



CHECKLIST FOR VERIFICATION
(On-Site Registration of Workers – Change of Employer)

<input type="checkbox"/> New Signed Contract Signed by Employer/Authorized Signatory on all pages
<input type="checkbox"/> Affidavit of Worker Detailing circumstances why they left old employer, and how they found new employer
<input type="checkbox"/> Undertaking Template found on www.polorome.com/requirements
<input type="checkbox"/> Valid Work/Residence Permit
<input type="checkbox"/> Latest Payslips and NI/INPS payments At least 3 months prior
<input type="checkbox"/> Photocopy of Worker's Passport
<input type="checkbox"/> Photocopy of ID of Employer or Authorized Signatory with Signature If not available, contracts must be legalized or the signatures of the employer notarized by local authorities
<i>Additional requirements if Employer is not previously accredited:</i>
<input type="checkbox"/> Employer's Business Registration/Employer's Information Sheet

EMPLOYER:	
WORKER:	
<input type="checkbox"/> Payment	OR NO. : _____
<input type="checkbox"/> Interview	Date : _____
<input type="checkbox"/> Ocular Inspection	Date : _____

REMARKS

Date Verified: _____