APPLICATION FOR EXEMPTION ON THE BAN ON DIRECT HIRING (Skilled & Professional Workers)	
Employer's Details	
COMPANY NAME	
Name and Position of the Legal	4
Representative	: 4
Company Office Address	:
Contact Number and Email Addres	s:
Website/ Social Media Page	\$
Details of the Authorized Representative (in-charge of the application)	
Name of the Authorized	
Representative	3
Position in the Company	:
If the authorized representative is a	,
third party agent, indicate the	,
name of the company	:
Is the authorized representative	*
connected to an Employment	
Agency in Hong Kong and the	
Philippines? If yes, state the name	10
of the agency.	3
Details of the Filipino Worker	
Name of the Worker	:
	×
Position	:
Contact Number in the Philippines	:
Total Number of Existing Filipino	
Workers	j:
I/WE HEREBY DECLARE that all the information provided in this form is complete, true and correct.	
	Authorized Representative
Employer's Signature Over	Signature Over Printed Name &
Printed Name & Company Chop	Company Chop
Thinted Haine & Company Chop	Company Onop
Date:	Date: