An Roinn Fiontar, Trádála agus Fostaíochta Department of Enterprise, Trade and Employment



Request for Support Letter for Critical Skills Employment 909326 GNIB No. Permit Holders seeking a 'Stamp 4' **Employment Permit Holder Details** Part One ABHISHEKCAPITALS 1. First Name: 2. Middle Name: BLOCK CAPITALS DANALAKOTA ITALS 2 1/1 5 3. Last Name: 4. Date of Birth: 5. PPS Number: 5 6. Male: 7. Female: 8. Nationality: Indian 9. Name of Employer: **ERNST AND YOUNG** BLOCK CAPITALS **EP-JWE005/21** 10. Critical Skills Employment Permit Application ID Number: 11. Expiry Date of Critical Skills Employment Permit*: 2 2 3 * Requests can be submitted up to 12 weeks before the expiry date. Requests received 0 М more than 12 weeks before permit expiry date will be returned to the applicant. 12. Current Address of Employment Permit Holder (must be the address at which they are currently residing in the State): Address 1: Apt 312 Carrington Park BLOCK CAPITALS Address 2: Northwood, Santry BLOCK CAPITALS Dublin 9, D09P446 Town: County: Dublin BLOCK CAPITALS 14. Mobile Phone No.: 13. Telephone No.: 0894503909 15. E-mail address: dabhishek2895@gmail.com Signature of Employment Permit Holder: .Abhishek Title: MR (Original signature required) **Requirements for Supporting Documentation** Part Two Please attach the following documentation: A letter from the Employment Permit holder's employer, dated within the last 3 months, confirming the Critical Skills Employment Permit holder's employment with that employer, job title and date of commencement of employment, Copies of 3 recent payslips issued to the holder of the Employment Permit dated within the last 4 months Copies of Employment Detail Summaries issued to the holder of the Employment Permit for each year of

Part Three Return Address

www.revenue.ie/myaccount.

Please return this form and all supporting documentation to:

EPSTAMP4@ENTERPRISE.GOV.IE

employment covering the duration of the Critical Skills Employment Permit, available on