



APPLICATION For EXEMPTION

Head Office, Hal Far BBG 3000

Tel: 22201405

Email: paul.p.borg@gov.mt Website: www.jobsplus.gov.mt

from Employer's share of Social Security Contributions for employees with registered disability during **calendar year 2017**.

1 APPLICANT'S (EMPLOYER'S) DETAILS

Name of Employer : _____

Employer's Income Tax No : _____ PE No : _____

2 EMPLOYEE'S DETAILS

Name : _____ **Surname:** _____

Identity Card No : _____ ETC RDP No* : _____

This exemption is requested with effect from : _____

Name : _____ **Surname:** _____

Identity Card No : _____ ETC RDP No* : _____

This exemption is requested with effect from : _____

Name : _____ **Surname:** _____

Identity Card No : _____ ETC RDP No* : _____

This exemption is requested with effect from : _____

Name : _____ **Surname:** _____

Identity Card No : _____ ETC RDP No* : _____

This exemption is requested with effect from : _____

Exemption is effective either 1st. January 2017 or from date of engagement whichever is the later.

*To be completed by ETC

3 EMPLOYER'S DECLARATION

I, the undersigned who am employing the person/s listed in Section 2, am hereby applying to be exempted from paying the employer's share of social security contributions.

I hereby declare that the details submitted are entirely true and correct, and I assume full responsibility to inform without delay the Employment and Training Corporation of any changes in circumstances that may affect this exemption

Signature of person applying on behalf of Employer.

Identity Card No.

Designation

Date

Data Protection Declaration:

Personal data is collected and held by ETC and is used by ETC and/or transferred to third parties in order to fulfil ETC's functions according to law and in line with the provisions of the Data Protection Act. You should disclose to ETC 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.