外国人来华工作许可申请表

（来华工作90日以上）

**APPLICATION FORM FOR FOREIGNER'S WORK PERMIT**

（WORKING PERIOD OF MORE THAN 90 DAYS）

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| 外国人工作许可证编号CURRENT WORK PERMIT NUMBER | 不需填写，系统自动生成 |
| 姓（如护照所示）SURNAME (As in Passport) |  | 名（如护照所示）FIRSTAND MIDDLE NAMES (Asin Passport) |  | 办理申请中国签证所在地：Where do you apply for Chinese visa? 国家（或地区）Country or Region 中国使领馆 Chinese Embassy or Consulate |
| 别名或曾用名（英文）OTHER NAME USED |  | 中文姓名 CHINESE NAME |  |
| 性别 GENDER |  | 国籍 NATIONALITY |  |
| 出生日期 DATE OFBIRTH(yyyy-mm-dd*)* |  | 婚姻状况 MARITALSTATUS |  |
| 护照类型PASSPORT TYPE |  | 护照号码PASSPORT NUMBER |  | 护照签发日期ISSUANCE DATE |  |
| 护照有效期至 EXPIRATIONDATE(yyyy-mm-dd) |  | 最高学位（学历）HIGHEST ACADEMIC DEGREE |  | 汉语水平CHINESE PROFICIENCY |  |
| 是否持有境外职业资格证书 HAVE YOU EVEROBTAINED ANYPROFESSIONAL QUALIFICATIONCERTIFICATE ABROAD? |  | 职业资格证书名称和编号 NAME AND NUMBEROF PROFESSIONALQUALIFICATIONCERTIFICATES |  | 申请人电子邮箱E-MAIL ADDRESS | e |
| 列出所有曾授予你护照的国家 LIST ALLCOUNTRIES THAT EVERISSUED YOU A PASSPORT |  | 已连续在华工作年限LENGTH OF WORKING TIME |  | 工作岗位（职业）OCCUPATION |  |
| 聘用合同/任职证明在华工作起始时间 INTENTEDWORKING TIME IN CHINA |  | 申请在中国工作职务INTENTED JOB TITLE IN CHINA |  | 所属行业 INDUSTRY CATEGORY |  |
| 聘用方式EMPLOYMENT METHOD |  | 薪酬SALARY(monthly) |  | 公认职业成就RECOGNIZEDPROFESSIONALACHIEVEMENT |  |
| 申请在华工作时间INTENTED LENGTH OFWORKING TIME IN CHINA |  | 每年在华工作时间（月)WORKING TIME INCHINA PER YEAR(months) |  | 是否毕业于世界知名大学ARE YOU GRADUATEDFROM WORLD RENOWNEDUNIVERSITIES |  |
| 是否需要行业主管部门批准 DO YOU NEEDAPPROVAL FROM RELATED CHINESEINDUSTRY AUTHORITY? |  | 行业主管部门名称NAME OF INDUSTRY AUTHORITY |  | 行业主管部门批准证书文号 APPROVALDOCUMENT NUMBER |  |
| 是否持有中国职业资格证书（准入类）HAVE YOUEVER OBTAINED ANYCHINESE PROFESSIONALQUALIFICATIONCERTIFICATE(For Vocational Accession )? |  | 职业资格证书（准入类）名称NAME OF CHINESEPROFESSIONALQUALIFICATIONCERTIFICATES(ForVocational Accessio) |  | 职业资格证书号码NUMBER OF CHINESEPROFESSIONALQUALIFICATIONCERTIFICATES OBTAINED |  |

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| 是否曾在世界 500 强企业、知名金融机构或律师事务所等任职 DO YOUHAVE ANY EXPERIENCEIN WORLD TOP 500COMPANIES,WELL-KNOWN FINANCIALINSTITUTIONS OR LAWFIRMS? |  | 在上述单位曾担任最高职务 HIGHEST POSITIONYOU HAVE EVER HELD INAFOREMENTIONEDORGANIZATIONS |  | 已连续在华工作年限CONSECUTIVE WORKING YEARS IN CHINA |  |
| 境外派遣单位名称NAME OF DISPATCHINGINSTITUTION ABROAD |  | 派遣单位所在国家LOCATION OFDISPATCHINGINSTITUTION ABROAD |  | 是否有专利等知识产权POSSESS ANY PATENT OROTHER INTELLECTUAL PROPERTY RIGHTS |  |
| 在中国工作电话BUSINESSTELEPHONENUMBER IN CHINA |  | 在中国工作任务 JOBDESCRIPTION IN CHINA |  |
| 列出曾就读的高等教育学校（含职业教育学校，如无高等教育经历，请填写最高学历）LIST ALL HIGHER EDUCATIONAL INSTITUTIONS YOU HAVE ATTENTED (INCLUDING VOCATIONALINSTITUTIONS) |
| 名称NAME | 所在国家LOCATION | 就读时间DATES OFATTENDANCE | 专业SPECIALITY | 学位ACADEMIC QUALIFICATION |
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| 列出曾工作的单位(近十年内)LIST ALL EMPLOYERS YOU HAVE WORKED FOR IN LAST TEN YEARS |
| 名称NAME | 工作所在国家 LOCATION | 起止时间DATES | 工作岗位OCCUPATION | 职务 JOB TITLE | 工作任务JOB DESCRIPTION |
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| 随行家属情况 ACCOMPANYING FAMILY MEMBERS |
| 是否有家属随行DO YOU HAVE ANY ACCOMPANYING MEMBER? | 無 | 人数 NUMBEROF THEACCOMPANYIN G MEMBERS |  |
| 随行家属姓名NAME (As inPassport) | 出生日期DATE OFBIRTH(yyyymm-dd) | 性别GENDER | 国籍NATIONALITY | 与申请人关系RELATIONSHIP TOTHE APPLICANT | 护照号码PASSPORT NUMBER |
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| 在华紧急联系人EMERGENCYCONTACT PERSONIN CHINA |  | 联系电话EMERGENCY CONTACTTELEPHONE NUMBER |  | 电子邮箱E-MAILADDRESS |  |

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| 申领外国人工作许可证APPLICATION FOR FOREIGNER'S WORK PERMIT |
| 入境时间 DATE OFENTRY |  | 持有签证种类TYPE OF VISA HELD |  | 签证号码 VISANUMBER |  |
| 您是否由于犯有任何罪行而曾经被逮捕或被判有罪，即使后来得到了赦免或收回等其他类似措施？HAVE YOU EVER BEEN ARRESTED OR CONVICTED FOR ANY OFFENSE OR CRIME, EVEN THOUGH SUBJECT OF A PARDON, AMNESTY OR OTHER SIMILAR LEGAL ACTION? | □是 YES |
| □否 NO |
| 您是否曾感染过对公共健康有影响的传染病或患过可造成危险的身体疾病或精神病？HAVE YOU EVER BEEN AFFLICTED WITH A COMMUNICABLE DISEASE OF PUBLIC HEALTH SIGNIFICANCE OR A DANGEROUS PHYSICAL OR MENTAL DISORDER? | □是 YES |
| □否 NO |
| 您是否曾违反中国法律，被中国政府递解出境？HAVE YOU EVER VIOLATED THE LAW OF CHINA, AND DEPORTED FROM CHINA? | □是 YES |
| □否 NO |
| 本人郑重承诺，在本国及境外无犯罪记录，来华工作后，将严格遵守中国法律法规，自觉服从聘请单位各项管理制度。本申请表上所做之回答均属事实且详尽，所附材料真实、有效，若所提交的内容被发现不实或不详，本人愿意承担法律责任。对所提交的全部申请信息和附件授权可以调查，包括我的雇佣情况、工作表现、工作能力、教育、个人经历和无犯罪记录。如果我已超过 60 周岁，确保在中国工作期间有相应的医疗保险。I SOLEMNLY PROMISE THAT I HAVE NO CRIMINAL RECORD BOTH AT MY HOME COUNTRY AND ABROAD. WHEN I ARRIVE IN CHINA AND START TO WORK, I WILL STRICTLY ABIDE BY THE CHINESE LAWS AND REGULATIONS, AND CONSCIOUSLY OBEY THE MANAGEMENT SYSTEM OF THE EMPLOYING INSTITUTION.CERTIFY THAT ALL THE ANSWERS TO THIS APPLICATION AND RELEVANT ATTACHMENTS TO IT ARE TRUEAND COMPLETED. IF THE INFORMATION IS FOUND TO BE UNTRUE OR UNCOMPLETED, I AM AWARE THATNEED TO UNDERTAKE CORRESPONDING LEGAL RESPONSIBILITIES.I UNDERSTAND THAT ALL OF THEINFORMATION IN THIS APPLICATION AND DOCUMENTS SUBMITTEDWITH THIS APPLICATION MAY BECHECKED BY RELEVANT PARTIES, INCLUDINGMY EMPLOYMENT, WORKPERFORMANCE,ABILITIES,EDUCATION,PERSONAL EXPERIENCES AND CONVICTION RECORDS.I CONFIRM THAT, IF I AM OVER SIXTY YEARS OLD,I WILL APPLY FOR MEDICAL INSURANCE COVERAGE AS ARE NEEDED DURING MY WORK PERIOD IN CHINA.申请人签名 SIGNATURE OF APPLICANT 日期 DATE(yyyy-mm-dd) |
| 用人单位承诺如实向行政机关提交有关材料和反映真实情况，并对申请材料实质内容的真实性负责,承担相关法律责任。THE EMPLOYER HEREBY DECLARES THAT ALL THE DOCUMENTS AND INFORMATIONS SUBMITTED TO THE AUTHORITY ARE TRUE,AND SHALL BE RESPONSIBLE TO THE AUTHENTICITY OF THE DOCUMENTS AND UNDERTAKE CORRESPONDING LEGAL RESPONSIBILITIES.用人单位公章SEAL OF EMPLOYER日期DATE(yyyy-mm-dd) |

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