



DEPARTMENT OF HOME AFFAIRS
REPUBLIC OF SOUTH AFRICA

APPLICATION FOR CORPORATE WORKER CERTIFICATE
[Section 21(2) and (6) read with Regulation 20(8) & 20(9)]

FOR OFFICIAL USE ONLY		
Office of application:	BLOK:	Ref No:
Date received:		
Application quality checked by/on:	Date received at Head Office:	Biometric <i>(Attach Fingerprint Form, with Photograph)</i>
Passport seen/returned by/on:	Decision and date:	
Fee: (Currency and amount)		
Fee received by/on:		
Receipt no:		
Conditions of visa / Reason for refusal:		

1. PERSONAL DETAILS

Title:	Mr	Ms	Other (specify)			
Surname/Family name:			Given names or forenames:			
Maiden name:			Gender:			
Previous/alternative name(s)/aliases, including details:						
Date of birth:						
Year..... Month..... Day.....						
Place of birth:		Town/City:		Country:		
Marital status:	Never married		Separated		Legally recognised spousal relationship	
	Married		Widowed			
	Divorced		Customary union			
If separated state, whether divorce proceedings have been instituted and when the final decree is expected.						
.....						
.....						
If divorced, provide:						
Date of divorce:						
<i>(Attach copy of divorce order).</i>						
If party to a spousal relationship with a citizen or permanent resident, a certified copy of the marriage certificate or a notarial agreement, as well as the requisite affidavit, must be attached.						

2. CITIZENSHIP DETAILS

Present country of citizenship:	
If acquired other than by birth, date and conditions under which acquired:	
Do you hold any other citizenship?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If so, of which country? (<i>Provide details</i>).....	

3. PASSPORT DETAILS

Passport number:	Country of issue:
Date of issue:...../...../.....	Expiry date:...../...../.....
If you have any other document required by your government, provide details: Type of document:..... Document Number:..... Expiry date:...../...../.....	

4. ADDRESSES

Residential address: Postal code.....	Postal address: Postal code.....
Country of usual residence if other than country of origin or above address: 	

Telephone No.: Work: (incl. *area code*) Home: (incl. *area code*)
 Cellphone number (if available):
 Email address (if available):

Other addresses where you have lived during the last ten years other than your current address:

Address:	Period:	Country:

Do you hold the right of re-entry into your country of origin and/or country of residence if this differs? Yes No

If no, specify period and present status.....

Have you ever applied for asylum or refugee status in the Republic (RSA) or any other country?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	If yes, specify the country.....

Contact person:

Relationship: Friend	<input type="checkbox"/>	Business Associate	<input type="checkbox"/>	Relative	<input type="checkbox"/>	Other	<input type="checkbox"/>
Name:							
Address:							
.....							

Telephone No.: Work: (*incl. area code*) Home: (*incl. area code*)
 Cellphone number (*if available*):
 Email address (*if available*):

Details regarding relatives and/or friends in the Republic (if any).

Name	Address	Relationship	Identity No

5. INTENTIONS/PROPOSED DURATION OF STAY IN THE REPUBLIC

Proposed date and place of departure for the Republic:	/	/	
Anticipated date and place of arrival in the Republic:	/	/	
Travelling by: Air		Road	
		Rail	
		Sea	
		Carrier	
What is your intended duration of stay in the Republic:			
Days/weeks/months/or		Years	
		Intended date of departure	/ /

Outline your proposed activities whilst in the Republic:

.....

6. MAINTENANCE/DEPORTATION

State what funds you have available to maintain yourself during your stay in the Republic and whether you have a return ticket or other arrangements made for maintenance and return passage:

Available funds (foreign currency): Type:..... Amount:
 South African Rand equivalent: (*attach bank statement as proof of funds held*).

Valid return or onward ticket no:	Expiry date: / /
Other:	
.....	

Have you ever been refused entry into or deported from the Republic? If so, please provide details:
.....
.....
.....

7. SECURITY/HEALTH QUESTIONNAIRE

Have you or any of your dependants accompanying you ever been convicted of any crime in any country?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is a criminal/civil case pending against you or any of your dependants accompanying you in any country?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you or any of your dependants suffering from tuberculosis, any other infectious or contagious disease or any mental or physical deficiency?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you an unrehabilitated insolvent?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been judicially declared incompetent?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a member of or adherent to an association or organisation advocating the practice of social violence, or racial hatred?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been declared undesirable from the Republic?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
—	—
Furnish full particulars if the reply to any of these questions is in the affirmative:	
.....	

.....

8. ANY ADDITIONAL INFORMATION YOU WISH TO BRING TO THE DEPARTMENT'S ATTENTION:

.....

9. DECLARATION BY APPLICANT

I acknowledge that I understand the contents and implications of this application and solemnly declare that the above particulars given by me as well as all particulars in the attached supporting documentation are true and correct.

_____ Date

Signature of applicant

SPECIAL CONDITIONS ATTACHED TO A CORPORATE WORKER CERTIFICATE	NOTED	
	Yes	No
The validity period of a corporate worker certificate shall not exceed the validity period of the main corporate visa.		
A corporate worker may not renew his or her corporate worker certificate or apply for a change of status in the Republic.		

THE FOLLOWING ORIGINAL SUPPORTING DOCUMENTS MUST ACCOMPANY THE APPLICATION

	Attached	
	Yes	No
(a) Valid passport which expires in no less than 30 days after expiry of the intended date of departure from the Republic;		

	Attached	
	Yes	No
(b) A yellow fever vaccination certificate, where applicable;		
(c) A medical report;		
(d) A radiological report;		
(e) the certificate contemplated in subregulation (8)(b);		
(f) a valid employment contract;		
(g) a written undertaking by the corporate applicant to ensure that the foreigner departs from the Republic upon termination of his or her contract of employment or accepting responsibility for the return or costs related to the deportation of the foreigner should it become necessary;		
(h) proof of qualifications evaluated by SAQA, and translated by a sworn translator into one of the official languages of the Republic, or skills and experience in line with the job offer;		
(i) a certificate of registration with the professional body, council or board recognised by SAQA in terms of section 13(1)(i) of the National Qualifications Framework Act, if applicable; and		
(j) Police clearance certificates in respect of applicants 18 years and older, in respect of all countries where person resided one year or longer since having attained the age of 18.		

CORPORATE EMPLOYER DETAILS:

Departmental reference number.....	Corporate visa number.....
Name of corporate employer:.....	
Company's physical address:	Contact person: Initials and surname..... Capacity: Cell phone No:..... Tel No:..... E-mail address:.....