



EXPATRIATES UNIT EMPLOYMENT FOR LESS THAN 6 MONTHS STILL ABROAD 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)

01 APPLICANT'S DETAILS

Identity Document No. _____ **A**

Surname _____

Name _____

Current Nationality _____

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 _____

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

03 EMPLOYER'S DETAILS

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 Employment 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