**APPLICATION TO THE EXEMPTIONS BOARD**

**EXEMPTIONS FROM FEES AT STATE EDUCATIONAL INSTITUTIONS**

Family Name and First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sex: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ID Card: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Refugee Commission No: \_\_\_\_\_\_\_\_\_\_\_

Residence Permit Category: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Residence Address in Malta: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Locality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Education Institution where course is followed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Person following course/Residence Permit No. / Date of Birth

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of course applied for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Exemption for scholastic Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Category: Refugee Protection \_\_\_ Subsidiary Protection \_\_\_ Asylum Seeker \_\_\_\_ THP \_\_\_\_ Temporary Protection \_\_\_\_**

**THPn/SRA\_\_\_\_ Failed Asylum Seeker \_\_\_\_ Long Term Resident\_\_\_\_\_**

**EU related \_\_\_ Exempt \_\_\_ Work Permit/Family Member \_\_\_\_ Others\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DOCUMENTS that are to be verified/photocopied when applying for an Exemption from Fees in State Educational Institutions**

**\_\_\_\_\_\_\_ Copy of Original valid Residence Permit/Refugee Commission/Police Cert. of the applicant (sponsor) in case of minor**

**\_\_\_\_\_\_\_\_\_\_ Copy of Original valid Residence Permit/Refugee Commission/Police Cert. of student attending School/Institution**

**\_\_\_\_\_\_\_\_\_\_ Copy of Original valid Residence permit/Ref. Commission/Police Cert. of Spouse, if applicable.**

**\_\_\_\_\_\_\_\_\_\_ Other document/documents (specify)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Receiving Officer Date**

**Application for Exemption cannot be processed unless ALL documentation required is presented.**

**Parents/Guardians may be requested to present any relevant documentation required by the Exemption from Fees Board.**

**Declaration by Client**

**I give my consent for verification and processing of necessary documentation for the purpose it has been requested.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Client Date**

**The Ministry for Education, Sport, Youth, Research, and Innovation collects and processes information to carry out its obligations in accordance with the Education Act Chapter 605 of the Laws of Malta. All data is collected and processed in accordance with Data Protection legislation.**

**Personal information is accessed by the employees and members of the Board for Exemption from fees in State Educational Institutions. Disclosure can be also made to third parties but only as authorized by law. You are entitled to know, free of charge, what type of information the Exemptions Board holds and processes about you and why, who has access to it, how it is held and kept up to date, for how long it is kept and what the Board is doing to comply with data protection legislation.**

**Correspondence** is to be addressed to:

**Board of Exemption from Fees in State Educational Institutions**

**Ministry of Education, Sport, Youth, Research and Innovation**

**Great Siege Road,**

**Floriana**

**Tel: 2598 1247/ 2598 1248/ 2598 1246**

**Email: exemptionsboard.meyr@gov.mt**