



CERTIFICATE OF EARNINGS APPLICATION FORM

Name: _____

Date: ____ | ____ | ____
dd mm yyyy

Address: _____

NHI Number: _____ Contact Number: _____ Email: _____

Appointment Date

Purpose of application: {please tick (✓) the appropriate box}.

Naturalization

☐

____ | ____ | ____

☐

BVI Immigration

BVI/UK Registration

☐

____ | ____ | ____

☐

BVI Labour

☐ Other (please specify) _____

List BVI employers for last 3 years

Name of Employer	Date of Employment

Comments Regarding Payment History

Applicant's signature: _____

For Official Use Only:

ID Attached: _____

Date Prepared: _____

Prepared by: _____

Approved by: _____

Compliance Manager

Approved by: _____

Deputy Director