

**APPLICATION FOR ENLISTMENT OF SOLDIERS IN THE AFM
REGULAR SOLDIERS
(Notice in the Government Gazette No. 20,090 dated 16 November 2018)**

Information Protected – Personal information provided on your application form is protected and used in accordance with the provisions of the General Data Protection Regulations (GDPR).

This Form, fully and legibly completed by the applicant is to be handed in personally at the Department of Examinations, The Mall, Sarria Street, Floriana, or the Examinations Centre, Fortunato Mizzi Street, Victoria, Gozo between 8.00 am and 12.00 noon and from 1.30 pm to 4.00 pm between Wednesday 21 November 2018 and Tuesday 4 December 2018 by 4.00 pm (Central European Time) accompanied by:

- (a) receipt issued by Police (dated after publication of this call) for complete record of criminal convictions (*Fedina Penali*). (Include receipt number below) Conduct certificates are **NOT** accepted;
- (b) colour passport format photograph (attached to this form);
- (c) copies of certificates and their MQF equivalency level where applicable;*
- (d) Examination Fee of €9.30 payable **only** by Cheque to the Director of Examinations or credit card. This fee is not refundable

* Original documents, certificates and/or testimonials are to be invariably produced for verification during the interview.

WRITE IN BLOCK LETTERS (Contact details provided shall be used for official correspondence)

I. D. Card No: _____ **FEDINA PENALI receipt number:** _____
(If not completed, application is not valid. Conduct certificate is not accepted)

Surname: _____ Name: _____

Address: _____

Postcode: _____

Telephone no: _____ Mobile no: _____

Email address: _____

Male/Female/Other: _____ Height: _____

Date of birth: _____

Attach passport
format photo here.

QUALIFICATIONS (insert Grade)

	Qualifications at MQF Level 2 (minimum grade E, 7 or comparable) (as per para 2.f.(i))	Qualification at MQF Level 2 or Secondary School Leaving Certificate and Profiling Qualification at MQF Level 2 awarded not earlier than 2015 (as per para 2.f.(ii))	I was successful in the following components of the written examination of a call advertised for the Enlistment for Soldiers in the AFM issued not earlier than 2013 (Malta Government Gazette 19,144 of 27 September 2013)
English Language			
Maltese Language			
Mathematics			

I am not in possession of the minimum requirements and I am hereby registering for the Written Examination in the following subjects:

English Language Maltese Language Mathematics (tick as necessary)

Any additional qualifications

Subject	MQF Level

Any previous service in the Armed Forces of Malta or other disciplined force

No Yes If 'YES' name force: _____

I hereby give my consent to the Armed Forces of Malta Medical Officers to retrieve, at any point in time until I have been officially discharged from the service, personal medical records from any Government and private hospital. Any information deemed pertinent to this call can be transmitted, by the said Medical Officers, to the appropriate Officers in the Armed Forces of Malta.

I hereby give my consent to the Malta Police Force and other relevant agencies to provide the Armed Forces of Malta with my personal criminal records for vetting purposes. (If the receipt issued by the Police for the issue of complete record of criminal convictions Fedina Penali is not included with the application or the number not entered in the application form, the application is not considered valid. Conduct sheets are not accepted.

I hereby declare that I have read and understood the Call for Enlistment as published in the Malta Government Gazette and this application form.

I hereby declare that I am a Citizen of Malta and that by the closing date of the call for applications, I will be at least eighteen (18) years of age but will not have reached the age of thirty (30) by 31 December 2019. I also declare that the information provided in this application form is correct and accurate.

Signature of applicant _____
(if unsigned application is not considered valid) _____ Date _____

FOR OFFICE USE

Rec. No		Date		Time
Vetted as per CDB records		Checked		