APPLICATION FOR
AN ELT SCHOOL LICENCE RENEWAL
$\square$
ELT School Licence No.
(Administrative use only)

## SECTION A: GENERAL INFORMATION WRITE IN BLOCK LETTERS

| A1 | Date of Submission <br> Please update the date as <br> applicable |  |
| :--- | :--- | :--- |
| A2 | Name and Surname <br> of the contact person |  |
| A3 | Contact person position <br> within the ELT School |  |
| A4 | Email address <br> of the contact person |  |
| A5 | Telephone and/or Mobile <br> of the contact person |  |

## SECTION B: OWNER/S

WRITE IN BLOCK LETTERS

B1
Owner/s's Name and
Surname

Please include a copy of either the ID Card or Passport
B2
Tick this box if copy (front and back) of the ID Card is attached $\square$ with this application form

## SECTION C: GENERAL DETAILS

WRITE IN BLOCK LETTERS

| C1 | Full Name of the ELT School <br> The name indicated here shall be the name used <br> in all media, advertising, published material or <br> promotional material |
| :--- | :--- | :--- |
| C2 | Main Office Address <br> The office address provided is to be based in <br> Malta. |
| C3 |  |
| Licensed Annexe <br> Annexe Licence, name and address. |  |
| Kindly provide a copy of the Memorandum of Understanding and/or contract <br> that the main ELT School holds with the hosting venue. <br> This is to be provided for every venue listed UNLESS PROPERTY IS OWNED BY THE PROVIDER. |  |

## SECTION D: BODY CORPORATE

This is not a prerequisite for those applying under the category 'Further Education Centre' and 'Tuition Centre'. WRITE IN BLOCK LETTERS

| D1 | Registration Number of the Body <br> Corporate |  |  |
| :--- | :--- | :--- | :--- | :--- |
| D2 | Registered/Official Address |  |  |
|  |  |  |  |

SECTION E: LEGAL REPRESENTATION WRITE IN BLOCK LETTERS

| E1 | Name \& Surname of <br> Legal Representative |  |
| :--- | :--- | :--- | :--- |
|  | The person appointed shall be based in Malta and authorised to enter into legally binding agreements on behalf of the <br> institution. <br> The Head may also be appointed as the legal representative of the Education Institution if $s /$ he is based in Malta. |  |
| E2 | Please include a copy of <br> either the ID Card or Passport | Tick this box if copy (front and back) of the ID Card <br> is attached with this application form. |
| E3 | Office address of the Legal <br> Representative |  |
| E4 | Email address of the Legal <br> Representative |  |

SECTION F: HEAD OF SCHOOL
WRITE IN BLOCK LETTERS

| F1 | Name \& Surname of the <br> Head of the Institution |  |  |
| :--- | :--- | :--- | :--- |
| F2 | ID Card/Passport <br> A copy of the ID Card (back and front) or passport is to be attached with this application form. |  |  |
| F3 | Email Address |  |  |
| F4 | Contact Number |  | Attach an updated CV <br> of the Head of School. |
| F5 | Current Head's Curriculum Vitae (CV) <br> The CV must include information regarding the prospective Head of Institution's <br> qualification/s, training and work experience/employment history |  |  |

SECTION G: DIRECTOR OF STUDIES WRITE IN BLOCK LETTERS

| G1 | Name \& Surname of the <br> Director of Studies |  |  |
| :--- | :--- | :--- | :--- |
| G2 | ID Card/Passport <br> A copy of the ID Card (back and front) or passport is to be attached with this application form. |  |  |
| G3 | Email Address |  |  |
| G4 | Contact Number |  |  |
| G5 | Current Director of Studies' Curriculum Vitae (CV) <br> The CV must thclude information regarding the prospective Head of Institution's <br> qualification/s, training and work experience/employment history | Attach an updated CV of <br> the Director of Studies. |  |

SECTION H: NON-ACADEMIC HEAD
WRITE IN BLOCK LETTERS

| H1 | Name \& Surname of the <br> Non-Academic Head |  |  |
| :--- | :--- | :--- | :--- |
| H2 | ID Card/Passport <br> A copy of the ID Card (back and front) or passport is to be attached with this application form. |  |  |
| H3 | Email Address |  |  |
| H4 | Contact Number |  |  |
| H5 | Current Non-Academic Head's Curriculum Vitae (CV) <br> The CV must include information regarding the prospective Head of Institution's <br> qualification/s, training and work experience/employment history | Attach an updated CV <br> of the Non-Academic <br> Head. |  |

## SECTION I: LIST OF COURSES OFFERED

WRITE IN BLOCK LETTERS

| Course Type | No of <br> Lessons <br> Per Week | Frequency <br> Per Annum | Duration <br> Per Course | Day/ <br> Evening <br> Per Course | Maximum <br> Classroom <br> Capacity |
| :--- | :--- | :--- | :--- | :--- | :--- |
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## SECTION J: LIST OF ACCREDITATION EXAM BODIES YOU ARE AFFILIATED WITH WRITE IN BLOCK LETTERS

If affiliated with any international organization, accredited by a recognised local or international

J1 accrediting body, or certified as an examination centre for ELT-related exams, provide a list of the organizations with which you are affiliated.

## SECTION K: EMPLOYMENT LICENCE

| K1 | All employees have a contract | Yes | No |
| :--- | :--- | :---: | :---: |
| K2 | All TCN's have a work permit |  |  |
| K3 | All teachers have a valid ELT Permit |  |  |

## SECTION L: SCHOOL PREMISES WRITE IN BLOCK LETTERS WHERE APPLICABLE

A health and safety declaration by a competent Occupational Health and Safety Officer, dating not more than 2 months from the date of submission, declaring that the school premises and its facilities are free from hazards to safety in line with the provisions set out in CHAPTER 424 OCCUPATIONAL HEALTH AND SAFETY AUTHORITY ACT (applicable for main school only).

Tick box to confirm that the declaration is attached with the document.


1. The declaration submitted is to include the postal address of the school premises and the signature of the health and safety officer.

## L2 Classrooms

|  | Room Identification | Maximum number of <br> Student Placed | Area (m2) |
| :--- | :--- | :--- | :--- |
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| L3 | Give the maximum number of stu accommodate at any one time of |  |  |
| L4 | Your premises include the followi |  |  |
|  | Space/Facilities | Yes | No |
|  | Offices |  |  |
|  | Garden |  |  |
|  | Cafeteria |  |  |
|  | Library |  |  |
|  | Hall |  |  |
|  | Teachers' Room |  |  |
|  | Reception Area |  |  |
|  | Audiovisual Room |  |  |
|  | List other space/facilities below: |  |  |
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## SECTION M: ONLINE/BLENDED PROVISION

|  |  | Yes | No |
| :---: | :---: | :---: | :---: |
| M1 | Do you also offer online/blended learning besides face-to-face? |  |  |
|  | If yes, indicate the platform in use. <br> Include all the URL (internet address/es and/or web address/es) and social any social media channel/s that will be utilised by ELT institution applying for this licence. |  |  |
| M2 | Learning Management System/Virtual Learning Environment |  |  |
|  | The school confirms that LMS/VLE and any other digital tools used for teaching and learning adhere to the criteria established by the ELT Council. |  |  |
| M3 | Human Resources |  |  |
|  | All persons involved in the e-learning are adequately qualified, and provide adequate support to learners. |  |  |
| M4 | Technical Infrastructure |  |  |
|  | All technical infrastructure for e-learning guarantees data security and availability. |  |  |
| M5 | Privacy \& Security |  |  |
|  | The school guarantees the privacy and security of all student data held within its premises. |  |  |
| M6 | Contact Hours |  |  |
|  | The school has adequate procedures in place to ensure that all students receive direct instructions from tutors. |  |  |
| M7 | Assessment |  |  |
|  | Assessment activities support learning as well as verify learning achievement of learning objectives in a secure manner. |  |  |
| M8 | Verification of Identity |  |  |
|  | The school verifies the identity of all students in its courses, as well as ensures that certificates are issued to individuals who have completed the work and achieved the required grades. |  |  |

## SECTION N: LICENCE CATEGORIES AND FEES

Fees are to be settled upon receiving the invoice from the ELT Council, a process that takes place after the application has been thoroughly reviewed and accepted.

| Applicable for ELT Schools ONLY |
| :---: |
| CATEGORY A SCHOOLS PAY €100 (not more than 2,400 student weeks in the preceding year) |
| CATEGORY B SCHOOLS PAY €200 <br> (between 2,400 and 7,200 student weeks in the preceding year) |
| CATEGORY C SCHOOLS PAY €300 <br> (between 7,200 and 12,000 student weeks in the preceding year) |
| CATEGORY D SCHOOLS PAY €400 <br> (more than 12,000 student weeks in the preceding year) |

## SECTION O: DECLARATION

We acknowledge that:
i. We understand that the personal data provided on this form will be processed in accordance with the principles of General Data Protection Regulation (EU 2016/679) and the Data Protection Act (CAP440). Personal data will not be shared with third parties without your consent unless authorised by law, or processed for reasons incompatible from those for which it was originally collected. You have the right to access the information being kept about you at any time. For more information, please refer to our Data Protection and Retention Policies found on our website: eltcouncil.gov.mt
ii. We assume the responsibility to inform the ELT Council of any changes to our circumstances (e.g., address, contact details) while our application is being considered.
iii. We confirm that the information supplied in this form is complete, correct and up to date. Any information which is incorrect or misleading may lead to the rejection of the application, the eventual withdrawal of the licence if it has been already issued and legal action.

| O1 | Signature of Owner/s |  |
| :--- | :--- | :--- |
| O2 | Signature of Head of School |  |
| 03 | Signature of the Legal Representative |  |
| 04 | Date of Application |  |

A signed copy of the application form, together with the required documentation, needs to be sent to info.eltcouncil@gov.mt at least one month prior to the license's expiration date.

