# Application Form

# Macintosh HD:Users:nigelanastasi:Desktop:dots-01.pngQualifying Employment in Innovation and Creativity (Personal Tax)



Application Forms are to be filled in electronically and signed as required. A scanned copy of the complete application form is to be submitted to Malta Enterprise on qualifyingemployment@maltaenterprise.com. Applicants may contact Business First on 144 for guidance on filling out this application form.

**This Section is the be Compiled by the Applicant**

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| Surname: | Click or tap here to enter text. | First Name(s): | Click or tap here to enter text. |
| Email Address: | Click or tap here to enter text. |
| Telephone No.: | Click or tap here to enter text. | Mobile No.: | Click or tap here to enter text. |
| Nationality: | Click or tap here to enter text. | Country of Birth: | Click or tap here to enter text. |
| Passport Number | Click or tap here to enter text. | Date of Birth | Click or tap to enter a date. |
| Maltese ID No.: | Click or tap here to enter text. | Income Tax No. | Click or tap here to enter text. |

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| Residence in Malta | Click or tap here to enter text.Town Click or tap here to enter text. Post Code Click or tap here to enter text.Choose an item.  |
| Rights on property: | Choose an item. |
| Date of start of lease/rent:  | Click or tap to enter a date. |  |
| Expiry of lease if applicable: | Click or tap to enter a date. |  |
| Number of Dependants living in Malta: | Click or tap here to enter text. |  |
| Number of Dependants living at above address: | Click or tap here to enter text. |  |
| Number of bedrooms in the residence | Click or tap here to enter text. |  |
| Is the property shared with other persons that are not your dependants? | Choose an item. |

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| Address of main residence outside Malta | Click or tap here to enter text.Town Click or tap here to enter text. Post Code Click or tap here to enter text.CountryClick or tap here to enter text. |

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| Health Insurance Provider: | Click or tap here to enter text. |
| Policy number: | Click or tap here to enter text. | Policy Expiry Date: | Click or tap to enter a date. |
| Insurance Covers in patient treatment: | Choose an item. |  |  |
| Policy covers dependents: | Choose an item. |  |  |

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| If this is a renewal application specify the reference of the last issued certificate confirming eligibility of applicant for the provisions of the Qualifying Employment in Innovation and Creativity (Personal Tax) Rules. | Click or tap here to enter text. |

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**APPLICANT DECLARATION**

I, the undersigned, hereby apply to benefit for the provision of the Qualifying Employment in Innovation and Creativity (Personal Tax) Rules, subsidiary legislation 123.141 of the Income Tax Act as updated though L.N. 282 of 2019, and declare that:

1. The information stated in this Application Form and in the Declaration is true and correct.

1. I am not benefitting, I have not benefitted and I hereby irrevocably waive my right to the benefit under Article 6 of the Income Tax Act;
2. My income from stable and regular resources is sufficient to maintain myself and my family and any dependants without recourse to the social assistance system in Malta;
3. My residence in Malta as indicated in the application form is regarded as normal for a comparable family in Malta and meets the general health and safety standards in force in Malta;
4. I am in possession of a valid travel document;
5. The Health Insurance referenced in this application form covers normal risks including in-patient treatment for myself and my family and other dependants residing in Malta.
6. All income from the qualifying contract of employment shall be duly declared in my Malta Income Tax Return;
7. I do not own any immovable property in Malta, and should I become the owner of immovable property, I shall automatically forfeit all benefits under this tax measure;
8. I do not control more than 25% of the shares of the undertaking in which I am employed.

**Persons who have not preiosuly benefited from the Qualifying Employment in Innovation and Creativity (Personal Tax) Rules should skip this page.**

I hereby also declare that during the period when my employment was not covered by a certificate:

1. I was still covered by a health insurance covering normal risks including in-patient treatment for myself and my family and other dependants residing in Malta;
2. I did not become the owner of any immovable property property in Malta, and should I become the owner of immovable property, I shall automatically forfeit all benefits under this tax measure;
3. My salary package remained above the global sum of €45,000.

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| **This Section is the be compiled by the Applicant’s Employer (Person responsible for Human Resources)** |  |

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| Name of Organisation: | Click or tap here to enter text. |
| Company Registration Number:  | Click or tap here to enter text. |  |  |
| PE Number: | Click or tap here to enter text. |  |  |

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| Address:  | Click or tap here to enter text.Town Click or tap here to enter text. Post Code Click or tap here to enter text.Choose an item. |
| Email Address: | Click or tap here to enter text. |
| Telephone Number: | Click or tap here to enter text. |  |

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The following information is related to the employment of:

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| Surname: | Click or tap here to enter text. | First Name(s): | Click or tap here to enter text. |
| Position in Organisation: | Click or tap here to enter text. |

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| Description of main tasks and duties: | Click or tap here to enter text. |
| The role entails that the employee shall be engaged in: | [ ] Senior Management[ ] Product Development[ ] Product and/or Process Innovation[ ]  Technical/Scientific Research and Development[ ] Creative Design |

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| Justify the selection above with reference to your job description and /or contract of employment. | Click or tap here to enter text. |

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Click here to enter name has been engaged on the basis of having the below post-secondary qualifications which are in a subject area relevant to an eligible office and/or having relevant experience indicated below which is directly related to the subject area relevant to an eligible office (leave blank if not applicable).

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| Awarding Body | Qualification | Date Awarded |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap to enter a date. |
| Click or tap here to enter text. | Click or tap here to enter text. | Choose an item. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap to enter a date. |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap to enter a date. |

The Applicant should provide documentation confirming these qualifications are a post-secondary education programme at graduate level as recognized by the Malta Qualifications Recognition Information Centre as established by article 6 of the Mutual Recognition of Qualifications Act.
*Malta Enterprise retains the rights to request Proof of Qualifications should it be deemed necessary.*

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Click here to enter name has been engaged on the basis of having the below experience in roles which provide skills which are equivalent or analogous to those required in the eligible office. (leave Blank if not applicable)

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| Employer  | Role | Start | End Date |
| Click or tap here to enter text | Click or tap here to enter text | Click or tap to enter a date | Click or tap to enter a date |
| Click or tap here to enter text | Click or tap here to enter text | Choose a building block | Click or tap to enter a date |
| Click or tap here to enter text | Click or tap here to enter text | Click or tap to enter a date | Click or tap to enter a date |
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**Salary Details**

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| Gross Salary Last Year  | € Click or tap here to enter text. | Employment Start Date | Click or tap to enter a date. |
| Expected Gross Salary this Year | € Click or tap here to enter text. | Employment Contract Date | Click or tap to enter a date. |
| Indefinite Employment Contract  |  | Contract Expiry Date (if applicable) | Click or tap to enter a date. |

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Signature

Click or tap to enter a date.

**This section should only be completed if the applicant is claiming eligibility under the Qualifying Employment in Innovation and Creativity (Personal Tax) Rules in relation to employment in in a Senior Management roles.**

I Click or tap here to enter text. as legal representative of Click or tap here to enter text. with identification number Click or tap here to enter text., declare that Click or tap here to enter text. having ID card number Click or tap here to enter text. is employed in the role of Click or tap here to enter text. and is directly responsible of 3 or more employees whose may tasks are focused on:

a) Industrial Research meaning the carrying out (individually or as part of a team) of planned research or critical investigation aimed at the acquisition of new knowledge and skills for developing new products, processes or services, or for bringing about a significant improvement in existing products, processes or services. It comprises the creation of components parts of complex systems, and may include the construction of prototypes in a laboratory environment or in an environment with simulated interfaces to existing systems as well as of pilot lines, when necessary for the industrial research and notably for generic technology validation.

b) Experimental Development meaning acquiring, combining, shaping and using existing scientific, technological, business and other relevant knowledge and skills with the aim of developing new or improved products, processes or services. This may also include, for example, activities aiming at the conceptual definition, planning and documentation of new products, processes or services.

c) Product development meaning the detailed specification and development of new tangible products (including electronic products such as media and software products).

d) Product or process innovation meaning the implementation of significant improvements to tangible products (including electronic products such as media and software products) and industrial processes aimed at increasing current capabilities, including customisation and localisation.

e) Systematic, logical, scientific, inquisitive, investigative manipulation of data using quantitative and qualitative techniques for the creation of new knowledge and further development of products and services.

f) Mathematical synthesis and modelling.

 **Documentation to be provided with application**

1. Copy of Passport

1. Copy of Maltese ID Card
2. Copy of Residence Permit
3. Copy of Health Policy (the policy should make direct reference to the Beneficiary).
4. Current Employment Contract (including Job Description)
5. Rent OR Lease Contract of Immovable Property
6. Employment history issued from Jobsplus
7. FS4 signed by the applicant and the employer
8. Curriculum Vitae

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|  Personal Data Protection Information and Consent to Process Data |
| Contact email address of the Data Protection Officer: dpo@maltaenterprise.com |
| Please read this document carefully and fill in any required data. When complete print the document initialise each page and sign the last page. A scanned version of the signed document should consequently be uploaded to the appropriate section in the ‘Client Portal’. |
| The legal basis and purpose of processing: |
| The personal data collected by Malta Enterprise (hereinafter ‘the Corporation) via this written application for aid inclusive of related annexes as submitted to the Corporation via its Client Portal (hereinafter ‘the Application’) and its subsequent processing by the Corporation to evaluate data subject’s request for aid under the Scheme, is in line with: |
| i. The Scheme Incentive Guidelines; |
| ii. Article 28 of the Malta Enterprise Act; |
| iii The applicable Commission Regulation: Commission Regulation (EU) No 651/2014 of 17th June 2014 declaring certain categories of aid compatible with the internal market in application of Articles 107 and 108 of the Treaty as amended by Commission Regulation (EU) No 2017/1084 of 14 June 2017 amending Regulation (EU) No 651/2014 as regards aid for port and airport infrastructure, notification thresholds for aid for culture and heritage conservation and for aid for sport and multifunctional recreational infrastructures, and regional operating aid schemes for outermost regions and amending Regulation (EU) No 702/2014 as regards the calculation of eligible costs(hereinafter referred to as the ‘General Block Exemption Regulations’ (for Schemes notified under the General Block Exemption Regulations 2014); or Commission Regulation (EC) No 800/2008 of 6 August 2008 declaring certain categories of aid compatible with the common market in application of Articles 87 and 88 of the Treaty (General block exemption Regulation 2008), or Commission Regulation (EU) No 1407/2013 of 18 December 2013 on the application of Articles 107 and 108 of the Treaty on the Functioning of the European Union to de minimis aid (de minimis Regulation); |
| iv. Data Protection Act, Chapter 586 of the Laws of Malta and Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation). |
| The legitimate basis to process personal data submitted by the data subject by virtue of his/her Application is Regulation 6 (1)(b) of the General Data Protection Regulation (“GDPR”), as ‘processing is necessary in order to take steps at the request of the data subject prior to entering into a contract’. |

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| Data retention period: |
| The data collected by the Corporation as submitted by the data subject via the Application will be retained for a period of 10 years from the last aid granted to the Undertaking represented by the data subject in relation to this written application for aid, in line with the Scheme Incentive Guidelines and Article 12 of the General Block Exemption Regulations 2014 or Article 10 of General Block Exemption Regulations 2008 or Article 6 of the de minimis Regulation. |

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| Pursuant to the Regulation, you have the right to access the personal data, rectify inaccurate personal data, request to erase personal data and request the Corporation to restrict the processing of personal data |
| To exercise such rights, you are to submit a written request to the Data Protection Officer via the contact e-mail address. |
| Any erasing and/or rectification of personal data and/or restriction of processing as referred to above may: |
| i) Render one or more cost items or the Undertaking ineligible for assistance under the Scheme or render void an Incentive Entitlement Certificate issued in favour of the Undertaking for assistance under the Scheme in relation to the Application;  |
| ii) Lead the Corporation to enforce a recovery of aid granted to the Undertaking as part of the Application, in line with Article 32 of the Malta Enterprise Act. |

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| Sharing of data where strictly necessary and required by law: |
| For the purpose of processing the Application in line with the Scheme Incentive Guidelines, the General Block Exemption Regulations or the Commission Regulation (EU) No 1407/2013 of 18 December 2013 on the application of Articles 107 and 108 of the Treaty on the Functioning of the European Union to de minimis aid (hereinafter referred to as the ‘de minimis Regulations’), the Corporation shall share the data provided via this application with other Government Entities, subject that such processing satisfies at least one of the grounds listed under Regulation of the GDPR. |
| For the purpose of monitoring of aid in line with Article 6 of the de minimis Regulations and Articles 11 and 12 of the General Block Exemption Regulations 2014 or Articles 10 and 11 of the General Block Exemption Regulations 2008or where legally required, any data provided as part of the Application may be shared with the European Commission.  |
| For any individual aid awarded in excess of €500,000 as part of the Application, the details of the Beneficiary, the awarded aid and the project details shall be published as provided for in Article 9 of the General Block Exemption Regulations. |
| If you feel that your data protection rights have been infringed, you have the right to lodge a complaint with the Information and Data Protection Commissioner. |
| Authorisation to engage with the Corporation on matters related to the Application. |
| I the undersigned, as legal representative of the Applicant Undertaking, authorise the following Legal Bodies and/or Natural Persons to act on my behalf with Malta Enterprise Corporation with respect to matters related to the Application and any subsequent documentation exchanged between the two parties in relation to the same Application.  |
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| Name of Legal Entity | Name and Surname of Natural Person granted authorisation(1) | E-mail address of party granted authorisation(2) |
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| Note 1: Leave empty if authorisation is intended to any natural person engaged with the Legal Entity. Otherwise specify the name and surname of the person(s) working for the Legal Entity to whom the authorisation is intended. |
| Note 2: Written communication with the Legal Entity and/or Natural Person granted authorisation via email will only be accepted via the email address specified in the table above. The Undersigned should be copied (via the email address specified in the Application) in any communication between the Corporation and the Person granted authorisation as per above table. |

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| In respect to this application I confirm that I have read the text contained in this document and agree to its contents.  |

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| Name and Surname of person giving authorisation: |
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| E-mail address of person giving authorisation: |
|      @     .com.       |
| Date |  |
|       |
| Signature of person giving authorisation: |  |
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| The person giving authorisation should correspond to the data subject of personal data contained in the Application as well as represent the Applicant Undertaking as its legal representative. |
| Please make sure you initialise all pages of this document. |