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EXPATRIATES UNIT STUDY RENEWAL APPLICATION FORM

(To be filled in by persons who are not nationals of an EU Member State, Iceland, Liechtenstein, Norway or Switzerland). This application is being submitted on the basis of the provisions of Conditions of Entry and Residence of Third-Country Nationals for the Purposes of Research, Studies, Training and Voluntary Service in the Mobility Project for Young People: Voluntary Projects Regulations (Subsidiary Legislation 217.22)

01 APPLICANT'S PERSONAL DETAILS

| Residence Permit No. | | | | | | | | | | | | | | | | Α | | | | | | | | | | | | | | | | | |
|--|---|----|------|-----|---|---|-----|------|------|----|----------|----|-----|------|-----|-----|------|----|-----|------|------|------|-----|-----|----------|-----|----|---|---|----|----|------|-----|
| Date of Issue | D | D | М | М | Y | Y | Y | Y | | | | | | | _ | | alio | łu | nti | il | | | D | D | м | М | Y | Y | Y | Y | | | |
| Surname | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Maiden Surname (If applicable) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Current Nationality | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Nationality at Birth | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Country of Birth | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Place of Birth | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Marital Status | | Si | ngl | е | | | Мо | irri | əd | | | Se | epa | rat | ed | | | | Di | /or | cec | 1 | |] V | Vid | owe | əd | | | Сс | ha | bito | ant |
| Gender | | M | lale |) | Ę | | Fe | ma | le | | | 0 | the | er | | | | | | | | | | | | | | | | | | | |
| Date of Birth | D | D | Μ | Μ | Υ | Υ | Υ | Y | | | | | 1 | 1 | | | | | | | 1 | | | | | 1 | | | | | | | |
| Telephone No. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mobile No. | | | | | | | | | | | | | | | _ | | | | | | | | | | | | | | | | | | |
| Email Address | | | | | | | | | | | | | | | | | | | | | | | | | <u> </u> | | | | | | | | |
| Travel Document Type | | Pa | ssp | ort | | F | ore | eigi | ן ID | 1 | | 0 | the | r (S | Spe | cif | y) | | | | | | | | | | | | | | | | |
| Travel Document No. | | | | | | | | | | | <u> </u> | | | | | | | | | | | | | | | | | | | | | | |
| Country of Issue | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of Issue | D | D | М | М | Y | Υ | Υ | Υ | | | | | | | | | | | V | alic | l Ui | ntil | | | | D | D | Μ | Μ | Υ | Υ | Υ | Υ |
| Period of time that will during each calendar y | | | | | | | | | | pe | erm | it | | | | | | | | | | do | ays | / n | non | ths | ; | | | | | | |

02 ADDRESS IN MALTA

| Property No./Name | | | | | | | | | | | | | | | | | | |
|-------------------|--|--|--|--|--|--|--|--|---|----|-----|----|---|--|--|--|--|--|
| Street Name | | | | | | | | | | | | | | | | | | |
| Locality | | | | | | | | | P | os | t C | od | е | | | | | |

03 PERMANENT ADDRESS ABROAD

| Property No./Name | | | | | | | | | | | | | | | | | | | |
|-------------------|----------|--|--|--|--|--|--|--|--|-----|-----|----|---|--|--|---|--|---|--|
| Street Name | | | | | | | | | | | | | | | | | | | |
| Locality | <u> </u> | | | | | | | | | Pos | t C | od | e | | | _ | | _ | |
| Country | | | | | | | | | | | | | | | | | | | |

04 EDUCATIONAL ESTABLISHMENT DETAILS

| Name of Educational Establishment | |
|--------------------------------------|-----------|
| Contact Person | |
| Property No./Name | |
| Street Name | |
| Locality | Post Code |
| Telephone No. | |
| Mobile No. | |
| Email Address | |
| Institution Licence No. | |
| Course Title | |
| MQF Level | |
| Duration From | |



I, hereby, solemnly declare that the information given in this application is true to the best of my knowledge and belief and that no details have been omitted that could be of direct importance when the application is considered.

| Applicant's Signature | Date | D | D | Μ | М | Υ | Υ | Υ | Y | |
|-----------------------|------|---|---|---|---|---|---|---|---|--|
| | | | | | | | | | | |

06 DECLARATION BY THE LANDLORD

I, hereby, declare that the applicant, whose details are shown above, is residing in the address shown in SECTION 01 of the application form, which is owned or managed by the undersigned. I also declare that I will notify Identità should the applicant cease to continue residing at this address.

| Name of landlord (IN BLOCK LETTERS) | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|------|-----|------|----|-----|-----|----|-----|------------|--|--|--|--|--|--|----|----|----|----|--|--|--|--|--|--|
| ID Card No. | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mobile No. | | | | | | | | | | | | | | | | | | | | | | | | | |
| Number of Persons Res | idir | ngi | in t | hi | s R | esi | de | nce | , [| | | | | | | | | | | | | | | | |
| Address of Landlord | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | Ро | st | Co | de | | | | | | |
| Email Address | | | | | | | | | | | | | | | | | | | | | | | | | |
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Landlord's Signature

SUPPORTING DOCUMENTS

These regulations apply to third-country nationals accepted by an establishment licensed by the Malta Further & Higher Education Authority to pursue a full-time course of study leading to a higher education qualification. The qualification must be recognised by the Malta Qualification Recognition Information Centre at MQF level 5. Courses may also include a preparatory programme which leads to the higher education qualification.

Third-country nationals who are visa exempt must submit their application for a residence permit within 90 days from their date of entry within the European Union territory. Other non-European nationals who need a visa to travel into Schengen Territory must be in possession of a visa issued for education purposes.

Applicants are required to fill in the relevant forms which must include all the requested information and signatures. Once in Malta, applicants need to request an appointment. The original version of all documents submitted with this application must be presented at the time of this appointment.

Documents submitted must be in line with the latest published Policy by Identità, establishing the standards for the recognition of foreign public documents.

DMM

Date

□ Travel and Identity Documents

The applicant must return their previous residence permit. Where the passport presented upon initial application has been changed, a full copy of the applicant's passport including the blank pages, is required. Otherwise, copy of the passport's biometric page.

Course Information

A copy of an acceptance letter from the education institution (which shall be licensed by MFHEA) indicating the exact period of study and the details of the course, particularly its MQF level which shall be a full time course.

The applicant must provide evidence of settlement of the relevant tuition fees. Tuition hours must exceed 15 hours per week. The details must be presented on an official letter head of the establishment and signed by the responsible official. The documentation must include a confirmation from the education institution that the student holds sufficient knowledge of the language of the course being followed.

Proof of successful progression in the course through the presentation of the attendance records and academic achievements awarded to the student so far.

Means of Subsistence

Bank statement or money transfer receipts of the previous 3 months showing adequate funds in Euro to support the applicant's stay in Malta during the whole period of study. The funds must amount to at least 60% of the national equivalised income threshold which is calculated based on the equivalent household size (indicated by NSO), for the year or at a pro-rata basis if the course is shorter. In exceptional circumstances each case will be considered on each own merit.

When relying on a foreign bank account, the applicant must confirm accessibility to the funds through a debit/credit card and corresponding withdrawal chits from a local bank.

An applicant whose stay in Malta is financially supported by a third party must present a signed declaration from the sponsor together with a copy of the sponsor's identity document. The latter has to include the date and the contact details of the sponsor. The bank statement of the applicant must show the funds being deposited to his/her account.

Health Screening

Applicants undertaking courses lasting less than three months are exempt from mandatory health screening procedures. Health Screening Approval email sent to the applicant/employer by IDCU. Requirements for Health Screening may be found on: <u>https://hpdp.gov.mt/idcu/healthscreening/healthscreening_foreign_students.</u>

Health Insurance Plan¹

A copy of a comprehensive health-insurance policy, showing all aspects being covered, which supports the applicant in the eventuality of requiring any type of medical assistance or hospitalisation during the whole period of stay in Malta. Students pursuing a course of study with the University of Malta, the Malta College of Arts, Science & Technology or the Institute of Tourism Studies are exempt from this requirement;

Accomodation

A copy of the lease agreement signed by both landlord and tenant, which must include the full name, ID Card number of landlord, rental address. The name of the tenant must match the name on the passport. If the Landlord is not Maltese, a purchase agreement of the same premises must be presented;

A copy of the approval letter issued by the Housing Authority for the registration of property as a rental as per Cap.
604 of Maltese legislation.

Students using the school accommodation are exempted from presenting a lease agreement. The relevant information must be included in the acceptance letter referred to in Point 2. The information must state that the property is being used by the institution for accommodating its own students.

Students being hosted in a local household must present a copy of the license issued by the Malta Tourism Authority to the host.

¹The health sickness requirement applies to those students who are not exempt under the Healthcare Fees Regulation 2004 (Legal Notice 201/2004).

□ If there is a period from the date of the expiry of the original agreement submitted with the previous residence permit application, which is not covered by the said lease/rent agreement, the contract bridging such gap should be provided as well as the new contract going forward.

Other documents

Identitá may request an applicant to provide further documents, as necessary.

Application fee

An application fee of €27.50 must be paid.

NOTES TO THE APPLICANTS

A residence permit is issued for a maximum period of one year, or for the duration of their studies, where this is shorter unless the application is pertaining to courses which are covered by Union or multilateral programmes that comprise mobility measures or by an agreement between two or more higher education institutions, in which case the residence permit shall be valid for two years, or for the duration of their studies, where this is shorter.

Students holding a residence permit may take up employment for a maximum period of 15 hours per week, as long as they are in possession of an employment licence.

Further information in this respect may be obtained from Jobsplus website: www.jobsplus.gov.mt.

IDENTITÀ Triq il-Wied, L-Imsida, MSD 9020, MALTA T +356 2590 4000 W www.identita.gov.mt E enquiries.identita@gov.mt EXPATRIATES UNIT Triq il-Wied, L-Imsida, MSD 9020, MALTA T (+356) 2590 4800 W www.identita.gov.mt E noneu.identita@gov.mt