

Malta Residence & Visa Program Application Form

| 1.1 Surname (current) | 1.2 | 1.2 Surname at birth | | 1.3 F | 1.3 First Name | |
|---|---|----------------------|---|------------------------|--------------------------|------------------------|
| / | | | 1.7 Nationality(ies) (nationality at birth) | |) (nationality at birth) | |
| | vious Nationality | | | | | |
| 1.10 Marital Status | | / /ate of Marriage | | 1.12 Place o | f Marriage | |
| | port (A) Diplomatic ent (1951 Geneva Conventic | | ☐ Service passport (C☐ Seaman passport (I | | lien's passpo | ort (D) |
| 1.14 Passport Number | 1.15 | s Issued by | | / / 16 Date of Issu | | / / |
| | | | | | | |
| SECTION 2 - ADDRE | SS | | | | | |
| | ss | | | | | |
| SECTION 2 - ADDRE RESIDENTIAL ADDRESS | SS | | | | 2.3 Pro | vince/Region |
| SECTION 2 - ADDRE | 2.5 Country | | 2.2 City 2.6 Home Telephone | | | vince/Region me Fax |
| SECTION 2 - ADDRE RESIDENTIAL ADDRESS 2.1 Number/Street/Apt. | 2.5 Country |) Work Fax | | | | me Fax |
| SECTION 2 - ADDRE RESIDENTIAL ADDRESS 2.1 Number/Street/Apt. 2.4 Postal code | 2.5 Country |) Work Fax | | 2.10 | 2.7 Ho | me Fax |
| SECTION 2 - ADDRE RESIDENTIAL ADDRESS 2.1 Number/Street/Apt. 2.4 Postal code 2.8 Work Telephone 2.11 E-mail address | 2.5 Country 2.9 |) Work Fax | 2.6 Home Telephone | 2.10 | 2.7 Ho | me Fax |
| SECTION 2 - ADDRE RESIDENTIAL ADDRESS 2.1 Number/Street/Apt. 2.4 Postal code 2.8 Work Telephone | 2.5 Country 2.9 |) Work Fax | 2.6 Home Telephone | 2.10 | 2.7 Ho Mobile/Cellu | me Fax |

SECTION 3.1 - CLOSE FAMILY MEMBERS / DEPENDENTS (THAT MAY OR MAY NOT ACCOMPANY YOU)

| Relationship to yo | ou | | | |
|--|------------------|------------|------------|------------|
| 3.1.1 Accompanyi | ing \square | Yes □ No I | ☐ Yes ☐ No | ☐ Yes ☐ No |
| 3.1.2 Surname (c | urrent) | | | |
| 3.1.3 Surname at | birth | | | |
| 3.1.4 Father's nar (patronymic | | | | |
| 3.1.5 First Name | | | | |
| 3.1.6 Date of Birt | h | | | / |
| 3.1.7 Place of Birt | | | | |
| 3.1.8 Mother's ma surname an | aiden | | | |
| 3.1.8 Nationality | | | | |
| 3.1.9 Contact nui | | | | |
| 3.1.10 Occupation | ı | | | |
| (prior to arrival i 3.1.11 Education (highest level) | | | | |
| 3.1.12 Passport nu | umber | | | |
| 3.1.13 Passport is | sue date | | | / / |
| 3.1.14 Passport e (D/M/Y) | xpiry date | | / | / |
| 3.1.15 Passport is | ssue place | | | |
| 3.1.16 Crime com | mitted \square | Yes 🗆 No | ☐ Yes ☐ No | ☐ Yes ☐ No |
| 3.1.17 Country of | crime | | | |
| 3.1.18 Nature of c | crime | | | |
| 3.1.19 Punishmer | nt for crime | | | |

IF YOU NEED MORE SPACE, PLEASE USE THE ADDITIONAL PAGE PROVIDED AT THE END OF THE APPLICATION

| SECTION 4 - PAST HIS | STORY | | | |
|--|--|---------------------------------|-------------------------------------|--|
| 4.1 Do you reside in a count If yes, number and validity of | ry other than your country of Citizenship permit/visas. | o? Yes No | | |
| Country | Type of Visa issued | / / Date visa was issue | | |
| 4.2 List evey country you ha | d residency in the last 5 years. List the p | lace of your residence in chroi | nological order, most recent first. | |
| From - To (D/M/Y) | Country / Province | City | Type of visa | |
| / / / / / | | | | |
| / / / / / | | | | |
| 1111 | | | | |
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IF YOU NEED MORE SPACE, PLEASE USE THE ADDITIONAL PAGE PROVIDED AT THE END OF THE APPLICATION

SECTION 4 - PAST HISTORY (CONTINUED)

4.3 Related Questions:

| Have you or any from your close family members/ dependents ever applied for a residence permit in Malta? | ☐ Yes ☐ Accepted Details: | □ No □ Denied | Date (D/M/Y) |
|--|---------------------------|--|----------------|
| Have you or any from your close family members/ dependents ever applied for a permanent residence in Malta? | ☐ Yes ☐ Accepted Details: | □ No □ Denied | Date (D/M/Y) / |
| Have you or any from your close family members/ dependents been expelled from Malta? | Yes | □No | Date (D/M/Y) |
| To the best of your knowledge, do your close family members/ dependents suffer from HIV/ AIDS, hepatitis B, tuberculosis, leprosy, lues, typhoid diseases, which need treatment, or are your close family members/ dependents a carrier of HIV, hepatitis B, typhoid or paratyphoid? | Yes | □No | |
| Have you ever been convicted for a crime? If yes, in which country, what kind of crime have you convicted, and what kind of punishment was imposed? Do you have any debt in your home country or | □ No | ☐ Yes Country: Crime: Punishment: ☐ Yes | |
| any other countries? If you have any debt, in which country, amount, title of debt? | | Country: Value of the debt: Title of debt: | |
| Do you have any maintenance obligations (other than the ones applying for PR with you (parent, child, spouse)? | □ No | Yes | |

| SECTION 5 - CRIMINAL RECORDS AND REFERENCES | | | | | |
|---|---|-----------------------------------|----------------|--|--|
| | y criminal convictions recorded against you? ne date of conviction, the place of conviction, the | ☐ Yes offence and the penalty. | □No | | |
| Date (D/M/Y) | Place (Country, City) | Offence | Penalty | | |
| / / | | | | | |
| / / | | | | | |
| // | | | | | |
| SECTION 6 - EI | DUCATION | | | | |
| 6.1 Name education Start with your most | nal institutions attended and degrees obtained, trecent diploma. | excluding elementary school. | | | |
| From - To (D/M/Y) | Name of institution / Country | Name of diploma | Specialization | | |
| // | / | | | | |
| / / / / . | / | | | | |
| / / / . | / | | | | |
| / / / . | / | | | | |
| SECTION 7 - EN | MPLOYMENT HISTORY | | | | |
| 7.1 List your employment history in the last 5 years. Indicate the company (including your own) and country where it is located. Enter full names. Do not use abbreviations. | | | | | |
| From - To (M/Y) | Name of company | Country | Job title | | |
| / | | | | | |
| / | | | | | |
| / | | | | | |

| SECTION 8 - DECLARATION | | | | | |
|-------------------------|----------------------------------|---|---|----|--|
| Ithat the | | | (full name of applicant) hereby decla knowledge and belief and I certify making no false or misleadi | | |
| | | | nd this may result in the refusal of permanent residence, or to t | he | |
| annulme | ent of application process and a | pplicable fees. | | | |
| | | d and agree to the terms of a possible refi have included in my application. | usal that may be applied to my application or to applications of | my | |
| Signed t | oy | | Dated (D/M/Y) / / | | |
| SESTI | ON O INFORMATION A | DOUT DADENTS | | | |
| | ON 9 - INFORMATION A | BOUT PARENTS | | _ | |
| Main Ap | plicant | | | | |
| Question | 1 | Father | Mother | | |
| 1. | Surname | | | | |
| 2. | First name | | | | |
| 3. | Father's name (patronymic) | | | | |
| 4. | Maiden full name | | | | |
| 5. | Mother's maiden full name | | | | |
| 6. | Place of Birth | | | | |
| 7. | Nationality | | | | |
| 8. 9. | Occupation Residential address | | | | |
| 9. | Residential address | | | | |
| | | | | | |
| Spouse | | | | | |
| Question | 1 | Father | Mother | | |
| 1. | Surname | | | | |
| 2. | First name | | | | |
| 3. | Father's name (patronymic) | | | | |
| 4. | Maiden full name | | | | |
| 5. | Mother's maiden full name | | | | |
| 6. | Place of Birth | | | | |
| 7. | Nationality | | | | |
| 8. | Occupation | | | | |
| 9. | Residential address | | | | |

SECTION 10 – APPLICANT'S RELATION TO MALTA 10.1 Do you have any family members living in Malta already? ☐ Yes ☐ No If yes, please provide name and family relationship with you. Name Relationship to you ☐Yes □ No 10.2 Were you earlier a Maltese citizen? If yes, when was your Maltese citizenship terminated? Dated (D/M/Y) / / Reason of terminating your Maltese citizenship? ☐ Yes ☐ No 10.3 Did you live in Malta earlier as a Maltese citizen? ☐ Yes □ No 10.4 Were your parents, grandparents or more distant ancestors Maltese citizens? If yes, data of Maltese ancestor (name and family relationship) Name Relationship to you 10.5 Is there any prosecution going against you in Malta or abroad at this time? ☐ Yes ☐ No If yes, what authority, what crime? Authority Crime



SECTION 3.2 - CLOSE FAMILY MEMBERS / DEPENDENTS (THAT MAY OR MAY NOT ACCOMPANY YOU)

| Relationship to you | | | |
|--|------------|------------|------------|
| 3.2.1 Accompanying | ☐ Yes ☐ No | ☐ Yes ☐ No | ☐ Yes ☐ No |
| 3.2.2 Surname (current) | | | |
| 3.2.3 Surname at birth | | | |
| 3.2.4 Father's name (patronymic) | | | |
| 3.2.5 First Name | | | |
| 3.2.6 Date of Birth (D/M/Y) | / | // | / |
| 3.2.7 Place of Birth (city, country) | | | |
| 3.2.8 Mother's maiden surname and name | | | |
| 3.2.9 Nationality | | | |
| 3.2.10 Contact number (country, area, no.) | | | |
| 3.2.11 Occupation (prior to arrival in MAL) | | | |
| 3.2.12 Education | | | |
| (highest level) 3.2.13 Passport number | | | |
| 3.2.14 Passport issue date | / | / | / |
| (D/M/Y) 3.2.15 Passport expiry date (D/M/Y) | / | / | / |
| 3.2.16 Passport issue place | | | |
| 3.2.17 Crime committed | ☐ Yes ☐ No | ☐ Yes ☐ No | ☐ Yes ☐ No |
| 3.2.18 Country of crime | | | |
| 3.2.19 Nature of crime | | | |
| 3.2.20 Punishment for crime | | | |

IF YOU NEED MORE SPACE, PLEASE USE ANOTHER COPY OF THIS SECTION

TIME-PROVEN STABILITY!



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