

Foreign Professional Personnel Employment Work Permit Application (dedicated use for Ministry of Justice commission)

Applicable Occupation Category: (excluding contracted foreigners, please fill in code) Category: _____ A _____ (reference supplementary application documents, fill in code.) Item: Consultant <input type="checkbox"/> 06-02 Assistant <input type="checkbox"/> 06-03 (reference supplementary application documents, fill in code.) Industry Category Code: 691				Application Type: (please check) <input type="checkbox"/> New Hire <input type="checkbox"/> Refund <input type="checkbox"/> Extension <input type="checkbox"/> Supplement <input type="checkbox"/> Dismissal <input type="checkbox"/> Other _____ <input type="checkbox"/> Early Dismissal <input type="checkbox"/> Non-renewal			
Applicant Entity Name					Entity Seal		
Applicant Entity Tax ID No.							
Company Owner			Applicant Entity Labor Insurance ID No.				
Applicant ID No.	(must be filled out by individual lawyer, technician applicant)						
Entity Address	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> No.	Street/Road	Floor	Section	Lane	Alley	Village/Neighborhood County/City
Document Delivery Address	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> No.	Street/Road	Floor	Section	Lane	Alley	Village/Neighborhood County/City
Contact	Name		Tel.	Contact	Name		
	Name		Tel.		Name		
Current Foreign Employee Count (not including blue collar foreign workers) _____ persons			Current Domestic Employee Count: _____ persons				
Employed Foreign Worker Applicant: if name list is attached, if employed foreign worker applicant is a group, please indicate group name (Chinese): _____							
Specific reasons for this hiring case and explanation of the positive benefits of hiring foreigner :							

※ (The aforementioned information has been furnished factually. If false, I am willing to bear all legal

responsibilities.) Please check and fill out one of the following two fields.

This application processed by employer personally. Company Owner:
(seal)

This application entrusted to private employment services agency for processing.
Name of commissioned private employment services agency: (Entity Seal)
License No.:
Representative (personal signature) Contact Tel:

Check for in-person document pickup and attach **【In-person Document Pickup Declaration】**

Document Reception Seal		Document Reception No.	
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