



# INSTITUTE FOR PASTORAL MINISTRY

## Application Form – Award in Archive Up-keeping and Documents' Conservation

Please fill in block letters.

1. First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

2. Postal Address: \_\_\_\_\_

\_\_\_\_\_

3. Email Address: \_\_\_\_\_

4. Date of Birth (day) \_\_\_\_\_ / (month) \_\_\_\_\_ / (year) \_\_\_\_\_

5. Gender: Male

Female

6. Identity Card No. \_\_\_\_\_

7. Contact Number: \_\_\_\_\_

8. Parish/Organization/Occupation: \_\_\_\_\_

9. Any special needs/requirements: Yes

No

If yes, kindly explain: \_\_\_\_\_

\_\_\_\_\_

**Academic Qualifications - Secondary Education/School leaving certificate/Ordinary Level Certificate**

Name of School / Institution \_\_\_\_\_

**Academic Qualifications – Post Secondary/Vocational School**

Name of Institution \_\_\_\_\_

**Academic Qualifications – Other Certificates**

Name of College/University/Institution \_\_\_\_\_

Qualification \_\_\_\_\_

Name of College/University/Institution \_\_\_\_\_

Qualification \_\_\_\_\_

**Please include the follow when returning this form:**

1. A copy of the relevant certificates/Diplomas mentioned above.
2. A copy of Identity Document.

**Course fee**

The payment of €80 for this course (together with this application form) must be submitted by **Wednesday 26th of March 2025**. Payments are accepted by cheque payable to the Diocese of Gozo. Payments may also be made through bank transfer to APS Account: Gozo Diocese Operations, IBAN: MT24APSB77035000670820001176013. When paying using bank transfer kindly provide your name, surname and course name in the payment details section.

Late applications will be accepted until Friday 4<sup>th</sup> of April 2025 together with a fee of €90.

**Please return completed application forms with all necessary attachments and payment to:**

- Gozo Curia Receptions: B.O. Box 1, Triq ir-Repubblika, Victoria VCT 1000, Gozo

## **Data protection**

To comply with the General Data Protection Regulation (GDPR) 2016/279, the Data Protection Act (Cap 586), the Education Act (S.L.440.09 – 2015) and its subsidiary legislation, the Diocese requires your permission to collect, process and store your personal data.

Your data will only be used for training and promotional purposes related to the work of the Diocese of Gozo / IPM. Your data will not be used for any other purpose or passed on to third parties.

Please tick the option for each of the statements below:

I grant permission for my data to be collected and processed (e.g. name and surname, I.D. card number, contact telephone numbers, address and email address).

Yes

No

I grant permission for my photographs to be used in printed publications the Diocese produces for promotional purposes.

Yes

No

I grant permission for my image and/or video recordings to be used on the website and social media pages of the Institute for Pastoral Ministry, of the Diocese and of entities related to it.

Yes

No

### **Declaration**

I hereby certify that all the information given on this form is correct and that I confirm that I have read and understood the information in the Student Agreement. Should I be admitted as a student, I agree to uphold and ideals, standards and regulation set forth by the Institute For Pastoral Ministry to respect the principles and traditions it upholds as a Church-related institution for Further Education

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## **Notification of Acceptance**

If accepted, you will be notified in writing via email using the same email address that you provided in this application form. If an email address isn't provided, you will be notified via postal address / contact telephone number.