

DECLARATION OF COMPLIANCE/UNDERTAKING FOR EMPLOYER (PLEASE TYPE or WRITE IN CAPITAL LETTERS IN BLUE OR BLACK INK)

The undersigned, as the employer/authorized representative of the employer (mention complete address)		
do solemnly swear and sincerely declare that Mr./Ms./(first name)(middle		
name) bearing passport/voter card		
number from (country) is being employed as		
(designation)in accordance to the I have obtained prior approval from		
Department of Labour vide approval no		
(dd/mm/yy)and subsequent Employment Visa/Permit No. (as applicable)		
dated (dd/mm/yy) approved by the Department		
of Immigration.		
Tow	rards this end, I hereby solemnly affirm and de	clare the following:
i)	All documents submitted by us for the purpose	of obtaining work permit are genuine.
ii)	That we are fully responsible for overseeing the stay in the Kingdom.	conduct of the foreign worker during his or her
iii)	That he/sheshallabidebyalltherelevantlaws, rulesandregulationsoftheKingdomofBhutan.	
iv)	That he/she shall stay in the designated area and engage only in activity specified in the work	
	permit.	
v)	That he/she shall respect local norms and custor	ns, and not engage in any act against the Tsa-
	Wa-Sum.	
vi)	That he/she shall carry valid work permit at all times and produce it on demand to immigration	
\	authorities.	
vii)	,	
viii)	any point in time. That he/she shall be required to leave the Kingdom for six months cooling period upon	
viii <i>j</i>	completion of three years stay in the Kingdom, as applicable.	
ix)	That he/she will not be eligible to change employer/category unless he/she quits current job	
,	and remain outside the Kingdom for at least fifteen days.	
x)	That this Declaration of Compliance is submitted to the Department of Immigration on our own	
,	free will and with the full knowledge and unders	
	by a court of law and/or any penalties/fines under Immigration Act of the Kingdom of Bhutan and any other laws, rules and regulations as may be applicable, for submission of any false, fabricated or misleading information or documents for purposes of obtaining Work Permit.	
	Witness	
	Signature	Signature of applicant with legal stamp
	Name:	Contact No
	ID No	Date:
	Address:	

Contact No.