FORM F

IMMIGRATION ORDINANCE, 2011

(Regulation 9)

APPLICATION FOR A LONG TERM ENTRY PERMIT

1. Surname:	2. Forenames:				
3. Date of birth (dd/mm/yyyy):	4. Gender:				
· • • • • • • • • • • • • • • • • • • •	Male Female				
5. Passport number:	6. Passport date of expiry (dd/mm/yyyy)				
7. Nationality	8. Marital status:				
•					
9. Current Address:					
9. Current Address.					
Tel: E-mail:					
10. Address in St. Helena, if different:					
11. Date of arrival (dd/mm/yyyy)	12. Expiry date of current entry permit (if applicable) (dd/mm/yyyy)				
	(dd/fillil/yyyy)				
13. Date for this permit to take effect (dd/mm/yyyy)	14. Date for this permit to expire (dd/mm/yyyy)				
15. For what purpose do you wish to reside in St. Helena?					
A. Staying with friends or family					
B. Long term tourist					
C. Work: Please specify profession					
D. Retiring / Retired					
E. Other: Please specify					
NOTE: If you are coming to St. Helena to work you will n	eed to apply for permission. Please tick here if you or your				
employer has already submitted an application for permission for you to work.					
16 Place state the amount (a = \$1000) and tame (a = \$Cash) of finance and labels to see for the densition of a constant					
16. Please state the amount (e.g. £1000) and type (e.g. Cash) of finances available to you for the duration of your stay in St. Helena:					
Note: You may be asked to provide evidence in support of your stated financial situation					
17. Please give details of your medical insurance to cover at least your first year in St. Helena. This should include the					
provider and policy number:					

	e: St. Helena does not provide complin ensive. You must ensure you have adeq				
18. Details of accompanying family members					
	Name	DOB	Relationship	Nationality	
1					
2					
3					
4					
Note	e: All family members must complete s	eparate long term	entry permit applications	S	
19.]	Declaration(please tick each):				
I have adequate means to provide for my own (and my dependants') accommodation, food & clothing for the duration of my stay on St. Helena. I have adequate means to pay for my own (and my dependants') health and welfare including medical evacuation. I have a return ticket to my country of origin (including dependants) or adequate means to repatriate to place of domicile me and any dependants. I have not been involved in or associated with terrorist activity or organisations, war crimes, crimes against humanity or genocide. I do not have any outstanding fines or unspent criminal convictions in any country. Please specify all outstanding fines or unspent convictions if you have any here: To the best of my knowledge and belief all particulars supplied by me are correct and complete					
You	may be asked to provide evidence in s	upport of the state	ements above.		
20. 3	Signature		21. Date (dd/mm/yyyy)		
NOT	TES:		<u> </u>		
	(b) A person, and their a provisions of a cont	e requirement to h Helenian status of lependants, in the ract entered into of om or in right of h	nold either of these permit or is the dependant of a pe service of the Crown or w on behalf of Her Majesty (Her Government of St. He		

- (c) A person who, upon arrival in St. Helena is an officer or a member of the crew of a vessel which has been approved by the Chief Immigration Officer for the purposes of this subsection and who is under an engagement requiring him to leave on that vessel;
- (d) Any consular officer within the meaning of the Vienna Convention or Consular Relations 1963;
- (e) A person who arrives on a vessel, the Master of which has been granted a landing permission authorising a specified number of passengers and crew of that vessel to enter St. Helena without obtaining an entry permit and that person is within that specified number.
- 2. Separate restrictions apply as to employment and land ownership by immigrants
- 3. It is a criminal offence to give false information