**Service Charter – International Organizations Desk**

1. **Applications must be submitted to the desk meeting the following conditions:**
	1. Each request has a different minimum number of business days required to process it, included in each format separately.
	2. The applications must **include all information required** **in the format**. Incomplete applications will be processed only after the completion of all required information.
	3. All applications must be submitted as a Doc/Docx (Word) file and according to the desk's formats.
	4. The title of the email will include the organization/company's name and the first ID number in the application, unless it is for more than one person, and in that case, instead of an ID, the number of employees will be provided. Example for email title: X agency, ID 900000001 or X agency, 3 staff.
	5. International organizations' staff permits can be given up to 180 days, between 05:00 and until 22:00. Should an exception be needed, please specify so in the "Requested Hours" section and provide a reasoning.
2. A request with over 10 permits can be picked from Beit El. Fewer than 10 permits will be required to be taken from regional DCLs only. Permits from the same request can be picked in different DCLs. All requests, including those with 10 persons and above, must include a reference to the permit pickup location.
3. Attached are formats for submitting an application.
4. **Should you have any questions, feel free to contact the email above. International organizations may also contact the Civil Administration's Foreign Relations Department.**

**Application Form for a Entrance Permit to Gaza**

**Date of Submission**

**Organization’s Serial Number with the Israeli Ministry of Social Affairs**

|  |
| --- |
| **Name of International Organization/Company** |
|  |
| **Hours** | **Dates** | **Phone Number** | **Destination** | **Job Title** | **ID** | **Full Name** | **#** |
|  |  |  |  |  |  |  |  |
| **Date Entering Gaza** | **Date Exiting Gaza** | **One Entrance/Multiple Entrances** |
|  |  |  |
| **Request Details - Reasons for Entering Gaza** |
|  |
| **Details of Designated Contact Person From the International Organization/Company** |
| **Email** | **Office Number** | **Mobile Number** | **Full Name** |
|  |  |  |  |
| **Permit Gathering Location (10 Permits or More – Beit El. Under 10 Permits – Any Regional DCL)** |
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* **This form is for the use of international organizations.**
* **Applications are to be submitted at least 30 business days prior to the date the permit should be valid.**
* **All requests are to be verified with Gaza CLA Office before arriving to Erez Crossing.**
* **Each request must contain this format, a supporting letter from the sponsoring organization and any additional information that may be relevant to the application.**
* **Request with missing information or documents shall be sent back requesting the missing information.**