

Application

for unemployment benefit for fish factory workers (The FV-skipan)

Instruction

In order to receive unemployment benefit through the fish factory system you have to be out of employment from a fish factory. This means that you:

- Are an employee of a fish factory
- Are out of work due to a temporary halt in production at the factory

First you have to fill out and submit this form, which has to be approved by the Faroese Employment Office, before your right to unemployment benefit is established. At the same time the employer must confirm your contractual connection to the factory, before the application is submitted to the Faroese Employment Office (see page 4 bottom).

In connection with receiving unemployment benefit you are obliged to be available for work. Amongst other things this means that you have to accept any work that the Faroese Employment Office directs you to do and that you have the required skills for.

Those who have another A-income in addition to the income which is earned at the fish factory, must report the work hours and the income on the back of the FV-card. The employer has to confirm this information.

Along with this application you must supply the FV-skipan with an easily readable copy of your work permit. The application will not be processed until this documentation is supplied.

Please fill out this application carefully. If information is missing the Faroese Employment Office gives you a 14 day period from the date the Faroese Employment Office has received the application, to supply the relevant documentation. If you supply wrong or misleading information, the amount which has been wrongfully payed will be demanded returned.

Please fill out this application with capital letters and post it to The Faroese Employment Office. Our address is:

**Arbeiðsloysisskipanin
 Postsmoga 3022
 110 Tórshavn**

1 Name and address

Birthday and Personal code no.:		Telephone no.:
		/
Name.:		Nationality:
Address:		
Postbox:	Postal code:	City:

2 Name of the fish factory

3 Since when have you been in permanent employment at the fish factory?

Date:

4 Full time

Are you a full time employee of the factory? YES NO If no, how many working hours a week?

5 Are you at the moment entitled to, or have you applied for any of the following?

Maternity benefit	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Education benefit	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Sick leave benefit	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Payment for taking care of the disabled at home	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Pre-retirement benefit	Highest <input type="checkbox"/> Middle <input type="checkbox"/> Lowest <input type="checkbox"/>				
Other benefits/pensions/retirement benefits?	YES <input type="checkbox"/>			NO <input type="checkbox"/>	
If yes, which and from whom ? _____					

6 Work Experience (the last 10 years if possible)

Employer:	Period (from - to) month/year month/year	Work Description:
	/ - /	
	/ - /	
	/ - /	

7 Job Interests

What kind of job would you prefer?	Please remember that you are obliged to accept any work that you are have the required skills to do. See instructions on the front page.
•	
•	
•	

8 Courses

Course Title	Organiser	Finished year/month
		/
		/
Do you have the Basic Safety Training course? YES <input type="checkbox"/> NO <input type="checkbox"/> When was the course completed? _____		

9 Driving License

Do you have a driving license? YES <input type="checkbox"/> NO <input type="checkbox"/>		If yes, please cross
<input type="checkbox"/> A1 Motorbike	<input type="checkbox"/> C Large vehicle	<input type="checkbox"/> E Trailer
<input type="checkbox"/> A2 Motorbike w/ sidecar	<input type="checkbox"/> CE Large vehicle w/ trailer	<input type="checkbox"/> Crane driver
<input type="checkbox"/> B Light vehicle	<input type="checkbox"/> D Bus	<input type="checkbox"/> Truck driver
<input type="checkbox"/> Bv. Commercial transport w/max. 8 seats	<input type="checkbox"/> DE Bus w/ trailer	<input type="checkbox"/> Other
<input type="checkbox"/> BE Light vehicle w/ large trailer	<input type="checkbox"/> Dv Commercial transport w/ more than 8 seats	_____

10 Self-employment

Are you self-employed? YES <input type="checkbox"/> NO <input type="checkbox"/>	Possible registration no.:
Have you been self-employed? YES <input type="checkbox"/> NO <input type="checkbox"/>	Possible registration no.:
Have you got an unemployment insurance as self-employed? YES <input type="checkbox"/> NO <input type="checkbox"/>	

11 Other employers

Are you employed by other employers in addition to the fish factory? YES <input type="checkbox"/> NO <input type="checkbox"/>
If yes, by whom and for how many hours a week?
Employers name: Registration no.: Hours per week:
Employers name Registration no.: Hours per week:

12 Fee to trade union

Do you want the Faroese Employment Office on your behalf to forward the trade union fee (percentage) of your unemployment benefit to your union?
YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, which union: _____ Members number: _____

The Trade Unions have stated, that a person, who does not have his trade union fee deducted from his unemployment benefit, is in danger of losing his membership rights, i.e. rights to life insurance. The Trade Unions can provide further information about this.

13 Where do you want the unemployment benefit transferred?

Bank name: Account number:

14 Did you remember?

To enclose a copy of your work permit? YES <input type="checkbox"/> NO <input type="checkbox"/>

15 Comments

16 Declaration of consent and signature

The information given on the application can be examined by the supervising authority according to § 27 in Løgtingslóg no. 113 of 13th June 1997 concerning unemployment insurance and employment service. I, the applicant, give the Faroese Employment Office permission to obtain all necessary information concerning my circumstances, including information from the tax authority, and I pledge to notify the Faroese Employment Office of any changes in my circumstances that are relevant to the questions mentioned above, and of any other circumstances that might be of importance to the Faroese Employment Office. **I also give ALS/the FV-skipanin permission to obtain information from the police/The Danish Immigration Service concerning my work- and residence permit in the Faroe Islands.**

I solemnly confirm that I have read the instructions on page 1 and that the supplied information is true.	
_____	_____
Date	Signature

(With reference to Løgtingslóg nr. 113 frá 13. juni 1997 um arbeiðsloysistrygging og arbeiðsávísing)

17 Virkið váttar setunarliga tilknýtið (*The employer confirms your working relationship and that you have a valid work permit*)

Umsøkjari hevur gyldugt arbeiðsloyvi til at arbeiða á virkinum	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Umsøkjari starvast sum (starvslýsing):		
Umsøkjari starvast hjá fiskavirkinum fulla tíð	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Um nei, skal virkið upplýsa, hvussu nógvar tímar um vikuna, umsøkjari starvast á fiskavirkinum:		
_____	_____	_____
Dagfesting	V-tal	Undirskrift og stempul virkissins