of employment turn-over in past 2 years, particularly in the managerial level and above.

18. Please identify the number of new work permits (in addition to those listed in Part 3) that will be required in at least the next three to five years, the positions that they will be required for and the length of validity required for each of the work permits (provide organizational chart, with 5-year outlook & showing new posts. If possible, include ratio of Caymanians and non-Caymanians).

The Board suggests a Table, as an addendum to the summary data provided for questions 15, 16 and 18. The following example may be useful.

List of Positions by Department	Current staff count	3-5 year projected head count	% Increase	Future # of Caymanians Anticipated	Future # of Work Permits

**DECLARATION**

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

Signed \_\_\_\_\_

Name in Block letters \_\_\_\_\_

Position within the Company \_\_\_\_\_