



Population Management & Guernsey Border Agency Consent form for employees

Employer Details	
Company Name:	
Business Address:	
Authorised Person(s):	

Employee Details								
Last Name:								
First Name(s):								
Date of Birth:								
	(Day)		(Month)			(Year)		
Address:								

I confirm that Population Management and/or the Guernsey Border Agency (Immigration) can discuss with the above Authorised Person(s) details and information required to determine my residential status/application under the Population Management (Guernsey) Law, 2016 and/or my immigration application/status under the Immigration Act, 1971, as extended to the Bailiwick of Guernsey (if applicable).

Signed: _____ Date: _____

You can withdraw consent at any time by emailing population@gov.gg or immigration@qba.gov.gg.