



Notifika Notification D	Notifika Volontarja taç-Ċittadini Maltin li Jsiefru u jew Jghixu Barra minn Malta <i>Voluntary Notification for Maltese Citizens Travelling and/or Living Abroad</i> Notifika ta' Kunsens / <i>Notification of Consent</i>
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L-Ewwel Pass Step 1	Qabel tibda timla din in-notifika, aqra l-informazzjoni fuq il-Pagna ta' Taghrif ta' Notifika D. <i>Before you start filling this notification, please read carefully the information on the Instruction Page of Notification D.</i>
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It-Tieni Pass Step 2	Imla l-informazzjoni kollha mitluba hawn taht, speċjalment fejn għandek l-asterisk (*). <i>Please provide all the information requested especially where an asterisk is placed (*).</i>
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It-Tielet Pass Step 3	Ir-Raġuni/jiet li ser tghix barra minn Malta / Reason(s) for living outside Malta <i>Immarka l-għażla t-tajba* / Tick the right choice*</i> Residenza Permanenti <input type="checkbox"/> Btala <input type="checkbox"/> Xogħol <input type="checkbox"/> Raġunijiet Ohra <input type="checkbox"/> <i>Permanent Resident Holiday Work Other Reasons</i> Id-data ta' meta ser titlaq minn Malta*: _____ Id-data ta' meta ser tiġi lura* _____ <i>Date of departure from Malta* Date returning back to Malta* (if applicable)</i>
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Ir-Raba' Pass Step 4	<i>Immarka fejn jgħodd għalik / Please tick the right choice</i> Din hi notifika ġdida <input type="checkbox"/> Biex naġġorna n-notifika <input type="checkbox"/> <i>This is a new Notification Updating information on my Notification</i>
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A	INFORMAZZJONI PERSONALI TIEGHEK / YOUR PERSONAL INFORMATION
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Kunjomok* _____
*Surname**

Ismek/Ismijietek* _____
Name(s)

Sess* _____
*Gender**

Id-Data tat-twelid* _____
*Date of Birth** ġurn. xahar sena

In-numru tal-Passaport Malti* _____
*Maltese Passport Number**

Id-Data meta jiskadi* _____
*Date of expiry** ġurn. xahar sena

In-numru tal-Karta tal-Identità* _____
*Identity Card Number**

Id-Data meta tiskadi* _____
*Date of expiry** ġurn. xahar sena

B	L-INDIRIZZ BARRA MINN MALTA / ADDRESS OUTSIDE MALTA
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L-indirizz fejn ser toqgħod* _____
*Address where you will be living**

Ir-raħal jew belt* _____ Il-pajjiż jew territorju* _____
village or city Country or territory**

It-telefown/mowbajl* _____ L-imejl / email _____
*Telephone / Mobile**

Skype jew kuntatti oħra _____

C	L-INDIRIZZ(I) U DETTALJI DWAR IX-XOGHOL BARRA MINN MALTA ADDRESS(S) AND DETAILS WHERE YOU WILL BE WORKING OUTSIDE MALTA
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IMPORTANTI: Jekk taħdem fuq pjattaforma jew fid-deżert, imla t-Taqsima D
IMPORTANT: If you work on a rig or in the desert, fill Section 4

Xogħlok /Occupation _____

L-indirizz tal-post tax-xogħol _____
Working address

Ir-raħal jew belt fejn taħdem _____ Il-Pajjiż jew territorju _____
village or city Country or territory

It-telefown / Il-mowbajl _____ L-imejl / Email _____
Telephone / Mobile

Skype jew kuntatti oħra _____

D	GĦAL MIN JAĦDEM FUQ PJATTAFORMA JEW FID-DEŻERT BISS ONLY FOR THOSE WORKING ON RIGS OR IN THE DESERT
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Iż-Żona tal-pjattaforma* _____
Area / Location of Rig(s)

Il-Post tal-pjattaforma* _____ L-egreb Ajruport/Mitjar* _____
Co-ordinates of rig location Nearest Airport/Airfield

Meta bdejt jew ser tibda tgħix f'dan l-indirizz?* _____ sa meta:* _____
When did you start or will start residing at this address? ġurn. xahar sena until ġurn. xahar sena

E	PERSUNA/I OĦRA LI NISTGHU NIKKUNTATTJAW F'KAŻ TA' EMERĠENZA OTHER PERSON(S) TO BE CONTACTED IN CASE OF EMERGENCY
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Kunjom* _____
*Surname**

Isem / Ismijiet* _____
*Name(s)**

Indirizz tal-persuna* _____
*Address **

Ir-raħal jew belt* _____
village or city*

Il-pajjiż jew territorju* _____
Country or territory*

It-telefown* / Il-mowbajl* _____
Telephone / Mobile

Imejl* _____
Email*

Huwa dmir u responsabbiltà tiegħek li tinforma lill-persuna msemmija f'din it-taqsimha li għaddejt dawn id-dettalji lill-Ministeru tal-Affarijiet Barranin / It is your responsibility to inform the listed person in this section that the Ministry for Foreign Affairs holds his/her contact details.

F	DIKJARAZZJONI TAL-KUNSENS U L-FIRMA TAL-APPLIKANT DECLARATION OF CONSENT AND SIGNATURE OF APPLICANT
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Jiena niddikjara * _____
I, declare that _____ (niżżel ismek u kunjomok sħiħ / write your name and surname in full)

li l-informazzjoni mogħtija f'din in-notifika hija korretta u nawtorizza lill-Ministeru għall-Affarijiet Barranin biex jipproċessa din l-informazzjoni skont in-Nota ta' Tagħrif.

the information supplied in this notification is correct and hereby authorize the Ministry for Foreign Affairs to process the information being requested in accordance to the Instruction Note.

Firma* / Signature** _____ Id-Data* / Date* _____
Day Month Year

G	NOTIFIKA TAL-PROTEZZJONI TAD-DATI / DATA PROTECTION NOTICE
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Id-Direttorat għall-Maltin li jgħixu Barra minn Malta fi hdan il-Ministeru għall-Affarijiet Barranin qiegħed iżomm din l-informazzjoni b'konsens tiegħek għall-fini mniżżla fil-Pagna ta' Tagħrif ta' Notifika D, u meta trid inti tista' tbiddel, tavvicina jew titlob lill-istess Direttorat sabiex jeqred din l-informazzjoni. Hija obbligazzjoni tiegħek li tinforma b'dan lill-istess Direttorat.

The Directorate for the Maltese Living Abroad within the Ministry for Foreign Affairs is processing this information with your express consent and for the specific reasons indicated on the Instructions page of Notification D and whenever you want to change, access or ask the same Directorate to destroy this information. It is your obligation to ensure that the information provided is kept updated.

Il-Ħames Pass Step 5	IBGHAT BIL-POSTA JEW B'IMEJL IN-NOTIFIKA D MIMLIJA SEND BY POST OR BY E-MAIL THE FILLED NOTIFICATION D TO:
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- bil-posta lil: **Id-Direttur, Id-Direttorat għall-Maltin li Jgħixu Barra minn Malta, Il-Ministeru għall-Affarijiet Barranin, Palazzo Parisio, Triq il-Merkanti, Il-Belt Valletta VLT 1171, IR-REPUBBLIKA TA' MALTA**
- by post to the: **Director, Directorate for the Maltese Living Abroad, Ministry for Foreign Affairs, Palazzo Parisio, Merchants Street, Valletta VLT 1171, THE REPUBLIC OF MALTA**

jew/or

- b'imejl skennjata fuq: malteselivingabroad.mftp@gov.mt
- scan and send by email on: malteselivingabroad.mftp@gov.mt

Tinsiex tiffirma fejn hemm bżonn. Formoli mingħajr firma mhumiex aċċettati.

Do not forget to sign where necessary. Forms without signatures will not be accepted.

GHALL-UŻU UFFIĊJALI BISS FOR OFFICIAL USE ONLY

Id-Data meta n-Notifika waslet id-Direttorat: _____

Valida

Aktar Informazzjoni

Invalida

In-Numru tal-Applikazzjoni: _____ Id-Data meta giet proċessata _____

Id-Data ta' Skadenza: _____ Id-Data ta' Aggornament _____