GVERN TA' MALTA
MINISTERU GĦALL-EDUKAZZJONI U L-ISPORT
DIPARTIMENT GĦALL-KURRIKULU, TAGĦLIM TUL IL-ĦAJJA, U IMPJEGABILITA



GOVERNMENT OF MALTA
MINISTRY FOR EDUCATION AND SPORT
DIPARTMENT FOR CURRICULUM, LIFELONG LEARNING AND EMPLOYABILITY

Non-Formal After-School Activities: Organisations

Name of student: _____ *Scholastic Year:* _____

Name of organisation: _____

Member of: _____

_____ | | | | | | | | |

Organisation's Stamp *SLC Number*

The student has been a member of this organisation for ☐ *weeks/months/years.*

The student has been attending regularly.* ☐ *Yes* ☐ *No*
**not less than 85% attendance*

Activities which the student actively participated within the organisation:

_____

_____

_____

ORGANISATION: Declaration Form

I, _____ ID Number _____, who holds the position of _____ within the above mentioned organisation, declare that the information provided above is correct.

_____
Signature

PARENT/GUARDIAN:

Name and surname of parent/guardian of student: _____

_____ _____
Signature ID Number

The information provided shall be processed in accordance with the provisions of the General Data Protection Regulation (EU) 2016/679 and the Data Protection Act (Cap 586) and processed for the purpose(s) of the Secondary School Qualification and Profile (SSQ&P)