



Declaration of Commencement of Employment Self -Employed Persons

Notes for Self- Employed Persons:

1. This declaration should be filled in by persons starting self-employment for the first time and by persons who were previously self-employed, had stopped and now are going to re-start.
2. When a self-employed person employs any employees s/he should fill in this Declaration of Commencement and the Declaration of Commencement of Employment for Employed Persons for each employee commencing employment with him/her.
3. This Declaration should be filled in and sent to the Corporation on the **SAME DAY** of commencement of employment.
4. If this is your first employment, you will need:
 - (a) Identity Card
 - (b) Certificate of Registration of the Social Security Number from the Department of Social Security or, in the case of non-Maltese nationals, a certificate from the same Department regarding exemption from Social Security contributions.
5. The certificates indicated in paragraph 4 are to be sent to Jobsplus together with this form.
6. In this Declaration, the terms:

“Address” in Section A refers to the home address of the self-employed person.

“Address of commercial entity” in Section C refers to the place where you receive your business mail.

“Place of employment” in Section B refers to the town or village where work is located, if this is done in a fixed place.
7. Section C (Details of Employer), “Employer Number (Jobsplus)” is a number issued by Jobsplus when a person registers as self-employed. If this is the first time that you are going to register as self-employed and you still do not have this number, please leave it blank.

8. This declaration, together with any forms required, should be sent to:

Jobsplus Gozo
Human Resource Information Unit
Sir Arturo Mercieca Street
Victoria Gozo VCT 2024

Email: hriu.jobsplus@gov.mt

In case of difficulty phone **22201957**

9. Engagement Forms can also be submitted through our website: www.jobsplus.gov.mt
10. Any self-employed person, who does not send this declaration within the stipulated time, is 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.
11. An acknowledgement is issued once this form is processed. If the self-employed person does not receive an acknowledgement, it is up to him/her to inform Jobsplus to send another acknowledgement.
12. These notes are for information purposes only.

Personal data is collected, held and used by Jobsplus and is exchanged with third parties in order to fulfill the functions required of Jobsplus according to the provisions of the Employment and Training Services Act (Chapter 343) and SL 343.23 of the Laws of Malta. Jobsplus will use personal data according to the provisions of the Data Protection Act 2018 and General Data Protection Regulations EC/679/2016. Data disclosed to Jobsplus data should be correct and should there be any changes, these are communicated to Jobsplus immediately. Both employers and employees have the right to access, change and delete, where applicable, the personal data that Jobsplus holds about them as well as to request that any incorrect personal data is rectified.



ENGAGEMENT FORM-SELF-EMPLOYED

SECTION A: PERSONAL DETAILS

Identity Card Number / Passport

Social Security (N.I.) Number

Date of Birth

For office use only:

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 EMPLOYMENT

Full-Time

Part-Time

Designation / Type of Work

Date of Commencement:

Place of Employment

Gozo Town/City

Malta Town/City

SECTION C: DETAILS OF EMPLOYER

Name and Surname of Employer

Employer No. (Jobsplus)

PE Number (I.R.D.)

Name of Commercial Entity (Partnership / Company)

VAT Number

Address of Commercial Entity

Self-Employed (without employees)

Self-Employed (with employees)

Locality

Postcode

Mobile Number

Telephone Number

Cooperative

Partnership

Email address

Foreign Owned

Primary Sector in which Commercial Entity operates

Maltese Owned

Signature

Designation

IdentityCardNumber

Form Submitted Date