

Declaration Form ON Claiming of Recruitment Charges Under Section 51A (1) of the Amended SLBFE Act No.56 of 2009

License No..... Name of the Agency:.....

Job Order No: of Mission : Country :

Job Categories :

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Item	Amount	Source of payment (Pl.v relevant cage)			Remarks
		Employee	Foreign Agent	Local Agent	
Visa					
Ticket					
Medical					
SLBFE Levy					
Contract Fee					
Translation Fee					
Police Clearance					
Courier Service					
Communication					
Trade Test					
Training cost					
Others – (Specify)					
.....					
.....					
.....					
Total amount					

Note : If above are different by job category of the job order, please submit separate of F2 forms for each Job category

Total Recruitment charges claimed per person = Rs.

I declare that above statement is true and correct.

Date : Signature and seal of the License

.....Approved amount of charges by the SLBFE = Rs.

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SLBFE Job Order No.

Signature and seal of the Authorized Officer