

Application for joining the Emiratization Partners Club

File No .:

Establishment Information				
stablishment Name:		Tel No:		
Establishment No:		Establishment Category	Ema	ail:
Conditions				
1. The Establishment is committed to pay salaries via WPS				
2.The Establishment has expired cards/work permits over 60 days				
3.The establishment has a work stoppages (strikes)				
4.The establishment has a Human Resources Management				
5. The establishment has a plan: for the annual development and training program				
Applicant Information				
Jame:		JobTitle:		
Tel:	Email:			
I acknowledge that the information contained in this document is true and accurate				
Date:		Applicant Signature:		
For Internal Usage				
Number of Manpower : National Manpower % :		After checking the records, we recommend that the establishment shall be in the category		
Checked by: Signature:		Silver Golden Platinum		
Notes/Exceptions:				
Director of Coordination Approvals Assistant Undersecretary for and Partnerships Department the Recruitment of National				
Name :		Name :		
Signature:		Signature:		
Undersecretary for Emiratization		Minister of Human Resources and Emiratization		
Name :		Name :		
Signature:		Signature:		
Issue Date 2017/6/08 Ve	ersion 01		Doc No: mo	ohre-OP-37-1