**FORM-LB1 Application for Employment Registration of Foreign Workers**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Republic of the Union of Myanmar**  **Ministry of Labor**  **Department of Labor**  **Employment Registration of Foreign Workers in Myanmar** | | | | | | | | | |
| Name: (Underline Family Name) | | | | | | | Sxe:  M   F | | Photo |
| Date and Place of Birth | | | | Marital Status: | | | | |
| Nationality | | Passport No. | | | | | | |
| Date and Place of Issue of Passport | | | | | Valid up to: | | | |
| Date and Mode of Entry into Myanmar (check box ✔)  By Air  Flt No: By Sea  Vessel: By Land  Place:   Date: Date: Date: | | | | | | | | | |
| No. and Date of Stay Permit | | | | | | | | Valid up to: | |
| Occupation: | Salary: | | | | | Educational Attainment: | | | |
| Full Name and Address of Employing Enterprise:  Tel: | | | | | | | | | |
| Address of Place of Work:  Tel: | | | Duration of Contract of Employment: | | | | | | |
| From : To: | | | | | | |
| Address of Residence of Foreign Worker:  Tel: | | | Address in Home Country of Foreign Worker:  Tel: | | | | | | |
| Address of Next of Kin of Foreign Worker: | | | Accompanying Family members (if any) | | | | | | |
| Date Signature | | | | | | | | | |
| For Official Use | | | | | | | | | |