

Date of Issue

IMMIGRATION ORDINANCE 1999, section 17E IMMIGRATION (GENERAL) REGULATIONS 2021, regulation 15

APPLICATION FOR VOLUNTEER PERMIT (including extensions)

Please take care when completing this form and only provide information that is complete and accurate

1) PERSONAL DETAILS Surname(s) Previous name(s) Forename(s) Gender Male Female **Marital Status Date of Birth** Place of Birth **Current Address** How long in current address **Previous address** (if less than 12 months) **Email** Telephone **Nationality** Other Nationalities held Countries lived in for 12 months or more in the last 5 years: 2) PASSPORT DETAILS **Passport Number** Place of Issue

Date of Expiry

Intended date of arriva (if not extension) Name of Sponsor Address of Sponsor	ı			
-				
Address of Sponsor				
•				
Job Title / duties				
Volunteering dates (maximum 12 months)	Start Date:	End D	ate:	
For Permit Extensions				
[
Current permit no		Your ID no		
Permit valid from		Valid to		
las there been any cha		nteering role?	Yes □	No 🗌
Note: If your volunte application may be re		nged significantly a <u>new</u>	Volunteering Per	rmit
Medical self-declaration	completed and me	edical insurance held (se	ee guidance notes	below)
١	res □	No 🗌		
	_	been made for you? Ple ho will be paying for it, wh		

4) GUIDANCE NOTES

- For the purposes of Falkland Islands immigration procedures you must declare ALL criminal
 convictions, whether or not they are considered to be spent by the laws of the country in
 which you were convicted, cautions and fixed penalty notices.
- A declaration of criminal convictions, cautions and fixed penalty notices will not necessarily
 mean that your application will be refused, but it is a requirement that they be taken into
 consideration
- Any material misrepresentation in this form may render you liable to prosecution in the Falkland Islands. It could also mean that any permit issued will be revoked and that you will need to leave the Falkland Islands
- It is an offence to take employment or engage in any trade, business, profession or vocation without the correct permit or without having permission to do so
- A Volunteer Permit can only be issued or extended to a maximum of 12 months in a 24 month period
- An application fee will be charged for each applicant. A fee will be charged for an extension
 of an existing permit. All applications should be submitted via email to
 permits@customs.gov.fk
- Original documents must be ready on request. All queries can be sent to the above email address. We aim to process complete applications within eight working days. Incomplete or non-straightforward applications are likely to result in slower determinations

Medical

 You must be in possession of a Medical Declaration certified by the King Edward Memorial Hospital. If extending your volunteer permit your medical declaration must continue to be valid

You must also hold a medical insurance certificate valid for the duration of the volunteering and provide this certificate on application. Medical insurance must cover aero-medical evacuation to a minimum value of US\$ 2,000,000. If your insurance cover is not valid or maintained or the insurer subsequently refuses to accept liability for any reason, the Falkland Islands Government is not liable for any medical treatment or related medical services you may incur

Criminal Record Checks

- It is important to ensure that you hold the correct valid Police checks. If your Volunteer permit is valid for less than a duration of 150 days (5 months) you do not have to submit checks. However, if you wish your permit to be for 5 months or longer you will require:
 - an approved Police Vetting Certificate from your country of residence

You must evidence both medical and criminal record checks requirements at the point of application.

5) DECLARATION

If you fail to provide complete and accurate information or if you provide information that is false then you may commit a criminal offence for which you can be fined or sent to prison

- I understand the questions on this form and confirm that the information provided is true and correct
- I undertake that if, between the time that I make this application and the time it is decided, any relevant matter relating to the application changes, I will inform Falkland Islands Customs and Immigration
- I understand that the Falkland Islands works to maintain a drugs-free environment and that if I am convicted of a drugs-related offence whilst in the Islands it may lead to the revocation of any permit granted on this application and my deportation from the Falkland Islands
- I understand that I am required to declare **ALL** criminal offences whether spent or not, cautions and fixed penalty notices, and that failure to do so may lead to the revocation of any permit granted on this application and my deportation from the Falkland Islands

APPLICANT DECLARATION:

Have you ever been convicted of any criminal offence?	Yes 🗌	No 🗌				
You must answer 'yes' even if the conviction is considered to be spent or rehabilitated						
If 'yes' please provide details below of your criminal convictions, including the nature and the date of the conviction.						
Dates(s)						
Conviction(s)						
Penalties						
Users were supplied a continuous of fixed manager matica?	V	N- 🗆				
Have you ever received a caution or a fixed penalty notice?	Yes 🗌	No 🗌				
You must answer 'yes' regardless of the date of the caution or fixed penal not the fixed penalty notice was paid	Ity notice, an	d whether or				
If 'yes' please provide details below of your cautions or fixed penalty notices, including the offence for which the caution or fixed penalty notice was issued and the date issued.						
Dates(s)						
Caution(s)/Fixed penalty notice(s)						
Result(s)						

Have you ever been deported, removed, required to leave, had a permit revoked, or refused entry to <i>any</i> country?			Yes 🗌	No 🗌			
If 'yes' please provide	details below						
Have you ever suf disease?	fered from any dangerous	contagious	Yes □	No 🗌			
If 'yes' please provide	details below						
Now finish the application by adding your name and the date below -							
I have read and understood the above declaration and it is correct							
Name in full							
Date							
- 4.0							
CHECK LIST							
Tick if appropriate							
Copy of passport							
Criminal record che	ecks (if relevant)						
Medical declaration	and insurance						