Ref.: ESF+.03.246 / ***Lifelong Learning as a Key to Better Governance at a Regional and Local Level***

Application Form

EMPOWER

Professional Development Sponsorship Programme for Local Government

ESF+.03.246 – *Lifelong Learning as a Key to Better Governance at a Regional and Local Level*

Date of issue: 30th September 2025

VERSION 2
Date of issue: 19th February 2026

VERSION 3
Date of issue: 12th November 2026

Co-funded by the European Union

1. Personal Details

Name	
Surname	
ID Card	
Date of Birth (*DD/MM/YYYY)*	
Address	
Town / City	
Post Code	
Mobile Number	

AGE GROUP

☐ 18-24	☐ 25-54	☐ 55-64	☐ 65+

GENDER (as per ID card)

☐ Male (M)	☐ Female (F)	☐ Non-binary (X)

RESIDENCE (as per ID card)

☐ Malta	☐ Gozo

2. Employment Details

a. Applicable for the Elected Members

President / Mayor / Deputy Mayor / Councillor	
Council	
Contact Number	
Email Address	

b. Applicable for the Executive Secretaries

Council or Local Councils Association	
Contact Number	
Email Address	

c. Applicable for the Regional, Local Council and the Local Councils Association Administrative and Clerical Personnel

Council or Local Councils Association	
Position	
Contact Number	
Email Address	

d. Applicable for the Local Government Division Administrative and Clerical Personnel

Position	
Department	
Contact Number	
Email Address	

e. Applicable for the Applicants nominated by the Permanent Secretary for Local Government and Public Works

Position	
Department	
Contact Number	
Email Address	

3. Programme Details

a. Type of training event: (*please choose one)*

- ☐ Short course
- ☐ Master class
- ☐ Conference
- ☐ Seminar
- ☐ Workshop
- ☐ Networking
- ☐ On-the-job training
- ☐ Internship
- ☐ Job-shadowing
- ☐ Mentoring Programme
- ☐ Continuous Professional Development Modules
- ☐ Certification Programmes
- ☐ Similar (please specify):

b. Training Modality *(choose as relevant – where applicable)*

- ☐ Local
- ☐ Abroad
- ☐ In-person
- ☐ Online
- ☐ Hybrid

N.B. In the case of training held abroad, and for the purpose of processing the applicable subsistence allowance and any contingency expenses, applicants are kindly requested to provide their IBAN and account number details below.

IBAN Number	
Account Number	

4. Area addressed: (*please choose the most relevant - see Section 4 of the Call for Applications for full descriptions)*

- ☐ Area 1: Human Resources and Administration within the Frameworks of Central, Regional and Local Governance
- ☐ Area 2: Leadership, Management, Strategic Planning, Foresight and Change
- ☐ Area 3: Policy Formulation
- ☐ Area 4: Decision-making
- ☐ Area 5: Procurement
- ☐ Area 6: Financial Management and Accounting
- ☐ Area 7: Good Governance, Ethics and integrity
- ☐ Area 8: European Union Affairs
- ☐ Area 9: Artificial Intelligence
- ☐ Area 10: Innovation
- ☐ Area 11: Information and Communication Technology
- ☐ Area 12: Customer Care
- ☐ Area 13: Integration and Inclusion Policies
- ☐ Area 14: Inter- and Intra-Personal Relationships
- ☐ Area 15: Public Speaking and Speech Writing
- ☐ Area 16: Any other relevant field

Title of training event	
Explain the event's relevance to your duties and how it will benefit your entity in general	
Registration / Participation Fee *(if applicable)*	
Country of training event *(if applicable)*	
Start Date[1] [2] *(Date of departure if travelling abroad)*	
End Date[1] [2] *(Date of arrival if travelling abroad)*	
Training event Organiser	
Contact Person *(if applicable)*	
Contact Person's email *(if applicable)*	

[1] Refer to Section 5.3 of the Call for Applications.

[2] All training must be successfully completed between 30th September 2025 and 31st October 2028. Training abroad must not exceed two weeks. Online training must not exceed 80 contact hours and can be distributed over multiple weeks, provided it is completed within the Call's timeline.

5. Application for other EU or National financial sources

Have you applied for or been awarded any other grant or sponsorship for the same training activity from other national or EU funding sources?

☐ Yes	☐ No

If yes, please provide details:

6. Supporting Material

You are kindly requested to support your application with the following documentation:

Document	Attached
(i) Completed and signed application form, endorsed by the appropriate authority, depending on the applicant's place of employment or position.	☐
(ii) Agenda or programme of activities.	☐
(iii) a. A proforma invoice from the organiser, specifying the participation/registration fees and clearly indicating the VAT amount. The proforma invoice is to include the bank details of the event organiser. b. In cases where a proforma invoice is not available, provide alternative supporting documentation that clearly and explicitly specifies the participation fee and indicates the corresponding VAT amount. The supporting documentation is to include the bank details of the event organiser.	☐
(iv) In cases of applicants nominated directly by the Permanent Secretary for Local Government and Public Works, provide an accompanying nomination letter, duly signed by the same Permanent Secretary responsible for Local Government, confirming the applicant's nomination and setting out the anticipated contribution and benefit of such participation to the Local Government sector	☐
(v) In cases of in-person training abroad, provide a copy of the Identity Card or Passport.	☐
(vi) In cases of in-person training abroad, provide the personal bank details (IBAN and Account Number) for the subsistence allowance and contingency payments.	☐
(vii) Completed ESF+ Participant Data Collection Form (template provided by LGD).	☐

IMPORTANT: The maximum grant contribution per applicant is **€4,000**[3]. Any costs exceeding this amount must be covered by the applicant and/or by the applicant's organisation.

7. Applicant's Declaration

I, the undersigned, confirm that I am eligible to participate in this ESF+ project. I certify that all information provided in this application, including the ESF+ Participant Data Collection Form, is accurate and complete to the best of my knowledge.

I declare that:

- I consent to be contacted by Local Government Division (LGD), the Planning and Priorities Coordination Division (PPCD), or their representatives during and after my participation in the ESF+ project for monitoring, evaluation, or feedback purposes.
- I will immediately inform Local Government Division if I am awarded any other grant or sponsorship for the same training applied for herein.
- I understand that providing inaccurate information or failing to meet eligibility criteria as a public sector employee may result in the withdrawal of funding or recovery of funds already disbursed.
- I confirm that I am not receiving public funding for the same training activity from any other national or EU-funded programme. I understand that double funding is not permitted and may result in the withdrawal of this grant and recovery of funds.
- I commit to participating fully in the training programme and adhering to its requirements, including submission of required documentation (e.g. attendance records, certificates, photographic and/or videographic evidence of training attended, or proof of travel).
- I understand that the maximum grant contribution under this Call is capped at €4,000 per applicant, and any costs exceeding this amount will be covered by me and/or by my organisation.
- I confirm that I have read and understood the information regarding eligible costs and reimbursement procedures as specified in the Call for Applications.
- I acknowledge that I may be granted access to more than one Professional Development Sponsorship under the Project; however, no applicant shall be eligible to benefit from a second sponsorship within the first two (2) years of the Project's implementation[4], unless the applicant has been directly nominated by the Permanent Secretary for Local Government and Public Works in terms of clause 5.2.1(e) and clause 5.11 of the Call for Applications. I also acknowledge that upon completion of the initial two (2) years, any eligible applicant who has previously benefitted from a sponsorship shall be permitted to submit a new application and that from that point onward, no further restrictions shall apply with respect to the number of subsequent applications, save for limitations imposed by the availability of budgetary resources.

Applicant's Signature: **Date:**

[3] The specified capping may be subject to revision at any time during the implementation period of the Project.
[4] This two (2) year period may be revised in accordance with the exigencies of the Project's implementation process.

8. Nomination, endorsement or attestation by the appropriate authority

This application must be endorsed or attested by the appropriate authority, depending on the applicant's place of employment, position or status. Tick one from the below:

☐ ***Option A – Local Government Division Personnel:*** *Endorsement by the respective Director or Head s/he reports to.*

☐ ***Option B*** *–* ***Executive Secretaries:*** *Endorsement by the President or Mayor (as applicable).*

☐ ***Option C – Administrative and Clerical Personnel of the Regional and Local Councils and of the Local Councils Association:*** *Endorsement by the Executive Secretary*

☐ ***Option D – Elected Members of the Regional and Local Councils and of the Local Councils Association****: Attestation of status by a Headship Official within the Local Government Division*[5]*.*

☐ ***Option E – Applicants nominated by the Permanent Secretary for Local Government and Public Works:*** *Nomination duly signed by the same Permanent Secretary responsible for Local Government, confirming the applicant's nomination and setting out the anticipated contribution and benefit of such participation to the Local Government sector.*

By signing below, I confirm that:

☐ **In the case of Executive Secretaries, Administrative and Clerical Staff of Regional and Local Councils, of the Local Councils Association, of the Local Government Division or nominated by the Permanent Secretary for Local Government and Public Works**:

- *the training applied for is relevant to the applicant's role within our organisation and aligns with the objectives of the Call for Applications; and*
- *the applicant is currently employed under a valid contractual arrangement that meets the eligibility criteria defined in the Call for Applications.*

☐ **In the case of Elected Members of Regional and Local Councils and of the Local Councils Association**:

- *the applicant is currently an elected member of a Regional or Local Council or of the Local Councils Association.*

Name, Surname And Stamp/Position:

Signature:

[5] The application is to be sent to the HR Department of the Local Government Division on hr.dlg@gov.mt. A Headship Official will attest to the applicant's status, and the application form will be re-sent to the respective applicant.

9. Data Protection Disclaimer

Personal data provided in this application, including the ESF+ Participant Data Collection Form, will be used by Local Government Division (LGD) and the Planning and Priorities Coordination Division (PPCD) to manage your participation in the ESF+ project, maintain records, and monitor and evaluate its outcomes. Only anonymized statistical data will be shared with the European Commission.

*Your data will be handled with strict confidentiality and may be shared with authorized third parties solely for project monitoring and evaluation. It will **not** be used for any other purpose or made public.*