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| *OFFICIAL USE ONLY: REFERENCE NUMBER* |  |

 IMMIGRATION ORDINANCE 1999, section 17G (1-5)

**FALKLAND ISLANDS GOVERNMENT**

 **REGISTERED EMPLOYER SCHEME**

**EMPLOYER’S UNDERTAKING – REPATRIATION EXPENSES FOR SPONSORED WORK PERMIT HOLDER**

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| **I (full name of authorised person)** |  |
| **as (position)** |  |
| **of (Employer name)** |  |

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| --- | --- |
| **of (address)** |  |

**having been duly authorised to sign this Undertaking for and in consideration of the grant to**

**[****] (the “Work Permit Holder”)**

**of a work permit do hereby undertake that**

**[****] (the “Employer”)**

**will reimburse the Falkland Islands Government all expenses (“the Repatriation Expenses”) reasonably and properly incurred in repatriating**

**the Work Permit Holder**

**and dependents (if relevant) in the Falkland Islands on expiry, cancellation or revocation of their permits whether a deportation order is made under the Immigration Ordinance 1999 or not**

**This Undertaking extends to Repatriation Expenses on a full indemnity basis including —**

* **Full costs incurred in transporting the Work Permit Holder and any dependents (if relevant) to a convenient port or airport in the Falkland Islands.**
* **The cost of passage of the Work Permit Holder and dependents (if relevant) by sea or air to such other country as the Principal Immigration Officer shall determine and if by sea, the cost of food and accommodation on board ship.**
* **If it is necessary or convenient for the Work Permit Holder and dependents (if relevant) to transit in any place outside of the Falkland Islands, all costs (including transit transportation, board and lodging in transit and any other incidental expenses) related to such transit, as the Principal Immigration Officer shall reasonably incur.**

**Release of Undertaking**

**The Employer shall be fully released from this Undertaking when the Principal Immigration Officer:**

* **Receives notice in writing that the sponsorship of the Work Permit Holder has been passed to another employer or individual and notifies you of acceptance of this confirmation. In the case of an employer, the employer must sign an Employer’s Undertaking and the Principal Immigration Officer has to accept the Employer’s Undertaking;**

**or**

* **when the Work Permit Holder and any dependents have departed the Falkland Islands and the work permit has expired, been revoked or cancelled;**

**or**

* **when the Work Permit Holder has been granted a Permanent Residence Permit or Falkland Islands status;**

**and**

* **If applicable, on full reimbursement of the Repatriation Expenses to the Falkland Islands Government.**

**NOTE: Work Permit Sponsorship Form 4b must be submitted with this Undertaking form**

**This Form 4c and any dispute or claim arising out of or in connection with it shall be governed by and construed in accordance with the law of the Falkland Islands.**

**I declare I am an authorised person for this Employer and undertake that the Employer is capable of meeting the financial responsibilities of work permit sponsorship in connection with this Undertaking which is hereby entered into**

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| **I (full name of authorised person)** |  |

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| --- | --- |
|  **Date** | Click here to enter a date. |