



## Employee Self Requested Work Permit Cancellation Form

Please fill the below details. All fields are mandatory.

Date of application:	
----------------------	--

Details of the expatriate employee requesting for self-cancellation of work permit	
Work Permit No:	
Full Name:	
Passport Number/s:	
Employer Name:	
Date of Departure from Maldives:	

Please tick the appropriate box. If other, please specify the reason.

Reason for work permit self-cancellation application	
Employer did not request for cancellation after the resignation	<input type="checkbox"/>
Employer did not pay work permit related fees	<input type="checkbox"/>
Unable to reach employer, to request for cancellation of work permit	<input type="checkbox"/>
Other: (Please specify)	



**IMPORTANT NOTE:**

As per the Maldives foreign expatriate workers' regulation (2021/R-16) chapter 4, section 23 (b), work permit holders who have resigned from the work permit issued job and have departed from the Maldives and wish to cancel their work permit, will have the opportunity to cancel their own work permit. However, the individual will not be eligible for a new work permit under another employer for a duration of 6 months from the date of work permit cancellation, unless the employee is able to obtain and submit a no objection document from the previous employer (employer under whom, the work permit was self-cancelled).

**Signature of Employee;**

I hereby declare that the information given in this application is true and correct and I am aware of the consequences of self-cancellation of work permit as per the Maldives foreign expatriate workers' regulation.

Name:	
Passport Number:	
Signature:	
Date:	

**Checklist for required documents to be attached with this form**

Passport biodata page of applicant	
------------------------------------	--