



IMMIGRATION
CAYMAN ISLANDS

PERMISSION TO CONTINUE WORKING AMENDMENT APPLICATION
TO ADD OR REMOVE DEPENDANT(S)

Send the completed application to:
The Chief Immigration Officer

PO Box 1098, Cayman Islands, KY1-1102

Do not leave any question blank. If a question does not apply to you insert "Not Applicable" or "N/A" in the space provided.
If you have Permission to Continue Working and you wish to add or remove Dependant(s), use complete this form.

If you have an application for Permanent Residence pending and wish to add or remove dependants you must complete this application and also complete and attach Form [R15 - Dependant Information Form Request to Include Dependants](#).

In this case, Form R15 will be appended to your application for Permanent Residence.

Retain a copy of all applications and attachments submitted to Immigration.

APPLICATION FORM CONTAINS 3 PAGE

I have a Permanent Residency Application Pending

I have an appeal pending

Applicant Details

1. File Number (if known) (Also known as "Work Reference Number")

Name as it appears in valid Passport

2. Surname (Last Names)

Given Names (First Names)

Maiden Name (if applicable)

3. Date of Birth

4. Employer's Name (if applicable)

Dependant Details - Please select one or both of the following options.

5. Add dependant(s)

Name	Date of Birth	Nationality	Relationship
<input type="text"/>	<input type="text" value="DD/MM/YY"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="DD/MM/YY"/>	<input type="text"/>	<input type="text"/>

6. Remove dependant(s)

Name	Date of Birth	Nationality	Relationship
<input type="text"/>	<input type="text" value="DD/MM/YY"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text" value="DD/MM/YY"/>	<input type="text"/>	<input type="text"/>

Provide reason(s) for dependant(s) removal



PCW AMENDMENT TO ADD OR REMOVE DEPENDANT(S)

Do Not leave any question blank. If a question does not apply to you, insert "Not Applicable" or "N/A" in the space provided.
Use separate sheet of paper if necessary.

Declaration

I declare the information contained in this application to be correct to the best of my knowledge and belief and I am aware that it is a criminal offence to make a statement or representation that is false in a material fact which I know to be false or do not believe to be true.

In accordance with The Immigration Law, its Revisions, and its Regulations, I hereby agree to submit to being Fingerprinted/Palm-printed for the purpose of identity verification and criminal checks domestically and internationally.

Applicant's signature - original signature required

Date (dd/mm/yy) _____

Employer's signature (if applicable) - original signature required
Agency signature not acceptable

Date (dd/mm/yy) _____

For Official Use Only

Has dependant(s) ever been charged or convicted in a court of law of a criminal offence in any country? Yes No

Has dependant(s) ever been required to pay an administrative fine for an offence in the Cayman Islands or other country, other than for a traffic offence? Yes No

Has dependant(s) ever been sanctioned by a professional ethics body, licensing board or any other regulating body? Yes No

Approved

Deferred _____

Refused _____

On behalf of Chief Immigration Officer

Date



Amendment Form Checklist To Add or Remove Dependant(s) to a Permission to Continue Working Application

This list is a summary of general requirements for ALL applicants.

The Chief Immigration Officer and the CS&PR Board reserve the right to request additional information or documentation.

FOR ALL APPLICANTS

- Administrative non-refundable fee of CI \$100
- Note: any dependant fee(s) plus non-refundable repatriation fee(s) are payable if application approved. These potential fees are not due at time of application.
- Cover letter attached with summary of why the amendment is requested.
- Application form duly completed, signed and dated by applicant and employer (if applicable).
- Do not leave any question blank. If a question does not apply to you, insert "Not Applicable" or "N/A" in the space provided.

IF ADDING A DEPENDANT UNDER THE AGE OF 18

- Certified copy of birth certificate.
- A letter from a private school confirming acceptance/attendance.
- Employment Letter from both parents including hours worked per week, monthly income and other benefits received.

IF ADDING A DEPENDANT OVER THE AGE OF 18

- Certified copy of birth certificate.
- Certified copy of marriage certificate, if applicable.
- If full-time student, a letter from school confirming acceptance/attendance.
- Employment Letter including hours worked per week, monthly income and other benefits received. You may submit an employment letter for your spouse if you feel it will aid your application.
- Original signed and sealed Police Clearance Certificate. The Police Certificate will be less than 6 months old and from last place of residence
- Original medical questionnaire as applicable. The full medical is only required every 3 years. The full medical includes an original HIV/VDRL lab report. The HIV/VDRL is required every six months.

IF APPLICANT IS THE FATHER, IS UNMARRIED, AND ADDING A CHILD AS A DEPENDANT

- Proof of legal custody of the child
- Contact information for the child's mother or other details as to her whereabouts.
- Cover letter attached with summary of why the amendment is required.
- Employment Letter from father's employer including hours worked per week, monthly income and other benefits received. You may submit an employment letter for the child's mother if you feel it will aid your application.
- A letter from a private school confirming acceptance/attendance.

REMOVE DEPENDANT

- Application fully completed, signed and dated by applicant and employer (if applicable).
- Documentation supporting removal of dependant, e.g., death certificate, divorce decree, legal document of separation.