

Form No: 1/2024/IR/R56-001

Ministry of Higher Education, Labour and Skills Development

Malé, Republic of Maldives

وَم مُدُودُ دُرَّ مُرْمَهُمُ مِرْمَدُ رُسَرَمُهُمُ دُ مُبَرُدُ ذِرْدُ مُن فَعَيْمُ مُبَرِّدُ ذِرْدُ مُن فَعَيْمُ دُرْن مِرْدُرِيْرُهُ

APPLICATION FOR REGISTRATION OF TRADE UNION/EMPLOYERS' UNION

| Application for (mark where applicable): | | | | | | | | |
|--|--|--|---------|---------------------------------------|-------|--|--|--|
| ☐ Trade Union ☐ Employers Union | | | | | | | | |
| To: | The Registrar of Ur | nions, | | | _ | | | |
| 1. | We, | , with the below mentioned detailed as in Section A, apply for the | | | | | | |
| | registration of un | nion as at | | | | | | |
| 2. | The union was for | med on and had members at the time of formation. | | | | | | |
| 3. | This union is formed by [employers/workers] engaged in | | | | | | | |
| 4. | The physical address of the registered office of the trade union is at | | | | | | | |
| 5. | Name and details | and details of applicants: | | | | | | |
| | Name | ID/WP No | Address | Occupation / Job title and workplace* | Email | | | |
| 1. | | | | | | | | |
| 2. | | | | | | | | |
| 3. | | | | | | | | |
| 4. | | | | | | | | |
| 5. | | | | | | | | |
| 6. | | | | | | | | |
| 7. | | | _ | | | | | |

^{*} Applicants for Employer's union should indicate their representing workplace along with their job title

Section A: Details of the Union

| Name of Union | |
|---|-------------|
| Union name in Dhivehi | |
| Meaning / origin of name | |
| Abbreviation (if any) | |
| Focal Point (Name and contact details) | |
| Postal Address (if different from registered address) | |
| City/Island | Postcode |
| Phone No.1 | Phone No. 2 |
| Email address | |

Section B: Officers of the Union*

| Name | ID/WP No | Address | Occupation / Job title and workplace* | Title of the officer |
|------|----------|---------|---------------------------------------|----------------------|
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |
| 7. | | | | |
| | | | | |

^{*} Officers selected / elected for an interim period should be indicated as such. Upon the formal election of titular members, the Registrar should be notified formally with the details as above.

^{**} Officers of Employer's union should indicate their representing workplace along with their job title

Section C: Documents

- 1. Accompanying this application are:
 - 1.1. Union Constitution (reference Section23(c-1))
 - 1.2. Document / rent agreement authorizing address for the union office (reference Section 23(c-2))
 - 1.3. Registration Fee (reference Section 23 (c-6))
 - 1.4. Identity documents of the individuals listed in this application (Identity card copies or work permit card copies)
 - 1.5. In the case of employer unions, registration copies of entities joining together to form the proposed union.
 - 1.6. Resolution of general meeting authorizing signatories for this application.
 - 1.7. Separate list of the existing members (at the time of registration), identifying those under the age of 18, with the following details, and individual membership of the union as attached.
 - a) Name
 - b) ID card / WP Card number
 - c) Age
 - d) Address
 - e) Occupation / job title
 - f) Parent consent letter (if applicable)

Declaration

We certify that we are authorized to make this application upon resolution of general meeting of the existing members of the union, to make this application on its behalf, dated (date).

| [Name in block letters] | [Sign] |
|-------------------------|--------|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| 7. | |

NOTE:

The application form and accompanying documents should be mailed to union.registrar@mohe.gov.mv