



### EXPATRIATES UNIT EMPLOYMENT FOR LESS THAN 6 MONTHS NEW APPLICATION FORM

(This application is not being submitted under the provision of Subsidiary Legislation 217.17 [Single Application Procedure for a Single Permit as regards Residence and Work and a common set of rights for those Third-Country Workers Legally residing in Malta Regulations]. Applicants on this Form must be in possession of an Employment License, issued by Jobsplus)

Identity Document No.		A	
Surname			
Name			
<b>Current Nationality</b>			
Nationality at Birth			
Country of Birth			
Place of Birth			
Marital Status	Single Married	Separated Divorced Widowed	
Gender	Male Female	Unspecified	
Date of Birth			
Travel Document Type	Passport 🗌 Foreign ID	Other (Specify)	
Travel Document No.			
Country of Issue			
Date of Issue		Valid Until	
Date of first settlement in Malta			
Intended Duration of stay in Malta			
Country of Residence prior to Settlement in Malta			
Currently residing in			
Intended Country of Next Settlement			
Address in Malta			
		Post Code	
Telephone No.			
Mobile No.			
Email Address			

## 02 DECLARATION BY THE APPLICANT

I, hereby authorise my employer to register on the Identità (Expatriates Unit) Online Application Portal in order to initiate the application process and submit information on my behalf for the processing of the Employment Resident Permit by Identità. I understand that my employer would have direct visibility and can track the Employment Residence Permit process through the Portal. Such visibility shall constitute access to personal information and records submitted in conjunction to the application process and its requirements as may be deemed necessary.

I further understand that in case my Employment Residence Permit application is successful, a VISA application with the respective competent authorities may be further required. In this regard, I further extend my authorisation to my employer to keep track of my Visa Application process and have visibility as to the status of the said application.

I, hereby, declare that the information given in this application is true to the best of my knowledge and belief, and that no details that could be of direct importance during the application's consideration have been omitted. I also declare that I shall notify Identità of any change of address.

Applicant's Signature	Date
<b>03</b> EMPLOYER'S DETAILS	5
Employer's/Company's Name	
Employer's Address	
	Post Code
Telephone No.	Mobile No
Email Address	
Responsible Official	
Designation of Responsible Official	
VAT Registration No.	
Employer Registration No.	

### **04** EMPLOYMENT DETAILS

Job Title			
Annual Gross Salary	Under €15,000	€15,000 - €30,000	€30,000 +
Expected Period of Employmer	nt From	to	

#### **05** DECLARATION BY THE EMPLOYER

I am hereby endorsing the application for a Residence Permit on the basis of Employment of less than 6 months for

holder of Passport Number

I am also committing myself to provide Identità with any relevant information on changes and events related to the applicant's employment contract.

I also declare, that the employment conditions related to this employment are in line with The Employment and Industrial Relations Act and other applicable laws.

I do hereby affirm and declare that all information and particulars furnished by my end all throughout the application form are true and correct to the best of my knowledge.

Employer's Signature/ Responsible Official Date

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# 06 DECLARATION BY THE APPLICANT FOR AN E-ID ACCOUNT

#### Tick where applicable

- I declare that I wish to proceed with applying for an electronic identity account.
- I declare that I do not wish to proceed with applying for an electronic identity account.

**Applicant's Signature** 

Date

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