



Work Pass Division

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Personalised Employment Pass Application Form (Form 8)

This form may require you to take 20 minutes to fill in.
You will need the following information to fill it:

- Travel Document Details
- Name and Address of Employing Company
- The employing company's Unique Entity Number* (UEN)
- The employing company's Registration No. (ACRA) <if applicable>
- Job and Salary Details
- Local Contact Person Details (This is for the purpose of contacting you in the event of an emergency.)
 - Name
 - NRIC No.
 - Date of Birth
 - Address
 - Contact Details
- Dependant's Pass Holders Details, if any
- Long-Term Visit Pass Holders Details, if any

* This is a standard identification number issued to each organisation in Singapore, to facilitate their interaction with various government agencies. For more information on UEN and UEN issuance agencies, please refer to www.uen.gov.sg

Note:

- An administrative fee of \$20 will be charged for every PEP application submitted.
The modes of payment for application submitted via :
 - PEP Online : Visa / MasterCard / eNETS Debit / FlexiPay
 - SingPost post offices (MOM-appointed collecting agent) : Cash / NETS / Cashcard

There shall be no refund of fees paid for the application of PEP, unless the fee was not due from you. Any such request for refund shall be at the discretion of the Controller of Work Passes.

- MOM updates its forms regularly. Copies that have been downloaded more than 30 days ago may be outdated, and may not be used. To ensure that you use the latest version, please download the latest copy at <http://www.mom.gov.sg>
- Please be informed that applicants must satisfy certain criteria before the application may be considered. Please refer to MOM website for the list of criteria before you submit your PEP application.



FORM 8
APPLICATION FOR PERSONALISED EMPLOYMENT PASS (PEP)

INSTRUCTIONS:

1. For *, please tick (✓) where appropriate.
2. Indicate "Not applicable" or "N.A." when necessary. Do not leave any blank.
3. Please note that the processing time will take about 5 weeks.
You may check your application status online at <http://www.mom.gov.sg>>Services & Forms>Employment Pass>Application Status Check.

For official use only:		
Date of application:	Officer ID:	Remarks:

PART 1A – PARTICULARS OF PEP APPLICANT

Please provide the FIN if the applicant had ever

- i. applied for or worked in Singapore on an Employment Pass
- ii. studied in Singapore on a Student's Pass
- iii. stayed in Singapore on a Dependant's Pass/Long-Term Visit Pass

Foreign Identification No. (FIN):

Name of PEP Applicant:

 (as shown on Travel Document)

Residential Address in Singapore
 Is the foreigner staying in Singapore?

- No. You do not need to provide any more details
 Yes. Please fill in the address below:

Postal Code: Block/House No: Floor No: Unit No:

Street Name: _____
 Building Name: _____

Type of Travel Document Held:
 (e.g. International Passport, Certificate/Document of Identity etc)
 Travel Document No:
 Travel Document Issue Date: - - Expiry Date: - -
 (DD-MM-YYYY) (DD-MM-YYYY)
 Country of Issue:
 Place of Issue:

Contact No: (HP)
 (at least one of the contact numbers has to be filled) (Office)
 (Home)

Email Address: _____

PART 1B: ADDITIONAL PERSONAL INFORMATION

(Please complete this part if you have never been issued a Work Pass in Singapore.)

Sex:* Female MaleMarital Status:* Divorced Married Separated Single WidowedDate of Birth: (DD-MM-YYYY) - - Nationality:

For Malaysian only:

Malaysian Old Identity Card Number: Malaysian New Identity Card Number: Malaysian Identity Card Colour:* Blue PinkCountry of Birth: State/Province of Birth: Country of Origin:
(country where the person obtained his first citizenship by birth or parentage)
 State of Origin: Race:* Caucasian Chinese Indian Malay OthersReligion:* Buddhist Christian Free Thinker Hindu Muslim
 Others Sikh Taoist**Education Details**

(Please fill in your highest qualification.)

Awarding Body /Institution/ University awarded the qualification

Country:

State/Province:

Name:

Main Campus or Affiliating College Attended:
(Applicable only for India qualification)

Qualifications: (e.g. for Honours Degree, state class/division; Diploma)

Faculty: (e.g. Engineering)

Specialisation: (e.g. Civil engineering)

Mode of Study:* Distance Learning Full-Time Part-TimePeriod of Study: (DD-MM-YYYY) From - - To - -

PART 2A – EMPLOYMENT DETAILS OF PEP APPLICANT

(Please complete this part with details of your employment in Singapore which you will be undertaking upon issuance of your PEP. You may leave Part 2A blank if you have not yet found employment in Singapore.)

Occupation: _____

(Please refer to the List of Standard Occupation before you fill in the above field. If the occupation you indicate cannot be found in the list, a close match will be assigned by WPD. For any subsequent amendments to this assigned occupation, you will have to withdraw the existing application and submit a new application. An administrative fee of \$20 will be charged upon submission.)

*As specified in Employment Contract*Basic Monthly Salary: **S\$** Fixed Monthly Salary: **S\$** **Gross Annual Salary:** **S\$**

(Please refer to the MOM website: <http://www.mom.gov.sg> for more information on basic and fixed monthly salary.)

Job Description: (Details to be given)

Name of Employing Company/Society/Organization: (as shown on the respective registration certificates)

Correspondence Address

Postal Code:

Block/House No:

Floor No:

Unit No:

Street Name: _____

Building Name: _____

Unique Entity Number (UEN):

Tel No.:

Registration No. (ACRA):

Fax No.:

Company's Email Address: _____

PART 2B – LAST EMPLOYMENT DETAILS

(Please complete this part if you are **not** an existing Work Pass holder in Singapore.)

MOM may subsequently request for supporting documents to verify the information declared below.

Occupation: _____

*As specified in Employment Contract*Basic Monthly Salary: **S\$** Fixed Monthly Salary: **S\$** **Gross Annual Salary:** **S\$**

(Please refer to the MOM website: <http://www.mom.gov.sg> for more information on basic and fixed monthly salary.)

Job Description: (Details to be given)

Name of Employing Company:

Country of Employment:

Period of Employment:
(DD-MM-YYYY)

From

-

-

To

-

-

Please note that if your Dependant(s) has/have never been issued with a Dependant's Pass/ Long Term Visit Pass, you will need to fill up Form 12 (Dependant's Pass Application) or Form 14 (Long Term Visit Pass Application) for them. (Please refer to the MOM website: <http://www.mom.gov.sg> for more information on Dependant's Pass and Long Term Visit Pass.)

PART 5 – PARTICULARS OF EXISTING DEPENDANT'S PASS HOLDER ACCOMPANYING PEP APPLICANT

(Please indicate the number of existing Dependant's Pass holder(s) accompanying PEP applicant e.g. (1), (2) etc in the box below. If you have more than 4 existing Dependant's Pass holders, please complete and attach **ONLY** Part 5 of another PEP form.)

Dependant's Pass Holder(s)

(1) PARTICULARS OF EXISTING DEPENDANT'S PASS HOLDER ACCOMPANYING PEP APPLICANT

Foreign Identification No. (FIN):

Relationship to PEP applicant: _____
(e.g. spouse , child < 21 years old, adopted child < 21 years old)

Name:
(as shown on Disembarkation/ Embarkation Card)

Type of Travel Document Held:
(e.g. International Passport, Certificate/Document of Identity etc)
Travel Document No:

Travel Document Issue Date: (DD-MM-YYYY) - - Expiry Date: (DD-MM-YYYY) - -

Country of Issue:

Place of Issue:

(2) PARTICULARS OF EXISTING DEPENDANT'S PASS HOLDER ACCOMPANYING PEP APPLICANT

Foreign Identification No. (FIN):

Relationship to PEP applicant: _____
(e.g. spouse , child < 21 years old, adopted child < 21 years old)

Name:
(as shown on Disembarkation/ Embarkation Card)

Type of Travel Document Held:
(e.g. International Passport, Certificate/Document of Identity etc)
Travel Document No:

Travel Document Issue Date: (DD-MM-YYYY) - - Expiry Date: (DD-MM-YYYY) - -

Country of Issue:

Place of Issue:

(3) PARTICULARS OF EXISTING DEPENDANT'S PASS HOLDER ACCOMPANYING PEP APPLICANT

Foreign Identification No. (FIN):

Relationship to PEP applicant: _____
(e.g. spouse , child < 21 years old, adopted child < 21 years old)

Name:
(as shown on Disembarkation / Embarkation Card)

Type of Travel Document Held:
(e.g. International Passport, Certificate/Document of Identity etc)

Travel Document No:

Travel Document Issue Date: (DD-MM-YYYY) - - Expiry Date: (DD-MM-YYYY) - -

Country of Issue:

Place of Issue:

(4) PARTICULARS OF EXISTING DEPENDANT'S PASS HOLDER ACCOMPANYING PEP APPLICANT

Foreign Identification No. (FIN):

Relationship to PEP applicant: _____
(e.g. spouse , child < 21 years old, adopted child < 21 years old)

Name:
(as shown on Disembarkation / Embarkation Card)

Type of Travel Document Held:
(e.g. International Passport, Certificate/Document of Identity etc)

Travel Document No:

Travel Document Issue Date: (DD-MM-YYYY) - - Expiry Date: (DD-MM-YYYY) - -

Country of Issue:

Place of Issue:

PART 6 – PARTICULARS OF EXISTING LONG TERM VISIT PASS HOLDER ACCOMPANYING PEP APPLICANT

(Please indicate the number of existing Long Term Visit Pass holder(s) accompanying PEP applicant e.g. (1), (2) etc in the box below. If you have more than 3 existing Long Term Visit Pass holders, please complete and attach **ONLY** Part 6 of another PEP form.)

Long Term Visit Pass Holder(s)

(1) PARTICULARS OF EXISTING LONG TERM VISIT PASS HOLDER ACCOMPANYING PEP APPLICANT

Foreign Identification No. (FIN):

Relationship to PEP applicant: _____
(e.g. Common-law spouse , Unmarried daughter > 21 years old, Handicapped child > 21years old, Step child, Parent/Parent-in-law)

Name:

(as shown on Disembarkation/ Embarkation Card)

Type of Travel Document Held:

(e.g. International Passport, Certificate/Document of Identity etc)

Travel Document No:

Travel Document Issue Date: (DD-MM-YYYY) - - Expiry Date: (DD-MM-YYYY) - -

Country of Issue:

Place of Issue:

(2) PARTICULARS OF EXISTING LONG TERM VISIT PASS HOLDER ACCOMPANYING PEP APPLICANT

Foreign Identification No. (FIN):

Relationship to PEP applicant: _____
(e.g. Common-law spouse , Unmarried daughter > 21 years old, Handicapped child > 21years old, Step child, Parent/Parent-in-law)

Name:

(as shown on Disembarkation/ Embarkation Card)

Type of Travel Document Held:

(e.g. International Passport, Certificate/Document of Identity etc)

Travel Document No:

Travel Document Issue Date: (DD-MM-YYYY) - - Expiry Date: (DD-MM-YYYY) - -

Country of Issue:

Place of Issue:

