



Company Name:

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MINISTRY OF LABOR AND SKILLS

Form No:

OF/MOLS/JEPM/021

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Photo

Ref no. \_\_\_\_\_

Date: \_\_\_\_\_

Application Type:  New  Renewal

**Basic Data:**

Full Name: \_\_\_\_\_

Other Name(s): \_\_\_\_\_

Sex:  Male  Female Date of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_

Marital Status:  Single  Married  Divorced  Widow  Separated

Passport Number: \_\_\_\_\_ Date of Issue: \_\_\_\_\_

Visa Number: \_\_\_\_\_ Date of Issue: \_\_\_\_\_ Visa Type:  Business  Others

Date of Employment: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

Basic Salary (In Birr): \_\_\_\_\_ Monthly Allowance (In Birr): \_\_\_\_\_

Name of the region and district / town where the employee is assigned to work: \_\_\_\_\_

**Education Data:**

Qualification Type:  Certificate  Diploma  Degree  Others (Specify): \_\_\_\_\_

Level of Qualification:  Elementary  Junior Secondary  Secondary Level  Secondary Complete

Vocational Level  Vocational Complete  College Level  College Complete

Post Graduate Level  Post Graduate  Non-formal Education

Others \_\_\_\_\_

Year Completed: \_\_\_\_\_ Field of Study: \_\_\_\_\_

Award:  Certificate  Diploma  BA/BSC  MA/MSC  PhD  Other (specify) \_\_\_\_\_

Professional Skill: \_\_\_\_\_

Years of Work Experience: Starting Date: \_\_\_\_\_ End Date: \_\_\_\_\_

Type of Occupation: \_\_\_\_\_ Occupation Code: \_\_\_\_\_

Current position in the Firm: \_\_\_\_\_

PLEASE MAKE SURE THAT THIS IS THE CORRECT ISSUE BEFORE USE



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Nature of Service:  Employee  Voluntary  Other (specify) \_\_\_\_\_

**Employer Data:**

Organization Name: \_\_\_\_\_

Address-Region: \_\_\_\_\_ Kebele: \_\_\_\_\_

City/Town: \_\_\_\_\_ Tel.: \_\_\_\_\_

Sub-city/Zone: \_\_\_\_\_ Fax: \_\_\_\_\_

Woreda: \_\_\_\_\_ P.O.Box: \_\_\_\_\_

E-mail: \_\_\_\_\_

Major Activity: \_\_\_\_\_ Activity code: \_\_\_\_\_

Type of Organization:  Private Organization  Governmental  NGO  Religious  Other \_\_\_\_\_

Industry/Engagement:  Agricultural, Hunting, Forestry & Fishing  Mining & Quarrying  Manufacturing

Electricity, Gas & Water  Construction

Wholesale and Retail Trade  Transport, Storage and Communication

Finance, insurance and Business Services  Community, Social & Personal Services

Number of Ethiopian Employees: \_\_\_\_\_ Number of Expatriates: \_\_\_\_\_

Investment Permit or Business License Number: \_\_\_\_\_

**Certification**

I hereby confirm that all the particulars furnished in this application are free and correct.

Name of the employer or employer's representative \_\_\_\_\_

Title \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Office Use Only:**

File Number: \_\_\_\_\_ Application Number: \_\_\_\_\_

Support Letter Ref.no: \_\_\_\_\_ Signed By: \_\_\_\_\_

Date Signed: \_\_\_\_\_

Work Permit – Type:  New  Renewal Work Permit Number: \_\_\_\_\_

Issue/Renew Date: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Residence Permit – Residence ID: \_\_\_\_\_

Residence ID Issue Date: \_\_\_\_\_ ID Expiry Date: \_\_\_\_\_

Approved by: \_\_\_\_\_ Signature: \_\_\_\_\_

Date Approved: \_\_\_\_\_