



Declaration of Termination of Employment

Explanatory notes:

1. This declaration should be filled in by:
 - The employer when a contract of employment has been **terminated**.
 - The employer when an employee's employment status is **changed**, e.g. from part-time to full-time and vice-versa, or from a definite contract to an indefinite contract or for any other reason.
 - The self-employed person on **ceasing** to be self employed.
2. This declaration should be used in both full-time and part-time employment and/or self-employment.
3. It is very important that this form is filled, especially the termination date and the reason of termination.
4. This declaration should be sent, within **FOUR DAYS** from the date of termination, to:

Jobsplus Gozo
Sir Arturo Mercieca Street
Victoria Gozo VCT 2024

Email: hriu.jobsplus@gov.mt

In case of difficulty phone **22201957**

5. Persons are obliged to send this declaration and who do not so within stipulated time, are liable to a fine as envisaged in Legal Notice 110 of 1993 and Act No. XXVII Employment Training Services (Amendment) Act, and Legal Notice 226 of 2016.
6. Termination Forms can also be submitted through our website: www.jobsplus.gov.mt
7. The Corporation is obliged to issue an acknowledgement once this form is processed. If the employer or the employee does not receive an acknowledgement, it is up to him/her to inform the Corporation to send another acknowledgement.
8. These notes are for information purposes only.

"If the Employer fills in this form s/he should ensure that the data required to fill in this form is obtained in so far as possible, first hand from the employee. Wherever data about the employee is obtained from a third party, the employee should be informed and the accuracy of the data ascertained.

Personal data is collected and held by Jobsplus and is used by Jobsplus and/or transferred to third parties in order to fill Jobsplus' functions according to law and in line with the provisions of the Data Protection Act. You should disclose to Jobsplus personal data which is correct. You have a right to access your personal data as well as to request that any incorrect personal data be rectified. You should ask for assistance if you have any queries."



TERMINATION OF EMPLOYMENT FORM

SECTION A: PERSONAL DETAILS

Gozo Office:

Sir Arturo Mercieca Street, Victoria VCT 2024

Tel: +356 22201957

Email: hriu.etc@gov.mt

Identity Card Number /Passport

Social Security (N.I.) Number

Date of Birth

Name

Surname

Number / Name of Residence

Street

Locality

Postcode

Email address

Mobile Number

Telephone Number

Gender

Male

Female

Other

Academic Level

Never attended School

Primary Level

Secondary Level *(No Certification)*

SEC Certificate or 'O' Level Certificate

MATSEC Certificate, Advanced or Intermediate Level

Diploma Level

Graduate

Masters Certificate or Postgraduate Diploma

Doctorate Level

Nationality EU

Maltese Dual Non EU

In case of a Non-EU citizen, and He / She is dependent on an EU National, write down below the Nationality of the EU Citizen below and attach a copy of the "Residence Permit"

In case of a Non EU Citizen, and He / She is married to a Maltese National, attach a document of the "Freedom of Movement by Marriage"

SECTION B: DETAILS OF EMPLOYER

Name and Surname of Employer

Employer No. (Jobsplus)

PE Number (I.R.D.)

Name of Commercial Entity (Partnership / Company)

VAT Number

Company Number (MFSA)

Address of Commercial Entity

Self-Employed (without employees)

Self-Employed (with employees)

Company / Cooperative Partnership

Voluntary Organisation (NGO) Government Entity

Holding Company Company (Ltd)

Company forming part of a Group

Company that does not form part of a Group

Corporation / Authority Government Dept.

Company - Foreign Owned

Company - Maltese Owned

Government Majority Shareholding

Government Minority Shareholding

Locality

Postcode

Mobile Number

Telephone Number

Email address

Primary Sector in which Commercial Entity operates

SECTION C: DETAILS OF EMPLOYMENT

Full-Time Part Time Date of Commencement: Date of Termination:

Full-Time (Reduced) Part Time (Casual)

Definite Contract Indefinite Contract

REASONS OF TERMINATION - GUIDELINES

PRINCIPAL REASONS FOR TERMINATION OF EMPLOYMENT	Specific Reasons for Termination of Employment (Please tick ONLY ONE of the reasons below)	<input type="checkbox"/>
Redundancy <i>(Sensja)</i>	Lack of Work <i>(Nuqqas ta' Xogħol)</i>	<input type="checkbox"/>
	Business Closed Down <i>(Is-Sid għalaq / Kumpanija għalqet)</i>	<input type="checkbox"/>
Termination of Contract <i>(Tmiem tal-Kuntratt)</i>	End of Definite Contract <i>(Tmiem ta' Kuntratt Definit)</i>	<input type="checkbox"/>
	End of Apprenticeship Scheme Contract <i>(Tmiem tal-Kuntratt tal-Apprentistat)</i>	<input type="checkbox"/>
	End of Work Phase <i>(Tmiem ta' fazi ta' Xogħol / Xogħol għas-Sajf)</i>	<input type="checkbox"/>
	Expiry of Appointment <i>(Skadenza tal-Ħatra)</i>	<input type="checkbox"/>
Circumstances beyond employer's control <i>(Ċirkustanzi lil hinn mill-kontroll ta' min iħaddem)</i>	Failing to Obtain Driving / Operating Licence <i>(Nuqqas ta' akkwizizzjoni ta' Liċenzja tas-Sewqan / Liċenzja biex Topera)</i>	<input type="checkbox"/>
	Failing to pass Physical Training / Aptitude Test <i>(Nuqqas milli jgħaddi mit-Test Fiziku)</i>	<input type="checkbox"/>
	Revocation of Employment Licence <i>(Revokazzjoni tal-Liċenzja tal-Impjieg)</i>	<input type="checkbox"/>
	Cancellation/Suspension of Employment Licence <i>(Kancellazzjoni / Sospensjoni tal-Liċenzja tax-Xogħol)</i>	<input type="checkbox"/>
	Expiry of Employment Licence <i>(Skadenza tal-Liċenzja tal-Impjieg)</i>	<input type="checkbox"/>
Dismissed <i>(Tkeċċija)</i>	Disciplinary Reasons <i>(Tkeċċija fuq Raġunijiet Dixxiplinarji)</i>	<input type="checkbox"/>
	Failure to perform duties as agreed in employment contract <i>(Naqas li jagħmel id-doveri skont kif miftiehem fil-kuntratt tal-impjieg)</i>	<input type="checkbox"/>
Resignation <i>(Riżenja)</i>	Formal Resignation <i>(Riżenja Formali)</i>	<input type="checkbox"/>
	Did not report for Work <i>(Ma rrapportax għax-Xogħol)</i>	<input type="checkbox"/>
	Abandoned Place of Work <i>(Abbanduna l-Post tax-Xogħol)</i>	<input type="checkbox"/>
	Early Retirement <i>(Irtirar Kmieni)</i>	<input type="checkbox"/>
	Retirement Disciplinary Corp Member - AFM/Police Force <i>(Irtirar Korp Dixxiplinarju - AFM / Pulizija)</i>	<input type="checkbox"/>
	Retirement Age <i>(Pensjonant)</i>	<input type="checkbox"/>
	Voluntary Retirement / Redundant Scheme <i>(Irtirar Volontarju)</i>	<input type="checkbox"/>
	Emigrated / Left Abroad <i>(Emigra / Siefer)</i>	<input type="checkbox"/>
	Employed Elsewhere <i>(Instab Xogħol Ieħor)</i>	<input type="checkbox"/>
	Ended Self-employment <i>(Il-Persuna ma għadhiex taħdem għal rasha)</i>	<input type="checkbox"/>
	Ended Part time Employment <i>(Il-Persuna ma għadhiex taħdem fuq bażi part time)</i>	<input type="checkbox"/>
	For Further Studies <i>(Il-Persuna waqfet taħdem biex tkompli tistudja)</i>	<input type="checkbox"/>
Health Reason <i>(Raġuni ta' Saħħa)</i>	<input type="checkbox"/>	
Termination During Probation <i>(Terminazzjoni waqt iż-Zmien ta' Prova)</i>	Termination by the employer during the probationary period <i>(L-Impjieg terminat minn min iħaddem fil-perjodu ta' prova)</i>	<input type="checkbox"/>
	Termination by the employee during the probationary period <i>(L-Impjieg terminat mill-impjegat fil-perjodu ta' prova)</i>	<input type="checkbox"/>
Employment not Effected <i>(L-Impjieg ma seħħ qatt)</i>	When the Termination Date is the same as the Engagement Date <i>(L-Impjieg qatt ma seħħ)</i>	<input type="checkbox"/>
Changes within the same Organisation, such changes do not constitute termination of employment but for statistical record <i>(Tibdil fl-istess Organizzazzjoni)</i>	Transferred / Moved to Another Department (Public Sector) <i>(Trasferiment minn Dipartiment għall-ieħor)</i>	<input type="checkbox"/>
	Transfer of Business <i>(Trasferiment ta' negozju)</i>	<input type="checkbox"/>
	Change in Company Name <i>(Tibdil fl-isem tal-Entità)</i>	<input type="checkbox"/>
	Transfer from Full Time to Part Time Employment and vice-versa <i>(Trasferiment minn xogħol Full time għal-Part Time u viċi versa)</i>	<input type="checkbox"/>
	Transfer from Full Time to Full Time Reduced Employment and vice-versa <i>(Trasferiment minn xogħol Full time għal-Full Time reduced u viċi versa)</i>	<input type="checkbox"/>
Transfer from Full Time/Part Time Indefinite Contract to a Definite Contract <i>(Trasferiment minn xogħol Full time/Part Time Kuntratt Indefinit għal Kuntratt Definit minħabba tibdil fil-Kariga)</i>	<input type="checkbox"/>	
Deceased <i>(Miet)</i>	Deceased <i>(Il-persuna mietet)</i>	<input type="checkbox"/>
Termination by the employer <i>(Terminazzjoni min-naha ta' min iħaddem)</i>	Employee reaches pension age <i>(L-impjegat laħaq l-età tal-pensjoni)</i>	<input type="checkbox"/>
	Health reason <i>(Raġuni ta' saħħa)</i>	<input type="checkbox"/>

Signature of Employer

Signature of Employee

Designation

Employer Identity Card Number

Form Submitted Date