



**Republic of Namibia**

**MINISTRY OF HOME AFFAIRS, IMMIGRATION, SAFETY AND SECURITY**

**REQUIREMENTS FOR CHANGE OF CONDITION ON EMPLOYMENT PERMIT**

**NOTE:**

- 1. Incomplete forms and outstanding documents will not be accepted.**
  - 2. All documents must be in English or translated into English**
  - 3. All copies from applicant must be certified**
  - 4. All application forms to be signed by the applicants themselves.**
- 
1. Letter from previous employer confirming an objection or a no-objection to the intended move.
  2. Letter from the applicant why applying for a change of condition
  3. Deed of surety signed by the prospective employer
  4. Representation duty signed by prospective (new) employer and company profile
  5. Copies of the passport including pages where the previous work permit or temporary residence permit was endorsed
  6. Local police clearance certificate
  7. Form 3-1/0069 questionnaire
  8. Application for re-entry visa form 3-1/0033
  9. Copy of advertisement
  10. CV's of unsuccessful Namibia candidates
  11. Proof of company registration
- 
- 2. Appeal application**
- 
- 2.1 Prescribed fee: N\$ 200.00 must accompany your Appeal application



Republic of Namibia

**Ministry of Home Affairs and Immigration**

**Application for Renewal of an Employment Permit, a Student's Permit or a Visitor's Entry Permit and/or change of conditions (Act 7 of 1993)**

For official use only	
File: .....	
Date of expiry: .....	
Purpose: .....	
.....	
Approved/Not approved .....	
.....	
Signature .....	Date .....

**QUESTIONNAIRE**

- 1. (a) Surname: .....
- (b) First Names: ..... Maiden name: .....
- (c) Date of birth: ..... Country of birth: .....
- (d) Passport number: ..... Expiry date of passport: .....
- (e) Place of issue: ..... Citizenship: .....
- (f) Occupation: .....

NEVER MARRIED	MARRIED	DIVORCED	WIDOWED	*SEPARATED
---------------	---------	----------	---------	------------

2. Indicate with an "X"

\*If separated state whether divorce proceedings have been instituted and when final order of divorce is expected :

**3. PARTICULARS OF RELATIVES IN NAMIBIA - IMPORTANT**

(a) Indicate with an "X"

HUSBAND	WIFE	FATHER	MOTHER	CHILD
---------	------	--------	--------	-------

Name: .....

Date of birth: ..... Place of birth: .....

Residential address: .....

..... Tel No. .... Code .....

(b) Postal address: .....

(c) Indicate whether your is a holder of:

HUSBAND	WIFE	FATHER	MOTHER	CHILD
---------	------	--------	--------	-------

(i) Namibian Citizenship (indicate with an "X")

YES	
-----	--

NO	
----	--

(ii) Permanent Residence Permit

YES	
-----	--

NO	
----	--

State number and date of issue .....

(iii) Employment Permit (expiry date): .....

(iv) Student's Permit (expiry date): .....

(d) If husband/wife is not in Namibia does he/she intend entering the country? If YES, indicate when .....

(e) Particulars of children accompanying applicant:

NAME	DATE OF BIRTH	COUNTRY OF BIRTH
.....	.....	.....
.....	.....	.....
.....	.....	.....

4. (a) State fully why you desire to prolong your stay or want to change the conditions of your existing permit:

.....  
.....

(b) Intended date of departure: Day ..... Month ..... Year .....

5. State what funds you possess for maintenance and/or the purchase of a return ticket or what other arrangements will be made for your return journey:

- (i)  Valid return or onward ticket No ..... Expiry date: .....
- (ii)  Undertaking by employer
- (iii)  Deposit lodged - Receipt No ..... Amount N\$ ..... Date .....
- (iv)  Guarantee submitted
- (v)  Vehicle No .....
- (vi)  Other .....

6. (a) If you intend to stay permanently- Have you applied for permanent residence?

NO	YES
----	-----

 Reference No ..... Date: .....

(b) If not, what are your intentions?

.....

7. If the validity of your existing permit has already expired, state why you did not apply for an extension on time:

.....  
.....

8. ADDRESSES IN NAMIBIA (must be completed in full)

(a) Residential address:

.....  
..... Tel No ..... Code .....

(b) Postal address:

..... Tel No ..... Code .....

(c) Work address:

..... Tel No ..... Code .....

(d) Contact address (Relatives/Friends/Business associates)

.....  
..... Tel No ..... Code .....

DATE: ..... SIGNATURE: .....

9. CERTIFICATE BY EMPLOYER

I hereby certify that ..... is still an  
employee of ..... as .....  
(name of employer) (occupation)

.....  
*Signature of employer*

.....  
*Date*



**REPUBLIC OF NAMIBIA**  
**MINISTRY OF HOME AFFAIRS**  
 DEPARTMENT OF CIVIC AFFAIRS  
 IMMIGRATION CONTROL ACT, 1993  
**APPLICATION FOR VISA**  
 (Section 12 and 13 / Regulation 11)

**FOR OFFICIAL USE ONLY**

Approved / Not Approved  
 Single / Multiple Entry

File No: \_\_\_\_\_

Date of Issue: \_\_\_\_\_

Date of Expiry: \_\_\_\_\_

Remarks: \_\_\_\_\_

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

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

1. Surname: \_\_\_\_\_  
 2. First Names: \_\_\_\_\_  
 3. Maiden name (if applicant is or was a married woman): \_\_\_\_\_

ITEMS 4 TO 10 TO BE COMPLETED BY INSERTING AN "X" IN THE APPROPRIATE BOX

4. Sex:  Male  Female
5. Marital Status  Never Married  Married  Divorced  Widow/Widower
6. Have you at any time applied for a permit to settle permanently in Namibia?  Yes  No
7. Have you ever been restricted or refused entry to Namibia?  Yes  No
8. Have you ever been deported or ordered to leave Namibia?  Yes  No
9. Have you ever been convicted of any crime in any country?  Yes  No
10. Are you suffering from tuberculosis, or any other contagious lung disease; trachoma, or any other chronic eye infection, frambesia, yaws, scabies or any other contagious bacterial or other skin disease; syphilis or any other venereal disease; or leprosy or acquired immune deficiency syndrome virus (AIDS virus), or any mental illness or affliction?  Yes  No

11. If the reply to any one of the questions 6 to 9 is in the affirmative, attach full particulars
12. Birth: (a) Date: \_\_\_\_\_ (b) Place: \_\_\_\_\_ Country: \_\_\_\_\_
13. Citizenship: \_\_\_\_\_ (if acquired by naturalization, state original citizenship)
14. Passport: (a) Number \_\_\_\_\_ (b) Place of issue: \_\_\_\_\_  
 (c) Date of issue \_\_\_\_\_ (d) Date of expiry: \_\_\_\_\_  
 (e) Is passport valid for travel to Namibia?  Yes  No

15. (a) Present residential address: \_\_\_\_\_  
 (b) Telephone number: (Code: \_\_\_\_\_ ) No: \_\_\_\_\_

16. Address and period of residence in country of which you are a permanent resident:  
 (a) Residential address: \_\_\_\_\_  
 (b) Telephone number: (Code: \_\_\_\_\_ ) No: \_\_\_\_\_  
 (c) Period: \_\_\_\_\_

17. Occupation or profession: \_\_\_\_\_

18. Firm, company, university, etc., to which you are attached or which you represent:  
 (a) Name and address of employer: \_\_\_\_\_  
 (b) Telephone number: (Code: \_\_\_\_\_ ) No: \_\_\_\_\_  
 (c) Nature of business: \_\_\_\_\_  
 (d) If a student, name of university to which you are attached and the course pursued: \_\_\_\_\_

19. If accompanied by your wife and children, state:
- | FIRST NAMES | DATE OF BIRTH | PLACE OF BIRTH |
|-------------|---------------|----------------|
| (a) _____   | (a) _____     | (a) _____      |
| (b) _____   | (b) _____     | (b) _____      |
| (c) _____   | (c) _____     | (c) _____      |

20. (a) What amount of money will you have on arrival in Namibia for your own use? N\$ \_\_\_\_\_  
 (b) Will you be in possession of an onward/return ticket?  Yes  No

(N.B. Separate applications have to be completed in respect of your spouse or children over the age of 16 years and children traveling with their own passports.)

**NOTE: COMPLETE ONLY PART A OR B**

**(A) HOLIDAY / BUSINESS / WORK / TRANSIT VISA**

1. Intended date and port of arrival in Namibia: \_\_\_\_\_
2. (a) What is the purpose of your visit? \_\_\_\_\_  
(b) If it is for business, explain in detail the nature of business: \_\_\_\_\_  
\_\_\_\_\_  
(c) Duration of intended visit (number of days, weeks, or months): \_\_\_\_\_
3. Places to be visited in Namibia (full address, including telephone number must be provided): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. If the purpose of your visit is for medical treatment, please provide the following information:  
(a) Name of doctor, hospital or clinic you will visit: \_\_\_\_\_  
(b) Who will pay your medical expenses and hospital fees: \_\_\_\_\_  
(c) If you are liable for the expenses and fees above, state amount of funds available: \_\_\_\_\_
5. Proposed residential address in Namibia: \_\_\_\_\_ Telephone number: \_\_\_\_\_
6. Name and addresses of relatives in Namibia:  

NAME	ADDRESS AND TELEPHONE NUMBER	RELATIONSHIP
(a) _____	_____	_____
(b) _____	_____	_____
7. Date of last visit, if any to Namibia: \_\_\_\_\_
8. Do you contribute professionally or otherwise to publications, radio, television or films? If so, please give details: \_\_\_\_\_
9. (a) Destination after leaving Namibia: \_\_\_\_\_  
(b) Mode of travel to destination: \_\_\_\_\_  
(c) Intended date and port of departure: \_\_\_\_\_  
(d) Is your entry to that destination assured, e.g. do you hold visa or permit for permanent or temporary residence? (Proof to be submitted) \_\_\_\_\_
10. Reasons for traveling through Namibia: \_\_\_\_\_  
\_\_\_\_\_

**(B) RETURN VISA**

**IMPORTANT**

An applicant has to:

- (i) produce his or her passport or travel document; and
- (ii) submit proof of his or her right residence in Namibia if not endorsed in his or her passport.

1. (a) Kind of Permit and number: \_\_\_\_\_  
(b) Date of departure: \_\_\_\_\_  
(c) Expected date of return: \_\_\_\_\_
2. Particulars of residence in Namibia:  

DATE OF FIRST ENTRY	PORT OF ENTRY	PERIODS OF RESIDENCE IN NAMIBIA	
		From	To
_____	_____	_____	_____
_____	_____	_____	_____
3. Countries to which you will be travelling:  
(a) \_\_\_\_\_ (b) \_\_\_\_\_ (c) \_\_\_\_\_ (d) \_\_\_\_\_
4. Purpose of journey (explain fully): \_\_\_\_\_  
\_\_\_\_\_

I solemnly declare that the above particulars given by me are true in substance and in fact that I fully understand the meaning thereof

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
(N.B. Only the signature of the applicant will be accepted)



# REPUBLIC OF NAMIBIA

## MINISTRY OF HOME AFFAIRS DEPARTMENT OF CIVIC AFFAIRS

### DEED OF SURETY

WHEREAS (1).....  
.....

is an intended visitor/employee to Namibia and (1).....  
.....

may be repatriated or deported from Namibia by the Government of the Government of the Republic of Namibia which may involve certain expenses and costs.

NOW THEREFORE, I

(2).....

do hereby bind myself as surety and co-principale debtor to the said

### GOVERNMENT OF THE REPUBLIC OF NAMIBIA

(hereinafter called 'the Government')

(a) of all expenses and costs to be incurred for the repatriation or deportation:

(b) the care, treatment and maintenance of the said person by the Government and/or a local authority and/or any other public body of

(1).....

and the amount thereof (not exceeding N\$.....) shall be in the sole discretion of the Ministry of Home Affairs on behalf of the Government, and I hereby renounce all benefits arising out of the legal exceptions ordinis seu excussionis et divisionis with the full force and effect with which I acknowledge myself to be acquired.

I choose my domicilium citande et executandi for all purposes of and in connection with this deed as follows:

.....

SIGNED AT..... this..... day of..... 20..... in the presence of the undersigned witnesses.

.....  
(Signature)

AS WITNESSES:

1.....

2.....

REVENUE  
STAMP  
  
(3)

\* (1) Full name of visitor/employee, in block letters.  
(2) Full name of employer, guardian, relative or bank giving surety, in block letters.  
(3) Under item 20 of the first Schedule of Act 77 of 1968 5c for every N\$100 or part thereof.



REPUBLIC OF NAMIBIA  
MINISTRY OF HOME AFFAIRS  
DEPARTMENT OF CIVIC AFFAIRS

IMMIGRATION CONTROL ACT, 1993  
ANNEXURE TO APPLICATION FOR EMPLOYMENT PERMIT  
(Section 27(1)/Regulation 17)

REPRESENTATION BY PROSPECTIVE EMPLOYER

1. Surname and full first names of applicant (prospective employee): .....

PARTICULARS RELATING TO THE PERSPECTIVE EMPLOYER

2. Name of employer: .....

3. Street address (head-office): .....

4. Postal address: .....

5. Telephone number: .....

6. Address(es) of branch(es): .....

7. Name(s) and citizenship of owner(s) of employer-undertaking, or if a company or close corporation, name(s) and citizenship of director(s) or member(s):

.....  
.....  
.....

8. Date of establishment of the business of the employer: .....

9. Main activities of employer: .....

.....

10. Employees at present employed by the employer: .....

(a) total number: .....

(b) Namibian citizens: (number): .....

(c) non-citizens: .....

(i) permanent residents (number): .....

(ii) holders of employment permits (number) .....

(iii) others .....

PARTICULARS OF THE VACANCY CONCERNED

11. Job title: .....

12. Brief job description: .....

13. Date on which vacancy occurred: .....

14. Details of enquiries made at Trade Unions: .....

15. Details of enquiries made at private employment agencies (attach proof): .....

16. Details of advertisements relating to vacancy in local newspapers (attach proof): .....

17. Why is the filling of the post essential (attach motivation, if necessary) .....

18. Reasons why Namibian citizens or persons in possession of permanent residence permits  
are not considered suitable or cannot be considered suitable for the position  
(attach motivation, if necessary): .....

.....  
.....

19. Reasons why the position cannot be filled by promoting any of the other employees of the employer: .....
20. Will the employer be prepared to employ a suitable Namibian citizen, if available?
21. If the reply to paragraph 20 is "No", give reasons: 

Yes		No	
-----	--	----	--
22. Are Namibian citizens being trained to fill the position?
23. If the reply to paragraph 22 is "YES", give details. If "NO", motivate (attach details of motivation, if necessary): 

Yes		No	
-----	--	----	--
24. Employer's requirements for an appointment to the position (qualifications, training, experience etc.)
25. Place in Namibia where employee will be employed (town/district/farm):
26. Proposed date of commencement of employment: .....
27. Conditions of service agreed upon:
- (a) remuneration per week/month/year: N\$ .....
- (b) other benefits: .....
- (c) period of employment: .....

**PARTICULARS RELATING TO THE APPLICANT**

28. Reasons why the applicant is considered to be a suitable candidate for the position (in respect of the following)
- (a) qualifications and training: .....
- (b) experience: .....
- (c) other reasons (be specific): .....
29. Is the applicant in possession of any qualification or training or experience not obtainable or available in Namibia? 

Yes		No	
-----	--	----	--
30. If the reply to paragraph 29 is "Yes", give details (attach details, if necessary): .....
31. Will the applicant train other employees? 

Yes		No	
-----	--	----	--
32. Reasons for your reply to the question in paragraph 31:
33. Details of training programmes for local inhabitants (attach details, if necessary):.....

**UNDERTAKING BY PROSPECTIVE EMPLOYER**

I/We

acting in my/our personal capacity/capacities acting for and on behalf of .....

duly authorized thereto, hereby accept full responsibility for all costs pertaining to the return of the applicant and his or her spouse and his or her dependent children to his or her or their respective countries of domicile at the expiration of applicant's period of employment in Namibia referred to in paragraph 27(c), or any extension of such period.

Signed at ..... on this ..... day of ..... 20.....

AS WITNESSES:

1. ....
2. ....

PROSPECTIVE EMPLOYER/FOR ON BEHALF OF PROSPECTIVE EMPLOYER.