



# OISC

## Application for Registration for Level 1 Immigration (limited to the EU Settlement Scheme)

This application for registration is for organisations applying to give immigration advice and services at Level 1(Immigration) in the area of EU Settlement Scheme only

In submitting this application the OISC requires that:

1. The only aspect of immigration advice and services your organisation will provide is in relation to the EU Settlement Scheme (EUSS)
2. Your organisation must be a not for profit/charitable organisation

# Organisation details

Name of organisation

Level 1 Immigration EUSS only  
(please tick)

Is organisation (please tick)

Fee charging

Non fee charging

Main address

  
  
  
  
  
  
  
  
  
  
**Postcode:**

Main Telephone number:

Mobile number:

Fax number:

E-mail address:

Website address:

Please tick the box indicating your organisation type:

**Sole trader**

**Partnership**

Please state below the names of all Partners/Directors and the role they play in the organisation (if any).

**Limited Liability Company**

**Companies House registration number**

Please supply details of all officers of the company.

**Registered Charity**

**Registered Charity Number**

**Other (please specify)**

Please provide details of organisation type and structure

## Organisation details continued...

**Main point of contact** (the person who will be the contact for the application, audit and any additional information) Please print name, position in the organisation and contact details

- How many offices does your organisation have?

If you have more than one office please give contact details for the other offices below. Please continue on a separate sheet if necessary

1. Address	Telephone number: Fax number: E-mail address: Website address: Additional contact number/mobile number:
	Residential <input type="checkbox"/> Commercial <input type="checkbox"/>
2. Address	Telephone number: Fax number: E-mail address: Website address: Additional contact number/mobile number:
	Residential <input type="checkbox"/> Commercial <input type="checkbox"/>
3. Address	Telephone number: Fax number: E-mail address: Website address: Additional contact number/mobile number:
	Residential <input type="checkbox"/> Commercial <input type="checkbox"/>

### Public access

If approved, do you wish details of your organisation to be added to the OISC's adviser finder? (please tick)

Yes

No

# Advisers' details

Please provide details of all persons who will be working as advisers as defined by the Immigration and Asylum Act 1999.

In addition each individual adviser must provide a competence statement as to their knowledge and skills.

<b>Adviser's full name</b>	<b>Date and place of birth</b>	<b>Gender</b>	<b>Job title</b>
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1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

Please attach additional sheets, if necessary

# Declaration by those owning and/or running the organisation

Please complete the following details for those owning and/or running the organisation.

If you are applying as an adviser and you are the owner and/or running the organisation you do not need to complete this next section.

For the OISC's purposes a person is considered an owner of the business if they own at least 40% of the business.

A person is considered to be involved in running an immigration advice organisation if they occupy one or more of these roles: (Private Firms) Self-employed sole trader; Partner; a Company Director (executive or non-executive) Company Treasurer or Secretary or (Charities) Chief Executive Officer or a Trustee.

For further information please see the [Commissioner's Guidance on Fitness \(Owners\)](#)

Owners and those involved in running the organisation must complete the declaration below to confirm that there are no issues regarding their fitness which need to be considered at this time. These might include:

- Unspent criminal conviction in the UK or abroad
- Disciplinary proceedings which have been substantiated against them by any regulatory bodies, professional bodies or government bodies in the UK or abroad
- Bankruptcy , Individual Voluntary Arrangement/Partnership Voluntary Arrangement or subject to a winding up order
- Disqualified or banned from being a director of a company or acting as a Trustee
- Involvement in any conduct which may call into question your honesty, integrity for the law

If any of the points above are relevant, the owner must declare them now and provide further details along with this application.

<b>Owner/Manager</b>	
Name:	
Position:	
Confirmation:	Please tick the box opposite to indicate that there are no fitness issues to declare <input type="checkbox"/>
<b>Owner/Manager</b>	
Name:	
Position:	
Confirmation:	Please tick the box opposite to indicate that there are no fitness issues to declare <input type="checkbox"/>
<b>Owner/Manager</b>	
Name:	
Position:	
Confirmation:	Please tick the box opposite to indicate that there are no fitness issues to declare <input type="checkbox"/>

## Charitable Organisations

In the case of charities, the Chief Executive or Chair should list all trustees in the box below.

Currently listed Trustees	
Name	
Name	
Name	
Name	
Name	
Name	

The chair should confirm with each of the organisation's trustees that there are no issues regarding their fitness which need to be considered at this time. These might include:

- Unspent criminal conviction in the UK or abroad
- Disciplinary proceedings which have been substantiated against them by any regulatory bodies, professional bodies or government bodies in the UK or abroad
- Bankruptcy , Individual Voluntary Arrangement/Partnership Voluntary Arrangement or subject to a winding up order
- Disqualified or banned from being a director of a company or acting as a Trustee
- Involvement in any conduct which may call into question your honesty, integrity for the law

The Chief Executive or Chair can then sign below on behalf of all the organisation's trustees. If any of the points above are relevant, the trustee must declare them now and provide further details along with this application.

**By ticking this box I declare that the trustees of the organisation have declared to the Commissioner any relevant issues regarding their fitness as set out in this application:**

**Name:**

**Position:**

**Date:**

# Declaration

## Competence

**Code 5**

Code 5 says when giving immigration advice or services, organisations and advisers must act competently

**I have enclosed a Competence Statement for each adviser applying for registration at Level 1 Immigration (limited to EUSS)**

## Client care letter

**Codes 23 - 26**

(Please see application Guidance Notes page 11 and/or Model document)

Codes 23-26 says organisations must provide all prospective clients with a client care letter. Code 26 (a) to (l) details the information that all client care letters must contain.

**I have enclosed a copy of my template client care letter**

**I don't need to provide a client care letter as I provide one off advice only**

## Client closure letter

**Codes 46 & 47**

(Please see application Guidance Notes page 12 and/or Model document)

Code 46 says that advisers on receiving notification of the outcome of a client's case must notify the client in writing confirming that the case has been completed, any implications or restrictions on the client's leave, a list of the original documents returned to the client and a final financial statement (Fee Charging organisations only).

Code 47 says that where a case has not been completed but the client has withdrawn their instructions or the organisation has decided to withdraw from the case, the organisation must provide the client with a written statement explaining the withdrawal, listing any original documents returned to the client and including a final financial statement (Fee Charging organisations only).

**I have enclosed a copy of my client closure letter**

**I don't need to provide a client closure letter as I provide one off advice only**

**By ticking this box I declare that I have read and understood the relevant Codes relating to Competence, Client care and Closure letter. I have included the required documentation with this application. I understand that, if I submit my application and the above information is not supplied or does not comply with the Codes, my application may be delayed and/or refused.**

**Tick Box:**

**Print Name:**

**Date:**

# Declaration

## Running the organisation

## Codes 49 and 51

(Please see application Guidance Notes page 13 and/or Model document)

Code 49 says organisations must have and effectively apply appropriate management structures, governance arrangements, processes and policies to support and maintain a viable and sustainable business.

Code 50 says organisations must detail the individual who has specific overall responsibility for those who give immigration advice or immigration services within their organisation.

Code 51 says advisers must have a business plan for its current year along with a cash flow / funding projection.

**I have enclosed my business plan which includes a cash flow/funding projection; and**

**I have included in my business plan details of the individual who has overall responsibility for those that give immigration advice or services; or**

**The following person has overall responsibility for those that give immigration advice or services:**

## Professional Indemnity Insurance

## Code 52

(Please see application Guidance Notes page 13 and/or Model document)

Code 52 places an obligation on advisers to have adequate professional indemnity insurance cover in respect of any civil liability incurred in relation to their work and advice services.

**I have enclosed a copy of the professional indemnity insurance certificate and schedule with this application**

**I have enclosed a copy of a professional indemnity insurance quotation and understand that I will have to supply a certificate and schedule before my organisation is approved**

**By ticking this box I declare that I have read and understood the relevant Codes relating to running the organisation and professional indemnity insurance and have included the required documentation with this application. I understand that if I submit my application and the above information is not supplied or does not comply with the Codes, my application may be delayed and/or refused.**

**Tick Box:**

**Print Name:**

**Date:**



# Declaration

## Fees and accounts

Codes 58 to 69

(Please see application Guidance Notes page 14 and/or Model document)

Code 58 states organisations that are not required to pay the Commissioner an application fee must not charge clients directly or indirectly a fee for the provision of immigration advice or services.

Codes 59 to 61 state that organisations that charge clients directly or indirectly for immigration advice and/or services must have a written fee scale which is agreed by the Commissioner and produced to the Commissioner on request. Organisations that wish to make changes to its fee scale must await authorisation from the Commissioner before implementing any changes.

Organisations that charge for its immigration advice and/or services must only charge a reasonable fee that directly relates to the work done. It must not charge a fee for work that is unnecessary or unauthorised by the client.

Codes 62 to 69 say organisations must manage and record all client transactions (including issuing a written invoice to clients when it requires payment) and, if they intend taking money in advance, it must be kept in a client account.

You must provide details of how you will record client payments and account transactions

**I am applying as a non-fee charging organisation and will not take any fees.  
I have enclosed a copy of my fee scale with this application.  
I have enclosed details of how I will record client payments and account transactions such as documentary evidence of an opened business bank account or headed letter from my bank confirming the above.**

You must supply evidence of your client account or explain that you will not take client money in advance of work done, for government application fees or for any other disbursement.

**I have enclosed evidence of my client account  
I confirm that I will not be taking client money in advance of work done or for any disbursements.**

**By ticking this box I declare that I have read and understood the relevant Codes relating to fees and accounts and have included the required information and evidence with this application. I understand that, if I submit my application and the required information and evidence is not supplied or does not comply with the Codes, my application may be delayed and/or refused**

**Tick Box:**

**Print Name:**

**Date:**

# Declaration

## Procedure for handling complaints

**Code 79**

(Please see application Guidance Notes page 14 and/or Model document)

Code 79 says that advisers must have a written procedure for handling complaints.

**I have enclosed a copy of my complaints procedure**

**By ticking this box I declare that I have read and understood the relevant Codes relating to complaints and have included the required documentation with this application. I understand that if I submit my application and the above information is not supplied or does not comply with the Codes, my application may be delayed and/or refused.**

**Tick Box:**

**Print Name:**

**Date:**

# Application Checklist

**The documents below must be submitted with your application.**

Please tick

1. Completed application form
2. Application fee (Fee Charging Organisations only)   
Cheque enclosed   
**or** Paid by BACS
3. Copy of DBS Application Post Office receipt for each new adviser **or**   
Existing original DBS certificate

## Supporting evidence checklist

1. New Adviser Application & Competence Statement for each adviser with proof of right to work
2. Client care letter (If applicable)
3. Complaints procedure
4. Business Plan/Structure of organisation
5. Statement showing how financial control is exercised
6. Client Account and Business account details (if applicable)
7. Professional indemnity Insurance quotation or certificate
8. Fee scale (if applicable)
9. Client closure letter (if applicable)

# Declaration

In making this application to be Registered with the OISC at Level 1 Immigration limited to the EU Settlement Scheme only, I agree on behalf of the applying organisation that:

1. All staff have read the Commissioner's Code of Standards and agree to abide by them in full
2. No person will provide immigration advice and services with regards to the EU Settlement Scheme without having undertaken training in this area **and** being registered with the OISC
3. All staff will co-operate with the OISC in any complaint investigation concerning your organisation
4. All staff will co-operate with the OISC in any audit undertaken
5. I will immediately notify the OISC about any registered member of staff that leaves the organisation
6. I understand the OISC may undertake **any** necessary checks to establish our fitness, competence and compliance with the Commissioner's Code of Standards.
7. All applicant advisers have completed a DBS check.

**Signed on behalf of the applicant organisation by an authorised signatory:**

Signature

Print full name

Position in organisation

Date