

UK Border Agency

Form WRS 01/2009

Payment Slip - Single Application

For multiple applications please use the WRS multiple payment slip.

This form and the accompanying guidance notes may be included or reproduced in any non-Home Office website or publication.

Section A: Contact details of the person paying for the application																						
1 Title	Mr			Mrs		N	Miss			Ms		Ot	ther	(plea	ise s	tate)						
2 Contact name																						
3 House number and street																						
4 Town																						
5 County																						
6 Post code									7	You	r re	fere	nce									
Please complete lines 8-12 if details for a refund are different to the contact name and address above.																						
8 Payee / Company name																						
9 House number and street																						
10 Town																						
11 County																						
12 Post code																						
Section B: Details of the applicant																						
13 Is this application to be paid for	r?								Yes	;			No				(Plea	ase t	ick a _l	oprop	oriate	box)
14 Please tick whether you have included a passport or Passport National Identity Card																						
15 Surname/family name																						
16 First names																						
17 Date of birth																						
	d	d	m	m	У	У	У	У														_
18 Name of UK employer																						
19 Nationality	(Ple	ease Cze		ect y	/our	nat	tiona	ality Esto	-		g th	ne a _l		-						Lat	vian	
		Lith		ian				Poli		11				Hur Slov	_						viari veni	an
Ocation Or Dormont dataile	Ш					.1.4								310	ani	a11	:			310	VEIII	a11
Section C: Payment details – please complete where appropriate																						
20 Method of payment	ι	JK F		al or Pleas			payat			Ched me O	•	•										
Account No.	Π						code							Ch	eque	No.						
Or please debit my	•	•				/isa		N	/last	terC	ard		D	elta				Ma	aest	ro (UK)	
21 Amount paid	£	(0.0	0		Plea	ase u	ıse V	VRS	-Mul	tiple	for	a sir	ıgle _l	oayn	nent	for r	nulti	iple a	appli	catio	ns
22 Name on card																						
23 Card number																						
24 Card details	Va	lid fr	om			/				Ехр	iry c	late			/						•	
		sue				1					VV			 								
				(Ma	estro (UK))	J				•		(On i	ear of	card)	J 1 _						
25 Signature (card payment only)	1															D	ate	l				

Application for a registration certificate under the Worker Registration Scheme (WRS)

This form is valid only for applications made from 22 May 2009 until 30 April 2011

To be completed by the applicant

Please complete by typing or printing in ENGLISH in BLOCK letters and in black ink

Please see Part A of the WRS guidance notes for information on who has to register. Please see Part B for further details on completing the application form.

Com	npleted application	forms should be sent to:								
OR POSTAL APPLICATIONS		FOR APPLICATIONS SENT BY COURIER ONLY								
Worker Registration Scheme		UK Border Agency								
PO BOX 492		Worker Registration Scheme								
Durham		Milburngate House								
DH99 1WU		Durham								
		DH99 1SA								
Section 1: Type of applica	ation									
1 Have you already been issued w	vith a registration card und	er the Worker Registration Scheme?								
Yes Please enter the W complete Sections	RS reference number, the	n A8 /								
•	I sections of the form.									
(Please indicate by ticking the a	appropriate box)									
Section 2: Personal detail	s of applicant									
3 Title	Mr Mrs	Miss Ms Other (please state)								
4 Surname/family name										
5 Surname/family name at birth	n (if different)									
6 First names										
7 Gender		Male Female								
8 Date of birth										
6 Date of birtin		day month year								
9 Nationality		day month year								
		day month year								
9 Nationality	r	day month year								
9 Nationality10 Passport number, or		day month year								
9 Nationality10 Passport number, or National Identity card number		day month year								
 9 Nationality 10 Passport number, or National Identity card numbe 11 National Insurance number (insurance number) 	f you have one)	day month year								
 9 Nationality 10 Passport number, or National Identity card numbe 11 National Insurance number (in the content of the cont	f you have one) House No./Name	day month year								
 9 Nationality 10 Passport number, or National Identity card numbe 11 National Insurance number (in the content of the cont	f you have one) House No./Name Street	day month year								

13 Address to which you would	House No./Name			
like correspondence to be sent if different from the address	Street			
given at 12.	Town			
	County			
	Postcode			
		40 1 111		_
(Please inform us immediately if your a may be lost when we return it to you. V new address. This will help ensure you service.)	le would also recomme	nd that you apply to the F	Post Office to have your mail redire	ected to your
If you have sent your passport wireceived a decision on your application		t is not advisable to m	ake travel arrangements until	you have
14 Your daytime telephone number				
15 How many dependants (children	and/or spouse, parti	ner or civil partner) are	e living with you in the UK:	
Aged 16 or under?	Aged 17 or above?			
16 Are you undertaking a course of s	study at an education	nal establishment in th	ne UK? Yes	No 🗌
	_			
Section 3: Employment detail If you have more than one employed		y this page and con	nplete Section 4 for each en	nployer
17 Name of your UK employer				
18 Type of business				
19 Address of UK employer:	Building No./Name			
	Street			
	Town			
	County			
	Postcode			
20 Your UK employer's telephone numb	er			
21 Contact name for employer				
22 The date you started your job		day	month	year
23 Your job title (the applicant as referre	ed to at section 2)			
24 What are your contracted hours of wo	ork?			a week
25 How much is your hourly rate of pay	pefore deductions?	£		an hour
26 Do you receive any allowances from	your employer?	Yes No	£	a year
27 What type of employment are you un	dertaking? Peri	manent	Temporary (short term)	
28 How long are you planning to stay in	the UK?	s than 3 months	1 to 2 years	
(Please tick one box)	3 to	5 months	More than 2 years	
	6 to	11months	Do not know	

Section 4: Documentary evidence/Check list for applicants

· · · · · · · · · · · · · · · · · · ·	t of your application are listed below. Tick the boxes next to the relevant items to graphs (if applicable) you are sending.						
If you already have a WRS registration card and certificate, please provide: A copy of a letter from your current UK employer which confirms the start date of your employment. This is not legally required if your application is a renewal, but will help us process your application.							
If you DO NOT have a registration card and certificate, please provide: Two recent passport-sized photographs of yourself with your name written on the back of each photograph.							
Your current passport or National Identity Card. (Please note: photocopies are not acceptable)							
A copy of a letter from your current UK employer which confirms the start date of your employment (please note that job offers and contracts of employment are not acceptable).							
Section 5: Applicant's declaration							
You must read and sign the declar person acting on their behalf.	ration below. It must be signed by the applicant and not by a representative or other						
I hereby apply to register with the Worker Registration Scheme.							
 I understand that the information in this application will be treated in confidence by the UK Border Agency, but may be disclosed to other government departments, agencies, local authorities and other bodies to enable them to carry out their functions. 							
• I understand that data relating to this application may be shared with the employer named on this application form in respect of this application only.							
 The information I have given on this form is complete and true to the best of my knowledge. 							
I declare that the photographs	submitted with this form are a true likeness of myself.						
Your signature	Date						
Your name (CAPITALS please)							