

## APPENDIX B

### APPLICATION FORM TO APPLY FOR FUNDS TO ATTEND A SEMINAR/COURSE/CONFERENCE LOCALLY OR ABROAD

Date: \_\_\_\_\_

Ref: \_\_\_\_\_

Date Received: \_\_\_\_\_

(For Internal use only)

*Sections A to D are to be filled in by the applicant requesting funds for course/conferences/seminars organised locally or abroad. Section E is to be endorsed by Director/Head/Line Manager and Director General if applicable.*

#### SECTION A

Details of Directorate/ Department/Entity/School of the applicant	
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Name of Applicant	Designation	Contact e-mail	Office Tel. No.	Mobile No.

#### SECTION B

Tick Where Applicable:	<input type="checkbox"/> Seminar <input type="checkbox"/> Course <input type="checkbox"/> Conference
Title of Seminar/Course/Conference:	
Country & Location:	
Short description of Seminar/Course/Conference	

(Attach copy of programme/agenda to this application)	
Date/s of Seminar/Course/Conference:	
Organiser of Seminar/Course/Conference:	
Objectives of Seminar/Course/Conference:	
Relevance to the implementation of MEDE's objectives: (Please tick accordingly)	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>
This Seminar/Course/Conference is: (Please tick accordingly)	Mandatory/Obligatory <input type="checkbox"/> Voluntary <input type="checkbox"/> Self-Sought <input type="checkbox"/> Delegated <input type="checkbox"/>

## SECTION C

### Breakdown of Costs

It is <b>obligatory</b> for this section to be completed as applicable	Required Documentation	Cost Per Person	Total
Cost of Seminar/Conference/Course	Proof of cost (e.g. screenshot, invoice, email etc.)	€	€
Other		€	€
<i>*To be completed if seminar/conference/course involves travel</i>		€	€
*Flights (See Note 1)	Three (3) quotes	€	€
*Subsistence per night €__ x __no of nights (See Note 2)		€	€
*Airport Transfers (at destination from airport to hotel and vice-versa)		€	€
*Travel Insurance (if required)	Three (3) quotes	€	€
*Other		€	€
<b>TOTAL EXPENSE</b>		€	€

## SECTION D

Indicate when and how you will disseminate the information:	
What are the benefits of this dissemination of information:	
Signature of applicant:  Date:	

## SECTION E

**To be completed by the Director/Head/Line Manager**

How would this seminar/course support the implementation of the Ministry's objectives, including the education strategy framework 2014 – 2024 and other MEDE's plans:	
Total number of employees under your management attending this Seminar/Course/Conference:	
Signature of Director/Head/Line Manager (including Rubber stamp):  Date:	
Endorsement by Director General (if applicable):  Date:	

## SECTION F

### To be completed by the Senior Manager Administration

<p>I confirm that the proposed quotation provided for the supplier is fair, reasonable and in terms of policy MFIN Circular 3/2013 Sec E.</p>	<p>Approved <input type="checkbox"/>      Not Approved <input type="checkbox"/></p> <p>For the funding application process this form is being used instead of the direct order form, I confirm that the amounts are being approved according to the legislation and policy notes with respect to public procurement.</p>
<p>Signature (including Rubber stamp):</p> <p>Date:</p>	

### To be completed by the CEO Institute for Education

<p>Recommendation</p>	<p>Yes <input type="checkbox"/>      No <input type="checkbox"/></p>
<p>Signature (including Rubber stamp):</p> <p>Date:</p>	

### To be completed by the Head of Finance

<p>I confirm that funds are available within the IFE Budget for the year</p>	<p>Yes <input type="checkbox"/>      No <input type="checkbox"/></p>
<p>Signature (including Rubber stamp):</p> <p>Date:</p>	

<p><b>Permanent Secretary Approval</b></p> <p><i>(applicable if funding is above €10,000 and/or includes travel)</i></p> <p>Signature:</p> <p>Rubber Stamp:</p> <p>Date:</p>	<p>Approved <input type="checkbox"/>      Not Approved <input type="checkbox"/></p>
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## Checklist of Documentation to be submitted with application

*Tick where applicable:*

- Agenda / Programme of Seminar/Course/Conference;
- Proof of cost of event fee (e.g. screenshot, invoice, email etc.);
- Three (3) quotes for flight;
- Three (3) quotes for insurance (if applicable).

### Note 1: Schedule of reimbursement in connection to travel abroad

It is obligatory to submit three quotes for flights with the submission of application. IfE will fund up to the value of the cheapest quote provided that said value does not exceed the threshold listed hereunder.

<b>Travel distances</b>	<b>Amount</b>
Between 10 and 99 KM:	20 EUR per participant
Between 100 and 499 KM:	180 EUR per participant
Between 500 and 1999 KM:	275 EUR per participant
Between 2000 and 2999 KM:	360 EUR per participant
Between 3000 and 3999 KM:	530 EUR per participant
Between 4000 and 7999 KM:	820 EUR per participant
8000 KM or more:	1300 EUR per participant

Based on the travel distance per participant. Travel distances must be calculated using the distance calculator supported by the European Commission [https://ec.europa.eu/programmes/erasmus-plus/resources/distance-calculator\\_en](https://ec.europa.eu/programmes/erasmus-plus/resources/distance-calculator_en)

Considering that Malta is one of the outermost regions and the constraints imposed by the remoteness for flight values exceeding the limitations set in the table above, the Institute may consider funding 80% of the residual value up to a maximum of €200.

## Note 2: Subsistence

IfE will subsidise up to a maximum of one (1) night prior to the event and one (1) night post event and the nights in between should the duration of the conference be longer than one (1) day.

*\*Subsistence Allowance Salary Scale Class A: 1- 5 Class B from 6 – 20*

Per Diem Allowance For COUNTRY	RATE	
	Class A €	Class B €
ALBANIA	180	162
ALGERIA	303	273
ARGENTINA	339	305
AUSTRALIA	254	229
AUSTRIA	225	203
BAHAMAS	348	313
BAHRAIN	305	275
BANGLADESH	103	93
BELGIUM	242	218
BOSNIA and HERZEGOVINA	145	131
BRAZIL	185	167
BULGARIA	227	204
CANADA	288	259
CHILE	238	214
CHINA	246	221
COLOMBIA	136	122
CROATIA	180	162
CUBA	193	174
CYPRUS	238	214
CZECH REPUBLIC	230	207
DENMARK	270	243
EGYPT	259	233
ESTONIA	181	163
ETHIOPIA	183	165
FINLAND	244	220
FRANCE	245	221
GEORGIA	174	157
GERMANY	208	187
GHANA	301	271
GREECE	222	200
HUNGARY	222	200
ICELAND	248	223
INDIA	152	137
INDONESIA	193	174
IRELAND	254	229
ISRAEL	356	320
ITALY	230	207
JAMAICA	277	249
JAPAN	224	202

JORDAN	224	202
KENYA	276	248
KOREA, REPUBLIC OF	368	331
KUWAIT	290	261
LATVIA	211	190
LEBANON	260	234
LIBYAN ARAB	191	172
LITHUANIA	183	165
LUXEMBOURG	237	213
MALAYSIA	182	164
MEXICO	300	270
MONACO	290	261
MOROCCO	187	168
NETHERLANDS	263	237
NEW ZEALAND	301	271
NIGERIA	201	181
NORWAY	245	221
OMAN	293	264
PAKISTAN	198	178
PHILIPPINES	207	186
POLAND	217	195
PORTUGAL	204	184
QATAR	347	312
ROMANIA	222	200
RUSSIAN FEDERATION	410	369
SAUDI ARABIA	396	356
SINGAPORE	391	352
SLOVAK REPUBLIC	205	185
SLOVENIA	180	162
SOMALIA	153	138
SOUTH AFRICA	174	157
SPAIN	212	191
SRI LANKA	188	169
SWEDEN	257	231
SWITZERLAND	361	325
SYRIAN ARAB REPUBLIC	173	156
TANZANIA, UNITED REP. of	191	172
THAILAND	197	177
TUNISIA	142	128
TURKEY ANKARRA	175	158
TURKEY ISTANBUL	237	213
UKRAINE	286	257
UNITED ARAB EMIRATES	327	294
UNITED KINGDOM	276	248
URUGUAY	237	213
USA	321	289
VENEZUELA	370	333



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