Notes: Please refer to Vocational Fund leaflet before completing this form.

Applications will only be considered meeting Prerequisites: Gozo Resident ⎕References ⎕Complete form⎕ Maltese national⎕

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| **Personal information** |
| **Names and surname** |  | DOB | ID No  |  |
| **Address** |  | Nationality  | Country of residence  |  |
| **Contact**  | Mobile Landline | E-mail  |  |
| **Relevant qualifications: school, college or university, apprenticeship etc** |  |  |  |
| **Additional skills you wish to highlight** | Languages (list) | Other |  |
| **Work experience**  |  |
| Provide a brief outline of the work experience you have had to date. List each employer, job title(s) and dates of employment. Include your current job.What other achievements not to do with education or work are you particularly proud of, such as community activities, sports etc? |  |
| Career objectives |  |
| Describe your career or work objectives for the next few years. What would you like to be doing in five years’ time? And where eg Gozo, Malta, overseas?What steps have you already taken to achieve your career objectives?What (if any) are the remaining barriers to your achieving those objectives? |

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| How can the Vocational Fund help? |
| What support would you like from the Fund? Describe clearly what you are looking for eg support for a short course of study or vocational training, or books, equipment, tools, or mentoring etc. You must also provide some detail eg if a course of study, what course, when and where and what is the cost. If books or tools, detail what is needed and the likely cost etc. Remember that the Fund is not about ongoing support, but for something very specific. Also that any money goes not to you but to whoever provides the courses, books etc.Describe how this Vocational Fund support will *directly* help you to meet the career objectives you have outlined above. |

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| References  |
| Provide the names of two referees who can support this application. They must live on Gozo and must not be related to you. They could be teachers, doctors, lawyers, priests etc. If they are retired mark with \* against their profession details |
| Name  | Profession | Tel No  | E-mail  |
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|  |  |  |  |

I confirm that these nominees are aware of my application to the Vocational Fund. Yes/No

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| Declaration  |
| I hereby submit my application for consideration by the Gozo Vocational Fund.I accept for my personal information to be treated in conformity with the Data Protection Act currently applicable in Malta. Yes/NoI confirm that I am not related to a member of any Rotary Club either in Gozo or Malta, nor to the best of my knowledge do I have a relative in an overseas Rotary Club. Yes/NoI confirm that I am a Maltese national and resident in Gozo. Yes/No |
| **Name**  |  |
| **Signature**  |  |
| **Date**  |  |

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| Next Steps |

1. Post a hard copy of this form duly signed to the President of Rotary Club Malta:

"Victoria" Triq Frangisk u Roza Camilleri, Kercem, KCM1126. Gozo.
Also please e-mail this completed form (without signatures) to president@rotarygozo.org

1. Your application will be acknowledged. We may request additional information/clarification at this stage.
2. A panel will then consider your application. We may invite you for a personal interview as part of this process.
3. We will then advise you of our decision. The panel’s decision is final and not subject to appeal.

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| Panel comments  |
| Application received date:  |
| **Additional information required?** | Yes /No  | Comments  |
| **Invite for interview?** | Yes/No | Comments  |
| **Approve for Grant**  | Yes /No  | Amount € |
| **Panel Approval**  | Chairperson Johanna Marks | Representative of the Ministry  | John Gilbert |

Following approval, the applicant will be required to confirm in writing to whom the grant is payable and there must be a suitable mechanism in place to ensure that a receipt or other proof of expenditure is provided.