



MALTA

APPLICATION FOR REVERSION TO FORMER GRADE

Section A

Name: _____

I.D. Number: _____

Current Directorate: _____

Current Grade: _____

Date of Appointment to Current Grade: _____

Grade you wish to apply for (including subject to be taught if applicable):

Date when you are in a position to commence duties in former grade:

Please attach endorsed true copies of certification and teacher's warrant to this application.

Signature of Officer

Date

Signature of Applicant's immediate superior

Date

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Section B

Is the applicant qualified for the post applied for? Yes / No (delete as applicable)

If 'No' please state in brief why the application has been rejected.



Is a real vacancy available for the post applied for? Yes / No *(delete as applicable)*

If 'Yes' is the real vacancy available immediately? Yes / No *(delete as applicable)*

Explain how this vacancy came about e.g. through resignation / promotion / retirement / other reason:

Has this vacancy been approved under MEDE's approved Capacity Building? Yes/No
(delete as applicable)

If no vacancy exists then when is this vacancy likely to become available?

_____ *(Month/Year)*

Applicant requires induction programme? Yes/No

If 'Yes' when does the programme commence? _____ *(insert estimated date or time frame)*

I confirm that a colloquium with the applicant has taken place.

Signature DER

Date

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Section C

I confirm that officer is eligible to be reverted to the grade of _____ .

Signature DHR

Date