IDENTITY MALTA

CEA FORM C1

EXPATRIATES UNIT

EMPLOYMENT RENEWAL FORM

(EXCLUDING RECRUITING/TEMPING AGENTS)

PART I - APPLICANT'S DETAILS

Identity Document No.: A

Surname:

Name:

Nationality:

Marital Status: ☐ Single ☐ Married ☐ Separated ☐ Divorced ☐ Widowed

Passport No: Passport Expiry: D D M M Y Y Y Y

Address in Malta:

Post Code:

Telephone: Mobile:

Email:

PART II - DECLARATION BY THE APPLICANT

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 Identity Malta Agency of any change of address.

Signature of Applicant

Date: D D M M Y Y Y Y

PART III - EMPLOYER'S DETAILS

Employer/Company Name:

Employer's Address

Post Code:

Telephone: Mobile:

Email:

Responsible Official:

Designation of Responsible Official:

VAT Registration No.

Employment Registration No.

PART IV - DECLARATION BY THE EMPLOYER

I, hereby, confirm that I am endorsing the application for a single permit of the applicant bearing Maltese identification number

A.

In so far as the offer of employment is concerned there have not been any changes to the position description.

The applicant will remain in employment with
for an additional period of ☐ 1 year ☐ 2 years (tick as appropriate) with the same conditions of work indicated in the original application.

I am also committing myself to provide Identity Malta Agency 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.

Date: D D M M Y Y Y Y

Signature of Employer/Responsible Official

PART V - DECLARATION BY THE LANDLORD

I, hereby, declare that the applicant, whose details are shown above, is residing in the address shown in PART I of the application form, which is owned or managed by the undersigned. I also declare that I will notify Identity Malta Agency should the applicant cease to reside at this address.

Name of landlord
(IN BLOCK LETTERS)

ID/RES card no.

Mobile No.

Number of Persons Residing in this Residence

Address of Landlord

Email address

Date: D D M M Y Y Y Y

Signature of Landlord

PART VI - DECLARATION BY 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.

Signature of Applicant

Date D D M M Y Y Y Y

SINGLE PERMIT RENEWAL CHECKLIST

☐ 1. **CEA Form C1 (Non-EU) –** Application for a residence permit on the basis of employment. The form must be endorsed by the employer with an official stamp and signature of the responsible official. Privacy Policy should be read and signed;

☐ 2. A copy of the applicant's passport **bio-page** & a copy of the **valid residence card;**

☐ 3. **Lease agreement or purchase agreement** of property which makes clear reference to the applicant. The said rent/lease agreement/s must cover the previous period between the expiry of the first contract and the expiry date of the Single Permit (if this period had been uncovered by the first contract which was originally furnished when the previous application was submitted) as well as 1 additional year starting from the expiry of the Single Permit.

☐ 4. **Approval Letter** from Housing Authority for the registration of property as a rental as per SL 604.02.

☐ 5. **Health Screening –** Guidance regarding documentation to be submitted in this respect can be accessed through Identity Malta's Website.

For each year of validity of permit, live-in carers have to pay €27.50, whilst other applicants have to pay a fee of €280.50 upon submission of application, Payments are only accepted in cash or by means of cheque payable to Identity Malta Agency.

FOR OFFICE USE

Vetting Date: D D M M Y Y Y Y

Notes:

AFFIX BARCODE
FOR OFFICE USE ONLY

Vetted by:

Paid by: ☐ Cash ☐ Cheque Cheque No.

NOTES TO APPLICANTS & EMPLOYERS

Renewal
Applicants may proceed with their application for a renewal of the permit 90 days prior to the date of its expiry. It is to be emphasised that renewal of applications may only be submitted whilst their current permit is still valid.

If the housing lease/rent agreement provided with the Initial Application was of less than one (1) year, applicants will be expected to provide the interim lease/rent agreements that cover the entire year retrospectively at the renewal phase.

Change in Employer
During the validity period of a work/residence permit applications for a change of employer shall not be accepted unless they are submitted two months prior to the expiry date of the validity of the said permit.'

Change in Address
Residence Card holders who have changed their residential address need to register their new address within one (1) week & present the following documents:

i. Changes to application form;
ii. Copy of the existing Residence Card;
iii. Copy of the new property's purchase or rental agreement; &

Applicants would need to pay an application fee of €27.50.

Failure to do so may entail the revocation of the residence permit.

Lost Residence Card
Within three (3) days of losing one's residence card, applicants would need to (i) provide a valid local Police report, (ii) pay an application fee of €27.50.

Termination
The single permit's validity depends on the conditions laid when the permit was originally issued, including the specific employment undertaken. Consequently, the permit will no longer be valid should the applicant change employment.

In the eventuality of a job termination, the employer must submit a Termination Form to Jobsplus within four (4) days of the termination date (as per Legal Notice 426/12) & inform Identity Malta Agency on **worktermination.ima@gov.mt**

Failure to comply with the above, conditions may render the holder of the permit in violation of the provisions of the Immigration Act (Cap. 217).

PRIVACY POLICY - FORM C1

By submitting the Employment Renewal Form (the "Form") to Identity Malta Agency ("IMA"), you provide IMA with personal data (the "Personal Data") in the capacity of data subject. The aim of this Privacy Policy (the "Policy") is to comply with our transparency obligations under data protection legislation, to inform you about the entity responsible for processing your Personal Data, the purpose and legal basis for processing, for how long your Personal Data will be kept, with whom it will be shared and about your rights as a data subject under GDPR.

1. Data Controller and Data Protection Officer

IMA is the data controller, meaning the entity that defines the purposes and means for collecting and processing Personal Data under this Form. IMA is an Agency of the Government of Malta responsible for public administration services related to identity management. IMA Data Protection Officer ("DPO") is responsible to attend any query related to this Policy and in general to data protection at IMA.
The Data Protection Officer may be contacted by email or by regular post using the details provided below:

Postal Address: Data Protection Officer
Identity Malta Agency
Valley Road, Msida, MSD 9020,
Malta
E-mail: dataprotection@identitymalta.com

2. Purposes and legal basis

The purpose for processing Personal Data by IMA is to receive, assess and process a request for renewal of employment by a third-country national. Personal Data collected in this Form will be used to populate IMA's information system, where the Personal Data will be kept in a highly secure manner.
Processing of Personal Data is necessary for the performance of a task carried out in the exercise of official authority vested in IMA.

3. Recipients

Personal Data will be accessed by IMA employees in charge of processing the Form. In case the need may arise, Personal Data will be also accessed by IMA suppliers in charge of maintaining IMA's information systems. Personal Data will also be shared with the National Statistics Office, JobsPlus and with the Principal Immigration Officer. This will be done in line with data protection legislation, and arrangements are in place in order to guarantee the security and lawfulness of these transfers. If necessary and proportionate for lawful and specific purposes, IMA may disclose Personal Data to other third parties (such as other Government entities or law enforcement authorities). Personal Data will not be transferred to third countries or international organizations.

4. Storage period Data

Personal Data will be retained for twenty years, which start counting from the moment that the Form is considered as dormant.

5. Your Rights

You can contact the DPO in order to exercise your right to access, rectify, restrict and, as the case may be, erase the Personal Data, in compliance with applicable laws. You also have the right to object to the processing of Personal Data at any time, on grounds relating to your particular situation. If you feel that IMA has infringed your data protection rights, you may submit a complaint to the supervisory authority of the Member State of your habitual residence or place of work, or, alternatively, to the supervisory authority of the Member State where the alleged infringement has taken place.

DECLARATION

I hereby declare that I have read and understood all the contents of this form, that is, Parts I - VII, the Checklist, Notes to Applicants and Employers and Privacy Policy.

Signature of Applicant _____

Signature of Employer _____