THE UNITED REPUBLIC OF TANZANIA

APPLICATION FOR FIRST GRANT/REPLACEMENT OF RESIDENCE PERMIT CLASS A/B/C
(THE IMMIGRATION ACT, 1995)

IMPORTANT:
Application for Residence Permits Class A and C should be forwarded to the Director of Immigration Services P.O. BOX 512, Dar es Salaam. Applications for Class B (employees) should be forwarded to the Director of Immigration Services through the Labour Commissioner, P.O. Box 9014, Dar es Salaam.

Five photographic should be attached to application forms.

PART 1-PARTICULARS OF APPLICANT

I HEREBY APPLY FOR FIRST GRANT/REPLACEMENT OF RESIDENCE PERMIT CLASS

1. Full name MR./MRS./MISS.
2. Marital Status.
3. Home Address.
4. Address while in Tanzania.
5. Place of Birth. Date of Birth
7. Passport number. Date of issue Place of Issue
8. Height. Colour of Eyes. Colour of hair
9. Academic qualifications held. Photocopies of Certificates or other proof should be attached.
10. Profession/Occupation/or self employed applicants state specifically what type of business you are carrying on.
11. (a) Place of Attended Residence in Tanzania Region
       District. Area street. Plot No./House No.
(b) Place of Work in Tanzania
       District.
12. Applications for Residence Permit will be required to execute one of the following conditions:-
    (1) General Security Covenant
    (2) Bank Bond (U$ 1,000)
    (3) Cash Deposit (U$ 1,000)
13. Particulars of any previous application for a residence permit to Tanzania stating whether or not they have been granted or refused.

DECLARATION

14. I........................................ THE APPLICANT, HEREBY DECLARE THAT THE
    AFOREGOING ARE CORRECT IN EVERY DETAIL.

Date........................................ Signature of Applicant

PART II-PARTICULARS OF ACCOMPANYING FAMILIES

To be completed only by applicants who their non Tanzanian wives and children under 18 years of age to reside with them in Tanzania

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<tr>
<th>Full Name</th>
<th>Relationship to Applicant</th>
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PART III-EMPLOYMENT INFORMATION-(To be completed by Employer if Applicant seeks to take up or continue with specific employment in Tanzania).

NOTE: It is the Government's policy that the economy of Tanzania should be manned by trained and competent citizens. Residence Permit (or replacement therefore) for employment in Tanzania are issued to non-citizens with skills not available at present in Tanzania labour market only on the understanding that effective training programmes in service or otherwise are undertaken with a specified period to produce trained citizens competent to replace them. For further information contact the appointment Bureau of Ministry of Labour and Manpower Development, Dar es Salaam.

1. Name of Employer
2. Industry
3. Total number of your employees.
   Citizen............(a) Skilled.................(b) Unskilled.................
   Non Citizen............(a) Skilled.................(b) Unskilled.................
4. Job title
5. Job Description (Give a brief descriptions of what an individual holding this Post is required to do in your understanding)
6. Experience and other requirements (state estimated minimum period needed for a newly qualified worker to perform independently upon completion of the necessary trained e.g. "immediately after one year close supervision etc"
7. What efforts have you made to obtain job for the citizen?
8. Do you presently operate a schemes of in-service training or participate in any Government sponsored scheme of education programmes operated by an approved higher education/technical institution to get a Tanzania for the post.

9. IMPORTANT TO NOTE:
   (a) Employees will be required to submit return on Employment of Non-Citizens (TIF 19 to the Director of Immigration Services before 31st March Yearly.
   (b) State when you lastly submitted your Returns on Employment of Non-Citizens to this office.

Date..................20.................. Signature of Employer with official stamp

PART IV-(FOR OFFICIAL USE ONLY):
10. Comments for the Ministry of Labour and Manpower Development.

Date..................20.................. Labour Commissioner

11. Action by Immigration Division.

Date.................. Director of Immigration Services