



APPLICATION FOR RESIDENCY AND EMPLOYMENT RIGHTS CERTIFICATE SPOUSE/CIVIL PARTNER OF A PERMANENT RESIDENT

The completed application should be addressed to:
The Secretary, Caymanian Status & Permanent Residency Board or The Director of WORC
PO 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. Use a separate sheet of paper if necessary. Retain a copy of all applications and attachments submitted to WORC.

APPLICATION FORM CONTAINS 7 PAGES

PERSONAL DETAILS OF APPLICANT

1. Last Name Maiden Name First Name(s)

2. Place of Birth Date of Birth Gender Male Female
Nationality

3. Passport number Date of Issue Place of Issue Date of Expiry

4. Have you ever been married/civil partner before? Yes No If yes, date of Dissolution Have you ever been widowed? Yes No
Have you been married/civil Partner or widowed more than once? Yes No If yes, explain
Former spouse's/civil partner's full name

5. Physical Address
PO Box & KY/Mailing address Phone
Personal Email Address

6. Occupation Are you currently employed? Yes No
If Yes, Name of Employer/Business
Physical Address
PO Box & KY/Mailing address Telephone

7. What is your current immigration status? a. Work Permit Holder Expiry date
b. Visitor (new to island) Expiry date
c. Work Permit Dependant Effective date
d. Dependant Spouse of a Permanent Resident Effective date
e. Other Explain

AGENT/REPRESENTATIVE DETAILS (if applicable)

8. Name of Agent/Representative

9. P.O. Box & KY/Mailing address
Physical address

10. Phone Fax No Email Address

APPLICATION FOR RERC SPOUSE/CIVIL PARTNER OF A PERMANENT RESIDENT

PERSONAL DETAILS OF SPOUSE/CIVIL PARTNER WHO HOLDS PERMANENT RESIDENCY

11. Last Name Maiden Name First Name(s)

12. Place of Birth Date of Birth Gender Male Female

13. Date of Marriage/Civil Partnership Place of Marriage

14. Has your spouse ever been married/civil partner before? Yes No If Yes, Date of Dissolution Have you ever been widowed? Yes No

Has your spouse been Married/Civil Partner or Widowed more than once? Yes No If yes, explain

Former spouse's/civil partner's full name

15. Occupation Name of Employer/Business

Employer's PO Box & KY Code Telephone

Email Address

CHARACTER / CRIMINAL HISTORY

16. Have you ever been charged or convicted in a court of law of a criminal offence in any country? Yes No If Yes, provide details.

Nature of offence	Date	Location	Verdict and Sentence
<input type="text"/>	<input type="text" value="D/MMM/YY"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="D/MMM/YY"/>	<input type="text"/>	<input type="text"/>

17. Have you ever been required to pay an administrative fine for an offence in the Cayman Islands or other country, other than for a traffic offence? Yes No

If Yes, provide details.

Nature of fine	Date	Location	Amount (CI\$)
<input type="text"/>	<input type="text" value="D/MMM/YY"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="D/MMM/YY"/>	<input type="text"/>	<input type="text"/>

18. Have you ever been sanctioned by a professional ethics body, licensing board or any other regulating body? Yes No

If Yes, provide details.

Nature of sanction	Date	Location	Reasons
<input type="text"/>	<input type="text" value="D/MMM/YY"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="D/MMM/YY"/>	<input type="text"/>	<input type="text"/>

19. Please provide the names of three personal references

Names of Referees	Phone	Address
1- <input type="text"/>	<input type="text"/>	<input type="text"/>
2- <input type="text"/>	<input type="text"/>	<input type="text"/>
3- <input type="text"/>	<input type="text"/>	<input type="text"/>

APPLICATION FOR RERC SPOUSE/CIVIL PARTNER OF A PERMANENT RESIDENT

DEPENDANT DETAILS (if applicable)

20. Do you have any non-Caymanian dependants whom you wish to accompany you? Yes No

If Yes, you must complete and submit Form R37a - *Dependant Information Form* along with this form.

Name	Date of Birth	Nationality	Relationship
<input style="width: 95%;" type="text"/>	<small>D/MMM/YY</small>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	<small>D/MMM/YY</small>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

21. Is your spouse the biological parent of the above listed dependant(s)? Yes No

22. Do you have any non-Caymanian dependants that are not accompanying you? Yes No If Yes, provide details below.

Name	Date of Birth	Nationality	Relationship
<input style="width: 95%;" type="text"/>	<small>D/MMM/YY</small>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	<small>D/MMM/YY</small>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

23. Do you have any Caymanian children? Yes No If Yes, provide details below. Use separate sheet of paper if necessary.

Name	Date of Birth	Nationality	Relationship
<input style="width: 95%;" type="text"/>	<small>D/MMM/YY</small>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	<small>D/MMM/YY</small>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

24. Where and with whom does the child(ren) currently reside?

Name of Guardian	Relationship of Guardian to child(ren)	Full Address (Street address & Country)
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Phone	PO Box & KY	Email address
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Name of Guardian	Relationship of Guardian to child(ren)	Full Address (Street address & Country)
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Phone	PO Box & KY	Email address
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

FINANCIAL DETAILS (Certified copies of corresponding documents must be attached)

25. Have you or your spouse/civil partner ever **applied for** any assistance (financial or otherwise) from the Department of Children and Family Services or any other Government Department or Agency? If Yes, clearly detail circumstances. Use separate sheet of paper if necessary. Yes No

<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>

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26. Have you or your spouse/civil partner ever **applied for and received** any assistance (financial or otherwise) from the Department of Children and Family Services or any other Government Department or Agency? If Yes, clearly detail circumstances, type and duration of assistance. Use separate sheet of paper if necessary. 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.

Applicant's Signature
Agency signature no acceptable

Date _____
DD/MM/YY

Spouse's/Civil Partner's Signature
Agency signature no acceptable

Date _____
DD/MM/YY

AFFIDAVIT (SPOUSE/CIVIL PARTNER OF A PERMANENT RESIDENT)

To be completed by the Dependant Spouse/Civil Partner and his/her Permanent Resident Spouse/Civil Partner

This affidavit is in support of an application to add my spouse/civil partner to my **Residency & Employment Rights Certificate** as my dependant pursuant to section 37(16) of the Immigration (Transition) Act, 2021.

I _____ of _____
First Name Middle Name Last Name/Surname City and Country

And confirmed by

I _____ of _____
First Name Middle Name Last Name/Surname City and Country

make oath and say as follows:-

1. That I am lawfully married/civil partners to _____
First Name Middle Name Last Name/Surname
 (my "spouse/civil partner"), and we have been married/civil partners since _____ for _____ year(s) _____ months(s);
Date (DD-MM-YY)
2. That my marriage/CIVIL PARTNERSHIP is not one of convenience as defined in section 2 of the Immigration (Transition) Act, 2021;
3. That my marriage/civil partnership is:
 - (1) stable and intact;
 - (2) that there are and were no pending divorce proceedings, divorce petitions or separation petitions filed within the duration of the marriage or immediately preceding this application;
4. That I am not living apart from my spouse/civil partner under a:
 - (1) decree of a competent court;
 - (2) under a deed of separation;
 - (3) by mutual consent or agreement or any other reason whether voluntary or not;
5. That I have not lived apart from my spouse/civil partner immediately preceding this application and that I do not intend to live apart from my spouse/civil partner in the foreseeable future.

Warning: It is an offence under the Immigration (Transition) Act, 2021 for any person to make, cause or allow to be made any return, statement or representation which is false in a material particular and which he knows to be false or which he does not believe to be true. A person found guilty of this offence is liable on summary conviction in respect of a first offence, to a fine of \$5,000.00 and to imprisonment for one year or, in respect of a second or subsequent offence, to a fine of ten thousand dollars and to imprisonment for two years.

By making an application for a Residency & Employment Rights Certificate, you agree to cooperate with the Director of Workforce Opportunities & Residency Cayman (WORC) /Caymanian Status and Permanent Residency Board or its duly appointed agents by providing such information or documents as they may reasonably request in connection with your application.

If the Director of Workforce Opportunities & Residency Cayman (WORC)/Caymanian Status and Permanent Residency Board has reasonable grounds to believe that any fact stated in any application for a Residency and Employment Rights Certificate (including any affidavit sworn in such application) is false in a material particular, the Board or its duly appointed agents may conduct a full investigation in such manner as it deems fit.

I declare that I understand and accept the warning given above

_____	_____
Signature of Applicant	Date (DD-MM-YY)
_____	_____
Signature of Permanent Resident Spouse/Civil Partner	Date (DD-MM-YY)

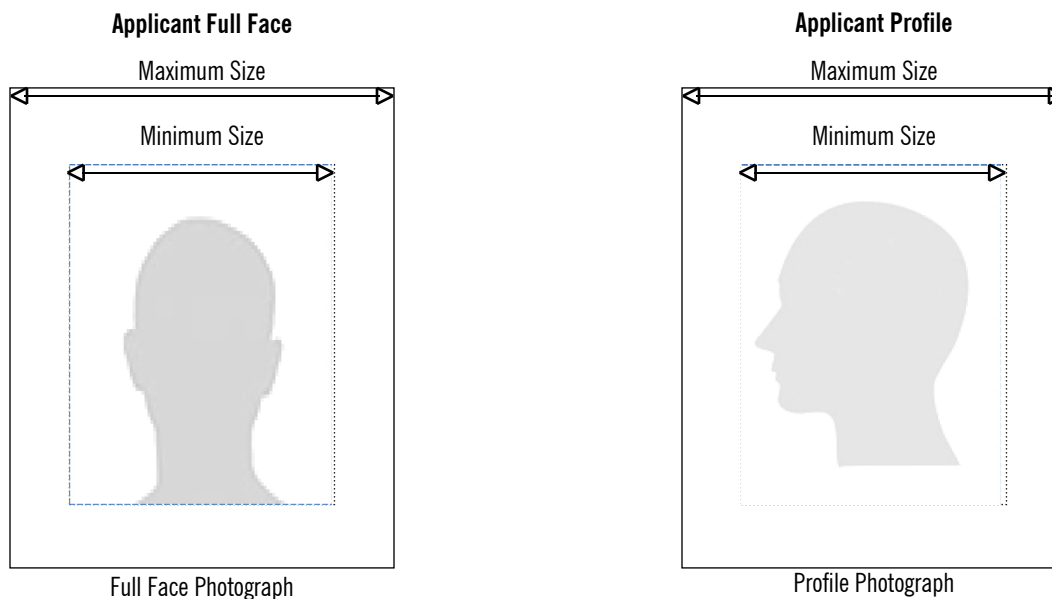
Sworn before me at _____, Cayman Islands, this _____ day of _____ 20_____

 Justice of the Peace/Notary Public

PHOTOGRAPH TEMPLATE Applicants Only

Surname (Last Names)	Given Names (First Names)	Maiden Name (if applicable)
File Number (if known)	(Also known as "Work Reference Number")	Application Date
		Date of Birth
		D/MMM/YY
		D/MMM/YY

**For a work permit grant, permanent residency or status - provide Full Face and Profile photos.
For a work permit renewal - provide Full Face photo.**



Do Not Use Staples!
Photographs may be taped or glued to the picture diagrams.

Instructions:

- For Work Permit Grant, Permanent Residency and Cayman Status applications, provide Full Face and Profile photos (2 photos).
- For Work Permit Renewal applications, provide Full Face photo (1 photo).
- Print Last Name, First Name(s), and Date of Birth on the back of each photograph.
- The photograph must:
 - be a "passport type" photograph
 - be in colour
 - be taken within the past 12 months
 - show full face (shoulders and above)
 - have no head covering
 - have a plain white background
 - be between 45mm by 35mm (1.77 inches by 1.38 inches) and 63mm by 50mm (2.5 inches by 2 inches), see diagram below
 - be unmounted
 - be printed on normal photographic paper
 - if digital, have resolution of at least 800 dpi (dots per inch)
- Blurred photographs will not be accepted.
- Stick-on labels will not be accepted.

Checklist for Residency and Employment Rights Certificate for the Spouse of a Permanent Resident - Section 37 (16)

This list is a summary of general requirements for ALL applicants. The Caymanian Status and Permanent Residency Board or The Director of WORC reserves the right to request additional information or documentation as deemed necessary.

- Cover Letter** - Stating circumstances as to how you and your spouse met signed by both applicant and spouse.
- Application Form** - One duly completed application form
- Fees** - CI\$300
- Evidence of Marital/Civil Partnership Status** - Certified copies of marriage/civil partnership certificate and/or death & dissolution decree(s) (where applicable if applicant and/or spouse/civil partner was married/civil partner before).
- Affidavit** - Completed and signed by the applicant and spouse in the presence of a JP or Notary Public.
- Evidence that Spouse/Civil Partner is a Permanent Resident Holder** - Provide photocopy of Permanent Residence Certificate
- Applicant's Birth Certificate** - Certified copy of applicant's birth certificate
- References** - Three written references from persons who have known you for at least 3 years. Ensure you included proof of their identity. Each reference must be in a sealed envelope, signed across the seal by the referee, with the name of the applicant on the outside.
- Medical Declaration Cover Letter** The Medical cover letter may be no older than one year of submission of the application
- Photographs** (1 full face and 1 profile with name and date of birth on back) of applicant
- Proof of Identity** - Certified copy of photo and information page of applicant and spouse's passports
- Employment Letter** stating your position, length of employment and salary. You will submit an Employment Letter for both you, the Applicant, and your spouse.
If either of you are not employed, state this in your cover letter.
- Bank References** - For Applicant and Spouse. If you do not have a bank account, state this in your cover letter.
- Resume and Copies of any Qualifications**
- Police Clearance** for Applicant, valid for six (6) months old
- Dependant Children** - Certified copies of birth certificates or adoption orders in respect of any dependant children under the age of eighteen, who are not Caymanians, and whom you wish to have added as your dependants
- Dependant Information Form (R15)** to be fully completed and submitted together with copies of all necessary documents requested (e.g., lease agreement, utility bills, etc.).
- DNA** - Male applicants who were **not** married to the birth mother at the time of the child's birth must obtain a DNA and submit the original results with the application. DNA tests will be accepted from the Cayman Islands, the USA and the United Kingdom. Permission must be obtained from the Board prior to testing in any other jurisdiction.
- Proof of Legal Custody** - Male applicants wishing to add their children as dependants and who were **not** married to the birth mother must submit a Court Order from country of origin of the child granting legal custody. Male applicants who were married to birth mother at the time of child's birth must also submit proof of legal custody together with a certified copy of marriage certificate and subsequent divorce decree from mother. Provide copy of death certificate if applicable. A letter signed by the birth mother giving permission for child to reside with father is **not** acceptable, *even if it is notarised.*

*All certificates and documents (e.g., birth, marriage, death, divorce, police clearance etc.) which are in a foreign language must be accompanied with an English translation. See online Guidelines for accepted translators.