



WORC

WORKFORCE OPPORTUNITIES & RESIDENCY CAYMAN
CAYMAN ISLANDS GOVERNMENT

BUSINESS VISITOR PERMIT

Application For The Grant Of A Business Visitors Permit

Completed application for a work permit should be addressed to: The Director of WORC, P.O. Box 1098, Grand Cayman KY1-102, CAYMAN ISLANDS

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.

NOTES: (i) Refer to the checklist accompanying this form for additional documents required to process this application. (ii) Use separate sheet of paper, where necessary, to thoroughly answer each question. (iii) Retain a copy of all applications and attachments provided to the WORC Department. (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

PART 1 - TO BE COMPLETED BY EMPLOYEE

1. Surname (Last Name) _____ Maiden Name _____ Given Names (First Names) _____

2. Nationality _____ Date of Birth _____ Gender ☐ Male ☐ Female

3. Passport No _____ Date of Issue _____ Place of Issue _____ Date of Expiry _____

4. Address _____

District _____ P.O. Box & KY _____ Telephone _____

Address _____

5. Is English your native language? ☐ Yes ☐ No If No, what is your native language? _____

Do you speak English? ☐ Yes ☐ No

Do you write English? ☐ Yes ☐ No

IMPORTANT NOTE:

If from a non-English speaking country, the applicant will be required to undertake an English test.

If the applicant receives a failing score, they will not be able to take up employment in the Cayman Islands.

6. Dates and addresses of all places where you have lived for more than 6 months during the past 10 years other than stated in reply to question 4.

From	To	Address
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_____	_____	_____
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_____	_____	_____
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_____	_____	_____
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7. Position to be filled? _____

8. What professional or technical qualifications do you have for this position?

9. How many years of experience do you have that are relevant to this position? _____

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10. (i). Have you ever been arrested or charged with a criminal offence in any country (including the Cayman Islands)? If you answered yes, please give details: ☐ Yes ☐ No

Nature of Offence	Date	Location	Verdict and Sentence

(ii). Have you ever been convicted of a criminal offence in any country (including the Cayman Islands)? If you answered yes, please give details: ☐ Yes ☐ No

Nature of Offence	Date	Location	Verdict and Sentence

11. Have you ever been deported from or refused entry to:

(a) the Cayman Islands ☐ Yes ☐ No If you answered yes, please give details

(b) any other Country ☐ Yes ☐ No If you answered yes, please give details

12. Have you ever been actively involved in politics in or outside the Cayman Islands? ☐ Yes ☐ No
If Yes, provide details including dates of such activities.

13. Have you ever had a permit to work refused, revoked or not renewed upon application in any country during the past 15 years? If Yes, when, where and for what reasons? ☐ Yes ☐ No

14. Are you in good physical and mental health? If no, please give details: ☐ Yes ☐ No

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 fact which I know to be false or do not believe to be true.

In accordance with Section 56(4)(b) of The Caymanian Protection Act (2022 Revision, I hereby agree to submit to being Fingerprinted/Palm-printed for the purpose of identity verification and criminal checks domestically and internationally.

Employee Name	Employee Signature	Date (DD/MM/YYYY)
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PART 2 - TO BE COMPLETED BY THE PROSPECTIVE EMPLOYER

1. Name of employer or employing company _____
Trade name (if different from above) _____
2. Nationality (if applicable) _____ Date of Birth (if applicable) _____
3. Postal Address & KY _____
4. Tel # (Work) _____ Tel # (Home) _____ Email Address _____
5. Nature of business or occupation of employer _____
6. State under which law business is licensed to operate _____
Expiry date of current licence _____ Licence number _____
7. State Job title for required position and provide description of duties and responsibilities.
8. What skills, qualifications and experience are required for this position?
9. How much will the employee receive in salary or wages from additional employer? _____
What is the minimum number of hours the employee will be required to work? _____ ☐ Day ☐ Week ☐ Month
What other benefits, (if any) does the worker receive?
10. Please explain the need for this worker. (A cover letter may also be submitted.)
11. What is the maximum number of times PER CALENDAR YEAR that you will require the employee to visit? _____
TWO VISITS PER YEAR IS MINIMUM FOR BVP!
12. What is the maximum duration of the stay during each visit? _____

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 fact which I know to be false or do not believe to be true.

Signature of Employer (Cannot be Agency Signature)

Date (DD/MM/YYYY)

Signature of Additional Employer (Cannot be Agency Signature)

Date (DD/MM/YYYY)

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BUSINESS VISITORS PERMIT PAYMENT LOG

1. Name of Employer_____
2. Name of Business Visitor_____
3. Business Visitor's Occupation_____

Note: Use a separate application form for each person requesting a Business Visitors Permit.

4. Number of visits requested in the calendar year for which this application is being made?TWO VISITS PER YEAR IS MINIMUM FOR BVP1 _____
5. Multiply the number of visits per calendar year by the appropriate fee in this table:

	Grand Cayman Fee	Cayman Brac/Little Cayman Fee
Annual Work Permit fee in the range of CI \$10,401 - \$32,400	CI \$750.00 per visit	CI \$562.50 per visit
Annual Work Permit fee in the range of CI \$2,101 - \$10,400	CI \$375.00 per visit	CI \$281.25 per visit
Annual Work Permit fee up to CI \$2,100	CI \$150.00 per visit	CI \$112.50 per visit

All \$ figures in Cayman Islands Dollars

(Visits x Fee) SUB-TOTAL

Add an administrative filing fee of CI\$500

TOTAL FUNDS SUBMITTED

Payment method: Cash/Cheque (delete as appropriate)

Cheque No (if Cheque)

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THIS LIST IS A SUMMARY OF GENERAL REQUIREMENTS FOR ALL APPLICANTS. THE DEPARTMENT OF WORC RESERVES THE RIGHT TO REQUEST ADDITIONAL INFORMATION OR DOCUMENTATION AS IT SEES FIT.

- ☐ Application form duly completed, signed and dated by employee and employer. **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**
- ☐ Cover letter signed by Employer with detailed summary of why the Business Visitors permit is required.
- ☐ A Medical Declaration Cover Letter, must be less than one year old at date of submission.
- ☐ A minimum of 2 visits per calendar year are required to qualify for a Business Visitor Permit.
- ☐ Correct fee, including non-refundable CI\$500 application fee.
- ☐ 1 full face passport sized photograph
- ☐ 1 profile passport sized photograph
- ☐ Original signed and sealed, Police Clearance certificate, less than 6 months old, from last place of residence.
- ☐ Where the employer is licensed by another body other than the Trade & Business Licensing Board, proof of current license.