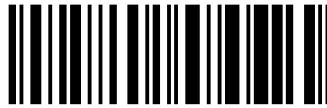


Visa No: 1303258081



Visa Date: 1445/07/29

34234235

سفارة المملكة العربية السعودية

القسم القنصلي

EMBASSY OF SAUDI ARABIA,

CONSULAR SECTION

Full Name: ALA UDDIN S/O MOHAMMED اسم الكامل:

Mother's Name: BEGUM اسم الام:

Date of Birth: 23-08-2023 تاريخ الولادة: Place of Birth: CUMILLA محل الولادة:

Previous Nationality: BANGLADESHI الجنسية السابقة: Present Nationality: BANGLADESHI الجنسية الحالية:

Sex: MALE الجنس: Marital Status: MARRIED الحالة الاجتماعية:

Sect: المذهب: Religion: MUSLIM الديانة:

Source: مصدره: Qualification: المؤهل العلمي:

Place of Issue: DHAKA المهنة: dd عامل

Profession: WORKER VISA

Home Address and telephone No: عنوان المنزل ورقم التلفون:

Business Address and Telephone No: SALAUDDIN RL - 1409 عنوان الشركة (المؤسسة) رقم

123 التلفون

Purpose of Travel	عمل	مرور	زيارة	عمرة	للاقامة	حج	دبلوماسية	عنوان الشركة ل:
	Work ✓	Transit	Visit	Umrah	Residence	Hajj	Diplomacy	(المؤسسة) رقم التلفون

Place of Issue: DHAKA محل الاصدار: Date of Issue: 16-01-2033 تاريخ الاصدار: Date of Expiry: 16-01-2033 تاريخ انتهاء صلاحية الجواز: Passport No: A02847588 رقم الجواز:

Duration of stay in the Kingdom: 02, Years Date of Arrival: Date of departure:

طريقة الدفع: مجاناً ( ) : تقديم ( ) : بشيك رقم: ايصال رقم ( ) : ايصال رقم ( ) : تاريخ: Mode of Payment: Free: Cash: Cheque No: Date: No: Date:

Relationship: EMPLOYER AND EMPLOYEE اسم المحرم: Name of Mahram:

Destination: K.S.A جهة الوصول بالم: Carriers: اسم الشركة النافذة:

Dependents traveling in the same passport: ايضاحات تخص افراد العائلة ( المضافين ) علي نفس جواز السفر:

Relationship: نوع الصلة: Date of Birth: تاريخ الميلاد: Sex: الجنس: Full Name: الاسم بالكامل:

Name and address of company or individual in the kingdom: اسم وعنوان الشركة أو اسم الشخص وعنوانه بالمملكة:

I under signed hereby that all the information I have provided are correct أنا الموقع أدناه أقر بأن كل المعلومات التي درنتها صحيحة

I will abide by laws of the kingdom during the period of my residence in it و ساكون ملتزماً بقوانين المملكة اثناء فترة وجودي بها

Date: التاريخ: Signature: التوقيع: Name: ALA UDDIN الاسم:

For Official use only: للاستعمال الرسمي فقط:

Date: 1445/07/29 Authorization: التاريخ: رقم الامر المعتمد عليه في أعطاء التأشيرة:

Visit/Work: شكل ff لزيارة / العمل لدي:

Date: التاريخ: Visa No: 1303258081 أشر برقم:

Fee Collected: المبلغ المحصل: Type: نوعها: Duration: مدتها:

رئيس القسم القنصلي 7034987341 رقم الكفيل مدقق البيانات

Head of consular Section Cheeked by



Passport No: A02847588

TO  
THE CHIEF OF CONSULATE SECTION  
THE ROYEL EMBASSY OF SAUDI ARABIA  
GULSHAN, DHAKA, BANGLADESH

EXCELLENCY,

WITH DUE RESPECT WE ARE SUBMITTING ONE PASSPORT FOR WORK VISA WITH ALL NECESSARY DOCUMENTS AND PARTICULARS MENTIONED AS BELOW , KNOWING ALL INSTRUCTION AND REGULATION OF THE CONSULATE SECTION:

1. NAME OF THE EMPLOYMENT IN SAUDIA : **شكل ff**  
ARABIA
2. VISA NUMBER & DATE : **1303258081 DATE- 1445/07/29**
3. FULL NAME OF THE EMPLOYEE : **ALA UDDIN**
4. PASSPORT NO. WITH DATE : **A02847588 DATE 17-01-2023**
5. PROFESSION : **عامل dd**
6. RELIGION : **MUSLIM**

I DO HEREBY CONFIRM AND DECLARE THAT THE RIGION STATED IN THE VISA FROM AND FORWARDING LETTER IS FULLY CORRECT. I ALSO UNDER TAKE WITH MY OWN RESPONSIBILITY TO CANCEL THE VISA AND TO STOP FUNCTIONING WITH MY OFFICE,IF THE STATEMENT IS FOUND INCORRECT.

WE THEREFORE, REQUEST YOUR EXELLENCY TO KINDLY ISSUE WORK VISA OUT OF 1 VISAS AND OBLIGE THERE BY.

YOUR FAITHFULLY  
SALAUDDIN RL - 1409

# **EMPLOYMENT AGREEMENT**

First Party	: شكل ff
Second Party	: ALA UDDIN
Passport No	: A02847588
Profession	: WORKER VISA
Nationality	: BANGLADESHI

1. The 2nd party is employed by the first party as **WORKER VISA** with a monthly salary **SR2424244** payable by the end of each month
2. The 2nd party committed himself to tender his service within the kingdom country of the first party
3. The 1st party provided free food, free residence, free medical assistance and insurance benefited etc. to the 2nd party.
4. The 2nd party is subject to their months as probationary partied and the 1st party will have right to terminate his service without prior notice or compensation if he is found unfit for the job.
5. The daily working our will be 8 (eight) ours and weekly 48" (forty eight) ours. any extra ours the employee will be paid on overtime basis.
6. In case 2nd party desires to go back to his country before the expiry of his agreement then the can't do so at his own expenses the consent of the 1st party.
7. The 2nd party will bear the his joining air ticket and the 1st party will provide return ticket to the 2nd party.
8. The 2nd party is entitled for 30 (thirty) days prepaid annual leave.
9. The duration of his contact is 2 (two) years renewable on both parties consent.
10. All other terms and conditions which are not mentioned here will be subject to saudi labour laws.
11. The agreement is approved by the parties.

\_\_\_\_\_  
Signature for the 1st party

\_\_\_\_\_  
Signature for the 2nd party

## إرفاق الجدول التالي في كل معاملة

Remarks الملاحظات	Executor المنفذ	Agency المكتب	Procedure الإجراء
		34234235	رقم إنجاز / Mofa No.
		1303258081	رقم المستند / Visa No.
		ALA UDDIN	الاسم في الجواز / Passport Name
		A02847588	رقم الجواز / Passport No.
		16-01-2033	صلاحية الجواز / Passport Validity
		23-08-2023 14 DAYS	العمر / Age
		MALE	الجنس / Sex
		3423423424	مساند / Musaned
		234235	الوكالة / Wakala
		MOHIMID MEDICLA CENTER Issue Date: 16-08-2023 Expire Date: 15-10-2023	المدىكل / Medical
		15NAX4X	ورقة الشرطة / Police Clearance
		DLC202293	الرخصة / Driving License
		DD عامل	المهنة / Profession
		N/A	Certificate & Experience المؤهل وشهادة الخبرة /
		N/A	البصمة / Finger

اسم المكتب : SALAUDDIN

رقم الرخصة: 1409

التوقيع :

الختم :