

FORM 8 APPLICATION FOR AN EMPLOYMENT / S PASS

INSTRUCTIONS:

 For *, please tick (✓) where appropriate.
 Indicate "Not applicable" or "N.A." when necessary. Do not leave any blank.
 To check whether your application has been received, you may call 6438 5122 if you do not hear from MOM after 2 weeks.

Note: An administrative fee of \$10 will be charged for every Employment/S Pass application submitted.

The modes of payment for application submitted via:

- EP Online: Visa/Maste - SingPost post offices (Master Shall be no refund of fees pair request for refund shall be at the district TYPE OF APPLICATION	rCard or eNE IOM-appointed of for the apple scretion of the	TS Debi ed collec ication o	ting agent) f Employm	ent Pa	ss/S Pa	S/Casł iss, ur	ncard nless	the fe	ee wa	s not	due fr	om 1	пе еп	πριογοί	, , , , , ,	0000	
New Application (E	mployment P	ass 🗌)	(S Pass	l)	Change	e fron	ı Wo	rk Pe	rmit 1	to (Er	nploy	men	t Pass	s 🗌)	(S Pas	s 🗆 🤇)
Change of Employer (E	mployment P	ass 🗌)	(S Pass	1)													
If you are not eligible for an Employment Pass (P or Q Pass), do you wish to be considered for an S Pass?* (You can apply for an S Pass if you are not a partner, sole proprietor or director of a company. Please complete Part IX and Part XII too if 'YES' is selected.) Yes No																	
APPLICABLE FOR S PASS APPLICATION ONLY:																	
COMPANY'S CPF No.																	
Please ensure that Industrial (Forms > Work Pass (S Pass)'								For	deta	ils, p	lease	refe	er to	'Servi	ce &		
DURATION OF WORK P.	ASS APPL	IED F	OR:														
Months			Yea	rs (u	p to 5	year	rs oi	nly)									
For official use only:																	
Date of application:		Office	er ID:						Re	emar	rks:						
PART I – BASIC PARTIC	ULARS O	F APP	LICANT														
Foreign Identification No. (F	IN):	П									Sex	:*					
Work Permit No. (WP No): (WP No. held previously)				I			I				 I	Male	е		Fema	le	
Date of Birth:	1 2 - [M M	1 9 Y Y	8 6 Y Y	Ol Ide	r Mala d entity ard No	[s Oni	ly					T				
Marital Status:* ☐ Singl		✓ Mai	rried lowed	Ne Ide								1					
in Separated in 1970	iced	W.IC	10 W C G	Co	olour:	*		☐ I	Pink		□в	lue					
Name (as on travel document): Family name / Surname	VAI	NG	ADI	1													
Given Name	RAI	KE	SH	K	V	М	A	R									
				\perp													
Alias: Family name / Surname	NO-	T	AP	PC	-11	C	A	В	L	E							
Given Name (leave blank		П		T	T						T	Т	Т	Т		П	
if not applicable) Please note that for S Pass ho	olders, only	the firs	t 45 chara	cters	of yo	ur na	ame	will	be p	rinte	d on	the	S Pa	ss car	d.		
Name in Chinese Characters	(If applicable	e):															

PART I (continued							
Country of Birth:	111	DIA					
State/Province of B	Birth: 0 D	ISHA					
Race: (e.g. Malay, Ind Chinese, Caucasian, etc		DIAN					
Nationality:	UN	DIAN					
Religion: H 1	NDU			Denomination:		\	
Country of Origin:	IN	DIA					
State/Province of C	Origin: 0 D	ISHA					
Address in Singapo							
	Postal Code	: Bloc	ck/House No:	Floor No: Unit	No:		
Street Name:				Tel No:			
Building Name:							
Type of Travel Doo	cument Held:	PASS	PORT				
(e.g. Passport, Certifice Document of Ident							
Travel Document N	No:						
(If you are a Malaysian details of your Malaysi Passport (MIP) only.)							
Travel Document	28-00	7 - 20	Expir	ry Date: 27	092	02	7
Issue Date:			Y Y		M M Y	YY	Y
Country of Issue:	MALA	YSIA					
Place of Issue:	KUAL	ALU	MPUR				
PART II- APPLIC	CANT'S DETAILS	S					
Name of Awarding	Name of	Country and	Mode of Study	Academic and		Perio	od of
Body /Institution/ University which	School/Institution /College Attended	State/Province (e.g. USA,	(Full-time, Part- time, Distance	Professional Qualifications	Faculty of Study		ıdy te in
awarded the	/Conege /Attended	California or China, Hubei)	Learning, Twinning,	awarded	Study	MMY	
qualification (Start with highest		China, Hubeij	Offshore etc)	(Note: for Honours Degree, state class/			
qualification)	SCHOOL:		TIME	division) BACHELOR OF		From	To
BIJU PATNAIK	D. A. V. Public	INDIA,	FULLTIME	TECHNOLOGY		2004	2008
UNIVERSITY	SCHOOL, BRAHMAPUR,	ODISHA.		IN ELECTRICALS			
of	BDISHA.			FIECTRONICS			
TECHNOLOGY,	COLLEGE:			ENGINEERING			
ORISSA, ROURKELA	VIKAS EDUCATIONAL						
BACHELOR	INSTITUTION,						
OF	VISHARAPAT						
TECHNOLOGY ELECTRICAL&							
00-01							

Membership of Societies	s/Organizations	Position(s) Held	Parid	Period			
(Past 5 years to	date)	rosition(s) Held	rent	Ju			
			From	То			
	2 =						
ttachments should only be su	ical order. Please do not leave this p						
Total years of working experie * Please round up to the nearest y Working experience releva Period	ear nt to this application for Employ	ears of relevant working exp	erience 0 (Years**			
* Please round up to the nearest y	ear Years** Total ye	ears of relevant working exp	Nature of	`Duties			
* Please round up to the nearest y Vorking experience releva Period From To	nt to this application for Employ Name & Location (State &	ears of relevant working exp	erience 0 (Duties Evelopmen JBE			

Engineer

System Analyst

Senlor

T24.

Production

production

support

limited, chennai,

ZENITH INFOTECH

Sdn Bhd, Kuala

lumpur, Malaycia

STANDARD CHARTERED GBS,

Malaycia.

INDIA.

PART IV- DECLARATION BY APPLICANT		
Please tick (✓) accordingly. If any of the answers is "YES", please furnish details on a separate	te sheet of paper.	
(a) Have you ever been refused entry into or deported from any country?	□ Yes	☑ No
(b) Have you ever been convicted in a court of law in any country?	□ Yes	☑ No
(c) Have you ever been prohibited from entering Singapore?	□ Yes	☑ No
(d) Have you ever entered Singapore using a different passport or name?	□ Yes	☑ No
(e) Have you ever been a Singapore Citizen or Singapore Permanent Resident?	□ Yes	⊠ No
(f) Are you currently a Singapore Citizen or Singapore Permanent Resident?	☐ Yes	☑No
(g) Have you ever studied or worked in Singapore?	□ Yes	☑ No

CHARTERED GBS, Sdn, Bhd, Kualalumpur, Eystem Analyst

06-Nov-

present

2016

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2013

31-May-2013

10-Sep-

O7-NOV-

2016

2013

PART V – DUTIES TO BE PERFORMED IN SINGAPORE
Job Title:
As specified in Employment Contract
Fixed Monthly Salary: S\$
Basic Monthly Salary S\$
Job Description (Give full details and state if they are of a technical nature)
Address/Place where above stated duties are to be performed
·
Name of Employing Community Society/Ourseminations
Name of Employing Company/Society/Organization:
Local Mailing Address of Employing Company/Society/Organization (for correspondence only):
2
For S Pass Applicant: Please note that the S Pass Card will show the Employing Company's address registered with the Central Provident Fund Board (CPFB), MOM's appointed agent to collect foreign worker levy.
Accounting and Corporate Regulatory Authority (ACRA) Registration No.: Tel No.:
Registry of Societies Registration No.: Fax No.:
International Enterprise Singapore Representative Office Registration No.:
Authorised Capital (S\$): Paid-up Capital (S\$):
Nature of Business as declared with ACRA (Tick ✓ appropriate box)
Manufacturing Construction Marine/ Shipping/ Restaurant/ Hotel/ Retail/ Finance/ IT Others
Transport/ Logistics Trading/ Wholesale Please specify main products and/or activities:
reaso speedy main products and or detivities.
Value of Turnover of the Company in the past 3 years:
(1) :S\$ (2) :S\$ (3)
(Year) (Year)
Present staffing position (Date):
Local Foreign
(Singapore Citizen/PR)
Total number of employees

PART VI- PARTICULARS OF A [Part VI & Part VII to be completed holder or Work Permit holder.]	PPLICANT'S SPOUSE if spouse is a Singapore Citizen, Singapore Permanent Resident, Employment/S Pass
Spouse accompanying applicant is	* \[\sigma \text{ a Singapore Citizen} \] \[\sigma \text{ a Permanent Resident} \] \[\sigma \text{ on Employment Pass/} \] \[S \text{ Pass or Work Permit} \]
Name: Family name/Surname	
Given Name	
Date of Birth:	D M M Y Y Y Y
Singapore Identity Card No:	
Foreign Identification No:	
PART VII – CITIZENSHIP/RES	IDENTIAL STATUS OF APPLICANT'S CHILDREN
Status	<u>Number</u>
Singa	pore Citizen
Singa	pore Permanent Resident
Other	s

	VIII – DECLARATION BY APPLICANT able for Employment Pass and S Pass application – to be sig	ned by applicant.]
I co	nfirm that the information as set out in Parts I-IV, and VI-	VII were provided by me and that the said
info	rmation is true and correct.	
I un	derstand that I may be subject to prosecution if I have pro	vided any information, which is false in any
mat	erial particular or is misleading by reason of the omission	of any material particular.
19	-OCT-2017	V. Rauech Kernay. Signature of Applicant
	Date	Signature of Applicant
	IX – FURTHER DECLARATION BY THE APPLICA able for S Pass application – to be signed by applicant.]	NT
Emp 1 2 3 4 5	I shall work only for the employer and in the occupation I shall not engage in or participate in any business or but I shall reside at the address stipulated by my employer inform my employer about any change in residential and I shall undergo a medical examination by a Singapor Controller. I understand that if I am certified medically I shall carry my original S Pass / visit pass with me demand by any public officer. I shall report to the Controller as and when I am require	e a self-employed person. upon the commencement of my employment. I will dress initiated by me. re registered doctor as and when directed by the unfit, my S Pass shall be revoked. at all times and must produce it for inspection on
Fu	rther and in addition, I hereby declare that -	
1	I have read and understood the Conditions of S Pass / v	isit pass with regard to my employment and stay in
	Singapore, and I shall abide by them.	. 1:171 1 . 1 1 1

- 2 I shall not make any false statement or submit any document which I know to be false in order to obtain a S Pass or visit pass.
- 3 I understand that if I breach any condition above, my S Pass / visit pass will be revoked and I can be prosecuted in Court, or expelled and prohibited from entering Singapore.
- 4 I shall not misuse controlled drugs or take part in any political or other activities during my stay in Singapore, which would make me an undesirable or prohibited immigrant under the Immigration Act.

Name and Signature of Applicant	Date

PART X – DECLARATION BY LOCAL SPONSOR [Applicable for Employment Pass application]
We hereby sponsor this application and certify that it is made for the purpose as stated by the applicant. We
confirm that the information provided in part V is true and correct. The statements made by the applicant in this
application are to the best of our knowledge true.
Official Stamp of Company / Firm
Authorised Signature / Date
Name & Designation / Capacity
PART XI – COVENANT BY LOCAL SPONSOR [Complete either (A) or (B)]
(A) Applicable for Employment Pass application
WHEREAS the Controller of Work Passes as a condition precedent to the issue to
(Name of Applicant)
(hereafter called "the Applicant") of an Employment Pass to work in Singapore has required that
(hereafter called "Sponsor") shall give security in respect of the Applicant.
(Name of Sponsor and Company Stamp)
NOW THOSE PRESENT witness that in consideration of the issue to the applicant of an Employment Pass,
the Sponsor undertakes to:
i) be responsible for the stay, maintenance and repatriation of the applicant;
ii) indemnify the Singapore Government for any charges or expenses which may be incurred by the
Government in respect of the repatriation of the said applicant or any of his dependants; and
iii) be responsible for the compliance by the applicant of any quarantine and medical surveillance imposed
on the applicant under regulation 8 (2A) of the Immigration Regulations.
(B) Applicable for S Pass application
WHEREAS the Controller of Work Passes as a condition precedent to the issue to
(hereafter called "the Applicant") of an S Pass to enter Singapore has required that
(hereafter called "Employer") shall give security in respect of the Applicant.
(Name of Employer and Company Stamp)
NOW THOSE PRESENT witness that in consideration of the issue to the applicant of an S Pass,
the Employer for himself and his heirs executors and administrators hereby covenants with the Accountant-General
of Singapore that the said Sponsor shall on demand forthwith pay to the Accountant-General any charges or
expenses which may be incurred by the Government in respect of the repatriation of the said Applicant or
any of his dependants.

CONSENT

	With	reference	e to	my	application	submitted	on			for
Employ	ment/	S Pass and	l resid	ence i	n Singapore,	I give my co	nsent to th	ne Governn	nent of Singa	pore to
obtain f	from a	nd verify i	nform	ation	with any per	son, organiza	tion or an	y other sour	ce for assess	ing my
applicat	tion.									
Dated		of	•••••	******	.20					
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90000	• • • • • • • • •	ort / Identity		 No.)						
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