



# WORC

WORKFORCE OPPORTUNITIES & RESIDENCY CAYMAN  
CAYMAN ISLANDS GOVERNMENT

## APPLICATION FOR CHANGE OF EMPLOYMENT

**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. RETAIN A COPY OF ALL APPLICATIONS AND ATTACHMENTS PROVIDED TO WORC.**

**NOTE:** Application must be submitted within 3 days of work permit cancellation for Section 64 exemptions.x

**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**

### REQUIRED SUPPORTING DOCUMENTATION

Applicant seeking exemption from the one year departure requirement due to special circumstances must provide the following:

- Completed application form (all questions MUST be answered)
- Copy of passport bio-data page
- Cancellation letter stating the last date of employment (DD-MM-YYYY)

### PERSONAL DETAILS OF APPLICANT

- File Number (if known) \_\_\_\_\_ (Also known as "Work Reference Number")  
\_\_\_\_\_
- Surname (Last Name) \_\_\_\_\_ Maiden Name \_\_\_\_\_ Given Names (First Names) \_\_\_\_\_
- Nationality \_\_\_\_\_ Date of Birth \_\_\_\_\_ Gender  Male  Female
- Passport No \_\_\_\_\_ Date of Issue \_\_\_\_\_ Place of Issue \_\_\_\_\_ Date of Expiry \_\_\_\_\_
- Personal Email Address \_\_\_\_\_

### PREVIOUS EMPLOYMENT INFORMATION

- Previous Employer name or Company \_\_\_\_\_  
Employer Email \_\_\_\_\_  
Job Title Held \_\_\_\_\_  
Work Permit Expiry Date \_\_\_\_\_

### CHANGE OF EMPLOYER REQUEST TYPE

- Change of Employer Exemption Request Type under Section 64.

REASON	PROOF REQUIRED
I was required to work overtime regularly without compensation.	Proof of documents filed with the Department of Labour and Pension
I was required to work without an agreement that provided that no overtime would be paid for extra hours of work or without compensation, and that was approved by and registered with a Labour Tribunal established under section 74 of the Labour Act (2021 Revision)	Proof of documents filed with the Department of Labour and Pension (DLP)
I was required to do work of a nature outside of my job description on a regular basis, without compensation	Documents filed with the Department of WORC or a copy of the complaint made to the Department of WORC
I was discriminated against on any of the grounds set out in section 80(1) of the Labour Act (2021 Revision)	Proof of documents filed with the Department of Labour and Pension (DLP) or the Gender equality Tribunal
I was the victim of retaliation by the person's employer in response to a complaint or concern made to or about the employer	RCIPS report
I was the victim of harassment, including sexual harassment, physical harassment, verbal harassment, and bullying;	RCIPS report
The position has become redundant	Redundant/cancellation letter from previous employer
Any other reason/s	If your circumstance does not fit any of the above-listed reasons, please complete Question 8 in detail and provide any supporting documentation you deem necessary



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## ANY OTHER REASON/S

8. Applicants must briefly describe the special circumstances leading to the request for exemption.

**Description of Circumstances:**

(Attach supporting evidence as required)

### DECLARATION

I hereby declare that:

1. The information provided in this application is true and correct to the best of my knowledge.
2. I understand that I **cannot engage in employment** until written authorisation is granted by WORC.
3. I acknowledge that providing false or misleading information may result in the refusal of my application and/or enforcement action.

\_\_\_\_\_  
Applicant Name  
Print Name

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date