



DEPARTMENT OF  
**ANIMAL  
BIOSCIENCES**



## INFORMATION REQUIRED FOR INTERNATIONAL VISITORS REQUIRING A WORK PERMIT

Family Name/Surname: \_\_\_\_\_

Given Name(s): \_\_\_\_\_

Gender: Male  Female  Other

Date of Birth: \_\_\_\_\_  
(yyyy-mm-dd)

Country of Birth: \_\_\_\_\_

Country of Residence: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Passport Number: \_\_\_\_\_

Description of Job/Purpose/Reason for Visit:

Expected Start Date: \_\_\_\_\_ Expected End Date: \_\_\_\_\_

Main Duties of the Job:

Minimum Education Requirements: \_\_\_\_\_

Other Training Required: \_\_\_\_\_

Experience and Skills Required:

U of G Coding for the Compliance Fee (\$230/application): \_\_\_\_\_

### AUTHORIZATION

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_