Приложение № 2

к приказу МВД России

от 30.07.2020 № 533

**ФОРМА1**

ЗАЯВЛЕНИЕ

о продлении срока действия разрешения на работу иностранному гражданину или лицу без гражданства

(наименование территориального органа МВД России на региональном уровне)

Место для фотографии

(30 мм х 40 мм)

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| Прошу выдать разрешение на работу | | | | | | | | | | | | | | | | | | | | | | |
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| На срок2: с |  |  |  |  |  |  |  |  |  |  | по |  |  |  |  |  |  |  |  |  |  |  |
| (число) (месяц) (год) | | | | | | | | | | | (число) (месяц) (год) | | | | | | | | | | |  |

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| Фамилия: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Имя: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Отчество: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

(при их наличии)

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| Сведения об изменении Ф.И.О.: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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(с указанием причины и даты изменения)

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| Гражданство (подданство): |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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(или государство постоянного (преимущественного) проживания)

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| Место рождения: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

(государство, населенный пункт)

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| Дата рождения: |  |  |  |  |  |  |  |  |  |  | Пол: |  | М |  | Ж |
| (число) (месяц) (год) | | | | | | | | | | |  |  |  |  |  |

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| Документ, удостоверяющий личность: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

(наименование)

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| серия |  |  |  |  |  |  |  | № |  |  |  |  |  |  |  |  | Дата выдачи: |  |  |  |  |  |  |  |  |  |  |
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1 Пункт 19 статьи 135 и пункт 6 статьи 18 Федерального закона от 25 июля 2002 г. № 115-ФЗ «О правовом положении иностранных граждан в Российской Федерации» (Собрание законодательства Российской Федерации, 2002, № 30, ст. 3032; 2018, №53, ст. 8454).

2 Заполняется по инициативе заявителя.

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| кем выдан: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Контактный телефон: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Профессия (специальность, должность, вид трудовой деятельности) иностранного гражданина или лица без гражданства

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| по трудовому договору: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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Сведения о ранее выданном разрешении на работу:

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| Разрешение на работу выдано: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

(наименование органа, выдавшего разрешение на работу)

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| Срок действия: | с |  |  |  |  |  |  |  |  |  |  | по |  |  |  |  |  |  |  |  |  |  |
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| Разрешение на работу: серия |  |  |  |  |  |  | № |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Бланк разрешения на работу: серия |  |  |  |  |  |  | № |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Сведения о работодателе, заказчике работ (услуг)

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| Полное наименование работодателя, заказчика работ (услуг): |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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(полное наименование юридического лица / филиала или представительства иностранного юридического лица / фамилия, имя, отчество (при наличии) индивидуального предпринимателя / адвоката, учредившего адвокатский кабинет / частного нотариуса / физического лица – гражданина Российской Федерации)

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| Место нахождения работодателя заказчика работ (услуг): |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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(для физического лица — адрес регистрации по месту жительства)

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| Дополнительные сведения о работодателе, заказчике работ (услуг): |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

(для юридических лиц – номер свидетельства о государственной регистрации юридического лица,

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для филиалов или представительств иностранных юридических лиц номер документа, подтверждающего факт аккредитации филиала или представительства иностранного юридического лица,

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для индивидуальных предпринимателей –номер свидетельства о государственной регистрации физического лица в качестве индивидуального предпринимателя,

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для частных нотариусов – номер лицензии на право нотариальной деятельности, для физического лица – наименование документа, удостоверяющего личность, его серия и номер, кем и когда выдан)

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| Основной вид экономической деятельности работодателя, заказчика работ (услуг) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

(заполняется в соответствии с Общероссийским классификатором видов экономической деятельности (ОКВЭД)

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(не заполняется в случае трудовой деятельности у работодателя, заказчика работ (услуг), являющегося физическим лицом – гражданином Российской Федерации)

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| Контактный телефон: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Документ, подтверждающий |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| факт аккредитации  филиала, представительства: | № |  |  |  |  |  |  |  |  |  |  |  |  |  |  | от |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | (число) (месяц) (год) | | | | | | | | | | |

(заполняется в случае осуществления трудовой деятельности в филиале, представительстве иностранной коммерческой организации)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Выдан: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | (наименование уполномоченного органа) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| Действителен до: |  |  |  |  |  |  |  |  |  |  |
| (число) (месяц) (год) | | | | | | | | | | |

Сведения об иностранной коммерческой организации

(заполняется в случае, если иностранный гражданин или лицо без гражданства направлено

для осуществления трудовой деятельности в филиал, представительство или дочернюю организацию иностранной коммерческой организации)

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| Полное наименование иностранной коммерческой организации: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Государство, в котором зарегистрирована иностранная коммерческая организация: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Код государства, код города, телефон (добавочный номер) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Вид деятельности иностранной коммерческой организации |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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Мне разъяснено, что указание в заявлении неправильных (ложных) сведений может повлечь   
за собой отказ в выдаче разрешения на работу.

Подтверждаю достоверность указанных мною в заявлении сведений.

С обработкой, передачей и хранением персональных данных, необходимых для выдачи разрешения на работу, согласен.

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|  |  |  |
|  |  |  |
| (фамилия, имя, отчество (при их наличии), подпись заявителя) |  | (дата) |

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| Дата приема документов: |  |  |  |  |  |  |  |  |  |  | регистр. №: |  |
| (число) (месяц) (год) | | | | | | | | | | |  |  |

Документы принял:

|  |  |  |
| --- | --- | --- |
|  |  |  |
| (должность, фамилия и инициалы должностного лица,  принявшего документы) |  | (подпись) |

Сведения о выданном разрешении на работу

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Разрешение выдано на срок с |  |  |  |  |  |  |  |  |  |  | по |  |  |  |  |  |  |  |  |  |  |
| (число) (месяц) (год) | | | | | | | | | | | (число) (месяц) (год) | | | | | | | | | | |

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| Разрешение: серия |  |  |  |  |  |  | № |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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|  |  |  |  |  |
| (должность, фамилия и инициалы должностного лица,  принявшего решение о выдаче разрешения на работу) |  | (подпись) |  | (дата) |