



MALTA

*Dipartiment tar-Relazzjonijiet  
Industrijali u tal-Impjeg*

*Department of Industrial  
and Employment Relations*

**FORM No. 1  
(Regulation 3)**

**APPLICATION FOR THE REGISTRATION OF A TRADE UNION OR  
EMPLOYERS' ASSOCIATION**

- TRADE UNION**  
 **EMPLOYERS' ASSOCIATION**

*Mark where applicable*

To the Registrar of Trade Unions,  
Valletta

1. This application is made by the seven persons whose names and respective signatures are included in the rules attached.
2. The name under which it is proposed that the trade union / employers association, on behalf of which this application is being made, shall be registered is .....  
.....  
as set forth in rule no. ....

To the best of our belief there is no other existing trade union / employers association, the name of which is identical with the proposed name or so nearly resembles the same as to be likely to cause confusion.

3. The address to which all communication and notices may be sent is .....  
.....
4. The trade union / employers association was established on the .....  
day of .....



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5. All of the objectives for which the trade union / employers association is established are set forth in rule No. ....
6. The rules of the trade union / employers association provide for all matters required by the Employment and Industrial Relations Act (Cap 452);
7. The total number of members of the trade union / employers association is ..... of whom ..... are below the age of sixteen;
8. The full name, age, and address of the applicants indicated in No. 1 above are given below:

Applicant Number 1:

Name: .....  
Surname: .....  
Age: .....  
Address: .....

Applicant Number 2:

Name: .....  
Surname: .....  
Age: .....  
Address: .....

Applicant Number 3:

Name: .....  
Surname: .....  
Age: .....  
Address: .....



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Applicant Number 4:

Name: .....  
Surname: .....  
Age: .....  
Address: .....

Applicant Number 5:

Name: .....  
Surname: .....  
Age: .....  
Address: .....

Applicant Number 6:

Name: .....  
Surname: .....  
Age: .....  
Address: .....

Applicant Number 7:

Name: .....  
Surname: .....  
Age: .....  
Address: .....

9. The full name, age, address and particular designation (e.g. President, Secretary, Treasurer etc.) of each officer of the trade union/employers` association are given below:

Officer Number 1:

Name: .....  
Surname: .....  
Age: .....  
Address: .....  
Designation: .....



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Officer Number 2:

Name: .....  
Surname: .....  
Age: .....  
Address: .....  
Designation: .....

Officer Number 3:

Name: .....  
Surname: .....  
Age: .....  
Address: .....  
Designation: .....

Officer Number 4:

Name: .....  
Surname: .....  
Age: .....  
Address: .....  
Designation: .....

Officer Number 5:

Name: .....  
Surname: .....  
Age: .....  
Address: .....  
Designation: .....

MINISTERU GHALL-AFFARIJJIET EWROPEJ U  
L-UGWALJANZA



MINISTRY FOR EUROPEAN AFFAIRS AND  
EQUALITY

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10. Attached to this application are:-
- a) One printed copy of the rules signed by the seven applicants;
  - b) One list of members showing name, age (if under sixteen years) and address of each member, accompanied by the relative signed enrolment forms.

**Data Protection Policy, Department of Industrial and Employment Relations:** In accordance with the General Data Protection Regulation (EU) 2016/679 and the Data Protection Act (Cap. 440), all the information requested is necessary for making this declaration. An exception to this is data that the Employment and Industrial Relations Act (Cap. 452) demands to be published on a public register. You have the right to access and amend your personal data. Any queries regarding the Data Protection Policy are to be addressed to: **Department of Industrial and Employment Relations 121 Melita Street Valletta VLT 1121 Tel (+356) 21 224245/6.**

121, MELITA STREET, VALLETTA, VLT 1121  
TELEPHONE: 21 224245/6; EMAIL: [info.dier@gov.mt](mailto:info.dier@gov.mt)  
WEBSITE: <http://dier.gov.mt>