Emmigrant/Employee Registration Through OEP Form

OEPE-RF-02

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Bureau of Emigration & Overseas Employment Government of Pakistan filling out the form; Please read the instructions from the end of

BEOE	(Before filling or	it the form	i <u>; Please</u>	e read	the in	nstructio	ons fron	1 the	end of f	orm)								
Computerized Registration # (Office Use Only)	:					E Offi fice Use												
1. Date:	2 6	- 0	2	-	2	2 0	2	5	(dd	mm,	уууу)				4			
OEP Information																		
2. Name of OEP/Agency:	MANS	OL MA	ANPO	OWI	ER	SOI	UTI	ON	S									
3. Licence No.:	L H	R		3	3	0	5	4							_		\Box	
4. Permission No:	540318	5. Date: 2 6 - 0 2 - 2 0 2 5																
Emigrant Personal Information:																		
6. Name:	D e	С	1	í	ı	n		F	H	a	r		d	- 3	y		1	
7. Father's / Husband's Name:	Dicta n	Dicta numquam dolore																
8. Emigrant CNIC No:9. Gender:	4 5 Male		F	emal														
		Ľ	1	Jiiiul	-													
Emigrant Contact Detail:			1 ,	_	, 1			1 .			_	_				_		
10. Cell No.	+ 1		(4	1	8	4))		3	\perp	8		3	<u>_</u>	\perp	8
11. Email	qifa@ma	qifa@mailinator.com																
12. Address	V o 1	u p	t a	ı t	e		d o	1	o r	е	m		m	0				
(In Pakistan):				1														
13. City:	alipur	alipur 14. District of Domicile: Bhakkar																
11. Province	Azad K	ashmir																
Educational Details:																		
16. Qualification:	high_sc	high_school																
Emigrant Passport Informa	ation:																	
17. Passport No.	1 1	1	1		1	1	1	1		1	1		1					
18. Place of Issue		amin pur 19. Date of 2 0 2 2 - 0 7 - 2 0																
Issue: (dd/mm/yyyy) "Next of Kin" Information:																		
20. Name of Nominee:	Tempor	e et do	lorib	1														
21. CNIC No:	7 2																	
22. Relationship	mother																	
Fee Receipts Titles	Receipts Nos. Bank/Location Name				Bank Branch Name / Branch Code					Date (dd/mm/yyyy)			An	nount	(RS)			
	850304643339 NADRA				\perp									$ldsymbol{oxed}$				
24. Welfare Fund		NBP				117 G Model Town (Protector Office)								000				
25. Insurance Fee		NBP			-	117 G Model Town (Protector Office)						2500 500			-			
26. Registration Fee 27. Bank Certificate/Service charges (OEP refundable)		NBP ABL				117 G Model Town (Protector Office) New Airport Road						15000			,			
28. OEC O																		
28. OEC 1 O	EC FEE	NBP			1	17 G M	odel To	wn (F	rotecto	Offi	ce)					2	200	$\overline{}$

Terms and Conditions										
Emi * For	grant Job Detail: job title and category see reference	e from the annexure-A.								
30.	*Skill Level:									
31.	(Office Use Only) *Job Category:									
J1.	(Office Use Only)									
32.	Job Title:									
33.	Salary Rate:	34. Period of Contract: 0 2 - 0 0 - 0 0 (Years-Months-Days)								
35.	Other:		<u> </u>							
*	Other fringes benefits are provide	ded according to the local labour lav	NS.		_					
<u>Ет</u> р	ployer Detail:									
36.	Company Name:	GULF STEEL WORKS								
	!	SAUDIA ARABIA	38. City:	AL	KHOBER.	, K.S.A				
Decla	aration:									
varies	s/unsatisfied.	nder Emigration Ordinance, 1979 and l			ed or any terms/o	conditions				
 2) I (Emigrant) fully understand the terms and conditions of employer and agreed to the job as mentioned in agreement. 3) I (Emigrant) will abide the terms and conditions mentioned in contract. 4) I (Emigrant) fully understand the procedure and time limits to put my complaints against Employer / OEP. 5) We hereby declare that the information/documents/visa (copy of visa) that we provided is correct/genuine and for any wrong information or any documents found forged/bogus; we are responsible for that under relevant law and can't make any disciplinary/legal action on the behalf of my registration in Protectorate 										
of Emigrant Office if the information provided is wrong. Instructions: -Please fill the form clearly and using BLOCK/CAPITAL LETTERS. No small letters accepted. It is preferred to accept the form filled using										
	outer/typewriter, can also be downlo	oaded from BEOE website (http://www								
			4							
Signature / Stamp of OEP Signature of Emigrant / Employee										
		(Office U	Ise Only)							
39.	Registration #:									
40.	Date:		1// 	(dd,mm,yyyy)						
Chec				_						
	Selection made through adver-	rtisement/nomination			☐ Yes	□ No				
	2. Are passport/visa in order				☐ Yes	□ No				
	3. Fields from 23 to 28 are chec				☐ Yes	□ No				
	4. Are □ passport / □ visa in €5. Whether the emigrant properly				☐ Yes	□ No				
	5. Whether the emigrant properl6. Genuineness of documents (I	Attached	☐ Yes	□ No						
L,	0. Ochuliciess of documents (1	D,MCOI,4 rec receipts, 1 assport, 1.	Isa, Havei Documento, 2	Allaciicu	□ 100	L 110				
		ties are checked by me and found correct, in forwarded to the IT Section for IT Operation								
Authorized Signature/ Stamp										
		Authorized Signature/ Stamp								
Certifi	>(IT Section) Certified that both parties mentioned above are agreed with the contents of this document/contract and Emigrant									
	stered under the mentioned Registration									
			-		otector of Emig Stamp & Signat					