 Value Through Performance	PREVENT AND PROTECT W.L.L.	Doc. No.:	HRD-F006
	HUMAN RESOURCE DEPARTMENT	Revision:	2
	CERTIFICATE APPLICATION FORM	Date:	13-08-2023

NAME		EMP. NO.	
DEPARTMENT		DESIGNATION	
JOINING DATE			


REQUIRED CERTIFICATE DETAILS			
NOC Purpose		Employment / Salary Certificate Purpose	
<input type="checkbox"/>	Transfer of Sponsorship	<input type="checkbox"/>	Bank Account Opening
<input type="checkbox"/>	QDC License	<input type="checkbox"/>	Loan Application
<input type="checkbox"/>	Family Resident Permit (RP)/Visit Visa	<input type="checkbox"/>	Credit Card Application
<input type="checkbox"/>	Marriage Application	<input type="checkbox"/>	Visa Application
<input type="checkbox"/>	Others, specify _____	<input type="checkbox"/>	Others, specify _____
For Family RP/Visit Visa		Addressee	
Name & Passport Number:		Bank, specify _____	
1. _____		Embassy, specify _____	
2. _____		Organization, specify _____	
3. _____		To Whom It May Concern	

UNDERTAKINGS
<p>When applying for Visit Visa/Resident Permit:</p> <p><i>I, the undersigned, undertake to bear all costs relating to the visa application and take full responsibility of the process of my family and shall provide a copy of the return flights of any visiting guests under my sponsorship. Furthermore, I affirm that the company is not liable for any circumstances arising from my travel outside the State of Qatar.</i></p>
<p>When applying for credit card/ bank loan:</p> <p><i>I, the undersigned, fully understood that PRETECT W.L.L is not liable, should the bank execute a travel ban for me with the Qatar Immigration Department, and/or enforce any other contractual or legal right, remedy or sanction against me as a result of my failure to pay or settle any loan, duties or charges I owe to the bank under or in-connection with the above-mentioned credit card/loan application or other credit facilities at any time during or at the end of my employment with PRETECT W.L.L</i></p>

Employee Signature over Printed Name	Date

REVIEWED BY			
Line Manager			
	Name	Signature	Date
HR DEPARTMENT			
	Name	Signature	Date

APPROVED BY	
GENERAL MANAGER	DAVID WALLACE
SIGNATURE	
DATE:	

	PREVENT AND PROTECT W.L.L.	<i>Doc. No.:</i>	<i>HRD-F006</i>
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