وزارة اﻟداﺧﻠﯾﺔ اﻹدارة اﻟﻌﺎﻣﺔ ﻟﺷؤون اﻹﻗﺎﻣﺔ

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|  | **ﻧﻣوذج****طﻠب** |
|  | **إذن ﻏﯾﺎب** |  | **إﻗﺎﻣﺔ** |  | **ﺳﻣﺔ دﺧول** |
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دوﻟﺔ اﻟﻛوﯾت

**اﻟﻣﮭﻧﺔ**

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Certificate precedents and decent health certificate pro be free of precedents and improper health otherwise r him to his country at my expense.

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|  | **ﺑﯾﺎﻧﺎت اﻟﻘﺎدم / اﻟﻣﻘﯾم** |
|  | **ﺗﺎرﯾﺦ اﻟﻣﯾﻼد** |  | **اﻟرﻗم اﻟﻣدﻧﻲ** |
|  | **ﻣﻛﺎن اﻟﻣﯾﻼد** |  | **اﻟﺟﻧس** |  | **رﻗم اﻟﻣرﺟﻊ** |
|  | **اﻹﺳم اﻟﻛﺎﻣل** |
| **Full Name** |  |
|  | **ﻧوع اﻟﺟواز** |  | **رﻗم ﺟواز اﻟﺳﻔر** |
|  | **ﺗﺎرﯾﺦ إﻧﺗﮭﺎء اﻟﺟواز** |  | **ﺗﺎرﯾﺦ إﺻدار ﺟواز اﻟﺳﻔر** |
|  | **اﻟﻣﮭﻧﺔ** |  | **اﻟﻌﻼﻗﺔ ﺑﺎﻟﻛﻔﯾل** |  | **اﻟﺟﻧﺳﯾﺔ** |
| **ﺑﯾﺎﻧﺎت ﺻﺎﺣب اﻟﻌﻣل - اﻟﻌﺎﺋل** |
|  | **رﻗم اﻟﻣرﺟﻊ / اﻟﺷﺧﺻﯾﺔ اﻹﻋﺗﺑﺎرﯾﺔ** |  | **اﻟرﻗم اﻟﻣدﻧﻲ** |
|  | **اﻹﺳم – اﻟﺟﮭﺔ اﻟﺣﻛوﻣﯾﺔ – اﻟﺷرﻛﺔ** |
|  | **اﻟرﻗم اﻵﻟﻲ ﻟﻠﻌﻧوان** |  | **اﻹﯾﻣﯾل** |
|  | **اﻟﻣﺣﺎﻓظﺔ** |  | **اﻟراﺗب** |  | **اﻟﻣﮭﻧﺔ** |  | **اﻟﺟﻧﺳﯾﺔ** |
|  | **اﻟﮭﺎﺗف** |  | **اﻟﻣﺑﻧﻰ** |  | **اﻟﺷﺎرع** |  | **اﻟﻘطﻌﺔ** |  | **اﻟﻣﻧطﻘﺔ** |
| **Declaration and Undertaking*** Data declared in this application is correct and that I abide by the policies and provisions of the law .
* Iassume full responsibility for the employee during his stay and will return him to his home country on my own expense. upon expiration or termination of his residency .

 The employee has a clean criminal record with no violations against him and is in good health , I shall return him to his home country at my own expense if the above is discovered not to be true . * To abide by the residency laws and regulations mentioned on the back of the entry visa form .

**Signature of Applicant Employer Seal**................................. ................................. | **إﻗرار وﺗﻌﮭد** **إن اﻟﺑﯾﺎﻧﺎت اﻟﻣدرﺟﺔ ﺑﮭذا اﻟطﻠب ﺻﺣﯾﺣﺔ وأﻟﺗزم ﺑﺗﻧﻔﯾذ ﻣﺎ ﺟﺎء****ﺑﺄﺣﻛﺎم اﻟﻘﺎﻧون.** **أﺗﻌﮭد ﺑﺄﻧﮫ ﯾﻌﻣل ﻟدي وﻣﺳؤول ﻋﻧﮫ أﺛﻧﺎء ﻣدة إﻗﺎﻣﺗﮫ وأﺗﻌﮭد ﺑ**a**ﺄ**.**ن****أﻋﯾده إﻟﻰ ﺑﻠده اﻷﺻﻠﻲ ﻋﻠﻰ ﻧﻔﻘﺗﻲ اﻟﺧﺎﺻﺔ ﻋﻧد إﻧﺗﮭﺎء / إﻧﮭﺎء****إﻗﺎﻣﺗﮫ .** **أﻧﮫ ﻏﯾر ﻣطﻠوب وﺧﺎل ﻣن اﻟﺳواﺑق وإذا ﺛﺑت ﺑﻌد دﺧوﻟﮫ ﻏﯾر****ذﻟك أو ﺛﺑت ﺑﺄﻧﮫ ﻏﯾرﻻﺋق ﺻﺣﯾﺎً, أﻟﺗزم ﺑﺈﻋﺎدﺗﮫ ﻋﻠﻰ ﻧﻔﻘﺗﻲ****اﻟﺧﺎﺻﺔ إﻟﻰ ﺑﻠده.** **أن أﻟﺗزم ﺑﻘﺎﻧون إﻗﺎﻣﺔ اﻷﺟﺎﻧب واﻟﻠواﺋﺢ اﻟﺗﻧﻔﯾذﯾﺔ ﻟﮫ واﻟﺗﻌﻠﯾﻣﺎت****اﻟﺻادرة اﻟﻣﺑﯾﻧﺔ ﺧﻠف ﺳﻣﺔ اﻟدﺧول***.***إﺳم وﺗوﻗﯾﻊ ﻣﻘدم اﻟطﻠب ﺧﺗم ﺻﺎﺣب اﻟﻌﻣل**................................. .................................. |
| **ﺑﯾﺎﻧﺎت اﻟﻣﺗﻧﺎزل** |
|  | **اﻟﺗوﻗﯾﻊ واﻟﺧﺗم** |  | **اﻟرﻗم اﻟﻣدﻧﻲ** |
|  | **اﻹﺳم – اﻟﺟﮭﺔ اﻟﺣﻛوﻣﯾﺔ – اﻟﺷرﻛﺔ** |
| **اﻟﻣﻼﺣظﺎت :** | **.................................................. : اﻹﺳﺗﻘﺑﺎل ﻣوظف****............................................................. : اﻟﺗوﻗﯾﻊ****............................................................... : اﻟﺧﺗم** |

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| **ﺑﯾﺎﻧﺎت اﻟﻣراﻓﻘﯾن** |
| **ﻣﻼﺣظﺎت :** | **ﺗﺎرﯾﺦ اﻟﻣﯾﻼد** | **ﺻﻠﺔ اﻟﻘراﺑﺔ** | **اﻟﺟﻧس** | **اﻹﺳم** | م |
|  |  | **-إﺧﱰ-** |  | 1 |
|  |  | **-إﺧﱰ-** |  | 2 |
|  |  | **-إﺧﱰ-** |  | 3 |
|  |  | **-إﺧﱰ-** |  | 4 |
|  |  | **-إﺧﱰ-** |  | 5 |
|  |  | **-إﺧﱰ-** |  | 6 |
|  |  | **-إﺧﱰ-** |  | 7 |
|  |  | **-إﺧﱰ-** |  | 8 |
|  |  | **-إﺧﱰ-****-إﺧﱰ-** |  | 9 |
|  |  |  |  | 10 |
| **ﻟﻺﺳﺗﻌﻣﺎل اﻟرﺳﻣﻲ** |
| **ﻣوظف اﻟﺗدﻗﯾﻖ** | **ﻣوظف / ﺧدﻣﺔ اﻟﻣواطن / ﺧدﻣﺔ اﻟﻣراﺟﻌﯾن** |
|  |  |  |  |  |  |  |  | **رﻗم اﻟﺗﺄﺷﯾرة** |
| **اﻹﺳﺗﻌﻣﺎل اﻟرﺳﻣﻲ** | **ﻣوظف اﻹرﺷﯾف** |