APPLICATION FOR SPECIAL PASS FOR EAST AFRICAN COMMUNITY PARTNER STATES

THE UNITED REPUBLIC OF TANZANIA PHOTO

(Made under regulation 21A)

Dart I. D	Personal Information
1.	Surname
2.	Given Names.
3.	Other Names.
4. 5.	Sex
	Marital Status
6.	Nationality
7.	Date of Birth
8.	Country of Birth
9.	Passport Number
10.	Date of Issue
Physical	l Address
	Name of the Building/Block/Plot/House No
	Street
	Town/City
	Mobile
	Email.
	Postal Address.
Part II:	Employee Details
	Profession/Occupation.
	Job Title Applied for
19.	Academic Qualification (Attach
	Evidence)
20.	Technical/Professional Qualification (Attach
	Evidence)
21.	Period of Employment Contract (Attach Evidence):
	Fromto
Dart III.	Employer's Information
	Name of Employer
22.	Name of the Building/Block/Plot/House No.
	Street
	Town/City
	Mobile
	Email
	Postal Address
	ars of the Previous Permit (for renewal)
	Class of Permit.
	Permit Number.
31.	Date of Issue

32. Particulars of the previous applications for permit which were declined					
	Investor and Self-employed Pe				
33. Particulars of the investor and self-employed person applying for the work permit					
(a) Name of Business/Consultant/Self-employed					
	(b) Nature of Business/Service				
	(c) Capital Sum (money to b				
	(d) Location of Business				
	(e) Provide Certificate of Re		rofessional Qualifications		
34. Qualifications to support application					
(a) Academic/Professional qualification and experience (attach					
	(b) Technical qualifications a	and experience (attach			
	(c) Details of capital and ince		income and present locality		
	of capital)				
	(d) Details of any license/ reg	gistration required to qua	lify for the class of permit		
			ve obtained or will be able		
	to obtain such license and	d/registration			
Part V: I	Dependants				
35.	Particulars of the applicant's	dependants (provide legal	l evidence for your		
	dependants)		•		
	Name	Relationship	Date of Birth		
		_			
Part VI: Declaration					
I declare	that the foregoing information	n provided in this form fr	om part I to VI are true to		
the best of my knowledge.					
	,				
Applicant's SignatureDate					
Employer's Signature and Stamp Date					
1 - 3	8				
For Office	cial Use Only				
Work/Entry/Residence Permit Class					
Approved formonth(s)/Year (s)					
Not Approved					
РР					
DateSignature					
		Signature			