



IRISH NATURALISATION AND IMMIGRATION SERVICE

Address for completed forms: Unit 2 Residence Division
Irish Naturalisation and Immigration Service
13/14 Burgh Quay
Dublin 2

**APPLICATION FOR
Reactivation Employment Permit Permission**

Form: REPP

Version: 1.01

Instructions

This form must be completed in English in BLOCK CAPITALS and in black or blue ink. All mandatory sections must be completed. Incomplete applications cannot be processed and will be returned.

This application form is for non-EEA nationals who entered the labour market on a valid employment permit but who had subsequently fallen out of the system and who have a current offer of employment.

1. Initial Information

All fields within this section are mandatory.

1.1 Applicant Details		
Surname/Family Name		
Given Names		
Dept Of Justice Number i.e. Personal ID or 69/xxxxxx/xx		
GNIB Number		
PPS Number		
1.2 Other names used		
<i>If you have never used another name please go directly to section 2</i>		
Did you have a different name at the time of your birth?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
If you answered yes, you must provide the information below:		
Name (at birth)	Family name	Given name
Reason for Change	Marriage <input type="checkbox"/> Adoption <input type="checkbox"/> Deed Poll <input type="checkbox"/> Other <input type="checkbox"/> If "Other", please state reason below:	

YOU MUST SIGN THIS DECLARATION

I declare that the information furnished on this form is true and complete to the best of my knowledge and belief.

I confirm that I fall within one of the **eligible** categories listed on **page one** of the 'Eligibility under the REP scheme' document on the INIS website (www.inis.gov.ie)

Signature

Date

/ / day/month/year

4. Expired Employment Permit Details

If you are a person who entered the labour market legally on foot of an employment permit which has now expired and you have remained in the State following its expiry, and have not obtained an alternative form of residence permission please complete this section of the application form.

Employment Permit Details	
4.1 Start date of First Employment Permit	<input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> day/month/year
4.2 Did you have an employment permit?	Yes <input type="checkbox"/> No <input type="checkbox"/>
4.3 Name and Address of last employer (for whom an employment permit was issued)	
4.4 Date of expiry of last employment permit	<input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> day/month/year
4.5 Reason for non renewal of last employment permit	

5. Current Employment Permit Details

If you are a person who has a current employment permit issued before the 1st October 2014 and wish to change employer but due to the new policy of the Department of Jobs Enterprise and Innovation you no longer qualify for a General, Critical Skill or Dependant/Partner/Spouse Employment Permit please complete this section of the application form.

Employment Permit Details	
5.1 Do you have a current employment permit?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5.2 If YES was this in your own right or as a dependent of another person	Own right <input type="checkbox"/> As a dependent <input type="checkbox"/>
5.3 Name and Address of the employer (for whom the employment permit was issued)	
5.4 Date of expiry of this employment permit	<input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> day/month/year
5.5 Reason why you don't qualify for a General, Critical Skill or Dependant/Partner/Spouse Employment Permit	

6. Proposed New Employment Permit Details

All fields within this section are mandatory

Employment Permit Details	
6.1 Name and Address of employer, in respect of whom it is intended a Reactivation Employment Permit will be applied for.	

7. Current Contact Details

All fields within this section are mandatory

7.1 Current Residential Address	
Address <i>(This must be your current residential address A PO box is not acceptable)</i>	
7.2 Other Contact Details	
Daytime Telephone Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Mobile Telephone Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Email Address	

8. Current Passport and Citizenship

All fields within this section are mandatory

Passport Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Date of issue	<input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <i>day/month/year</i>
Date of expiry	<input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <i>day/month/year</i>
Place of issue	
Country of Citizenship (country who issued your passport)	
State any other countries of which you are a citizen	

IMPORTANT NOTE

Please include a colour photocopy of the biodata page of your current valid passport

DISCLAIMER

The issue of permission under this Scheme does not guarantee that a Reactivation Employment Permit will issue. All Reactivation Employment Permit applications are considered by the Minister for Jobs, Enterprise and Innovation in line with the Employment Permits Act 2006 (as amended) and any associated Regulations in force at time of application.

9. Letter of Authority

This section is optional

A letter of authority is required if you wish to have a third party (e.g.: a solicitor) manage your application on your behalf. Please complete the letter of authority if relevant and enclose with your application.

Letter of Authority

Unit 2 Residence Division
Irish Naturalisation and Immigration Service
13/14 Burgh Quay
Dublin 2

Dear Sir/Madam,

I wish to confirm that I have retained the services of the following firm to act on my behalf in relation to my immigration matters in the State.

All further communications should be addressed to:

Company Name	
Address Line 1	
Address Line 2	
Postcode	
County	
Contact Name (the person dealing with my matters)	

Signature

Print Name

Date

// *day/month/year*