INSTRUCTIONS

Do Not Write in This Space

or print in ink. Read carefully						NATION							
1. Family name First name Middle name Maiden name, if any													
2. Date Day Mo. of Birth	Yr.	3. Place of	Place of birth 4. Nationality (ies) at birth 5. Present					resent nation	nationality (ies)		6. Sex		
7. Height 8. Weight 9. Marital status: Single Married Separated Widow(er) Divorced Divorced													
10. Entry into United Nations service might require assignment and travel to any area of the world in which the United Nations might have responsibilities. Have you any disabilities which might limit your prospective field of work or your ability to engage in air travel? YES NO If "yes", please describe.													
11. Permanent address				Office E-mail:					Office Fax.	Telephone No. Fax. No			
Telephone No.			Telepho	ne/Fa	x No.								
15. Have you any dependents? YES □ NO □ If the answer is "yes", give the following information:													
NAME		Date of Birt	th Relatio	Relationship			NAME			Date of Birth		Re	lationship
16. Have you taken up legal permanent residence status in any country other than that of your nationality? YES NO If answer is "yes", which country?													
17. Have you taken any legal steps towards changing your present nationality? YES ☐ NO ☐ If answer is "yes", explain fully:													
18. Are any of your relative of the second				itional	organiz	ation?		☐ YES] NO			
If answer is "yes", give the following information: NAME					Relationship N			lame	of Internation	nal Organiz	zation		
					 								
19. What is your preferred field of work?													
20. Would you accept employment for less 21. Have you previously submitted an application for employment with U.N.?													
than six months YES NO if so when?													
22. KNOWLEDGE OF LANGUAGES. What is your mother tongue?													
READ No.			AD Not			RITE Not			SPEAK Not		UNDERST		TAND Not
OTHER LANGUAGES		Easily	Easily	Ea	sily	Easily		Easily	,	Easily	Easily	,	Easily
23. For clerical grades only Indicate speed in words per minute List any office machines or equipment you can use													
Typing	E	nglish	French	Oth	nerla	n g u a g e	s						
Shorthand	s full s	lotoilo N.D	Please give	avact t	itles of a	dograda in	oric	inal langua					

24. EDUCATIONAL. Give full details - N.B. Please give exact titles of degrees in original language. A. UNIVERSITY OR EQUIVALENT Please do not translate or equate to other degrees.

NAME, PLACE AND COUNTRY			D FROM/TO	DEGREES and ACADEMIC			MAIN COURSE OF STUDY		
		Mo./Year	Mo./Year Mo./Year		IONS OBTAI	NED	WAIN COOKSE OF STUDY		
B. SCHOOLS OR	OTHER FORMAL	TRAINING OR EDUC	ATION FROM	AGE 14 (e.g. hi	gh school, ted	hnical sc	hool or apprenticeship)		
NAME, PLACE AND COUNTRY		,	T)/DE		FROM/TO		CERTIFICATES OR		
		r	ГҮРЕ	Mo /Vear	Mo./Year Mo./Year		DIPLOMAS OBTAINED		
				Wo./Teal	WO./ Teal	DII LOMINO ODITAINED			
25. LIST PROFES	SSIONAL SOCIETIE	S AND ACTIVITIES	IN CIVIC, PUBL	IC OR INTERN	IATIONAL AF	FAIRS			
26. LIST ANY SIG	NIFICANT PUBLIC	ATIONS YOU HAVE	WRITTEN (do no	ot attach)					
							d. Use a separate block for each		
		armed forces and note Give both gross and ne					If you need more space, attach		
additional pag	ges of the same size.	Give both gross and ne	t salaries per ann	um for your last o	or present post.				
		IF NOT PRESENTLY IN							
FROM				EXACT TITLE OF YOUR POST:					
MONTH/YEAR	MONTH/YEAR	STARTING	FINAL						
NAME OF EMPLO	OYER:			TYPE OF BUSINESS:					
ADDRESS OF EN	NAME OF SUPERVISOR:								
		NO. AND KIND OF EMPLOYEES REASON FOR LEAVING:							
		SUPERVISED BY YOU:							
		DESC	CRIPTION OF Y	YOUR DUTIES					

R PREVIOUS POSTS (IN REVERSE ORDER)

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				SUPERVISED BY YOU:					
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		DES	OUR DUTIES						

FROM	ТО	SALARIES P	PER ANNUM	EXACT TITLE OF YOUR POS	T:		
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				EMPLOYEES SUPERVISED BY YOU:			
		DES	CRIPTION OF YOU	JR DUTIES			
28. HAVE YOU A	NY OBJECTIONS	TO OUR MAKING IN	QUIRIES OF YOUR	R PRESENT EMPLOYER?	YES NO		
29. ARE YOU NOW If answer is "yes"		R BEEN, A PERMANEI	NT CIVIL SERVANT IN	YOUR GOVERNMENT'S EMP	LOY? YES NO		
ii dilollol lo you	, , , , , , , , , , , , , , , , , , , ,						
30. REFERENCE	S: List three persor	ns. not related to you.	. who are familiar wi	th your character and qualific	ations.		
				rs listed under item 27.			
FULL NA	AME		FULL ADDRESS		BUSINESS OR OCCUPATION		
31. STATE ANY OTHER RELEVANT FACTS, INCLUDING INFORMATION REGARDING ANY RESIDENCE OUTSIDE THE COUNTRY OF YOUR NATIONALITY							
32 HAVE YOUR EVER BEEN ARRESTED, INDICTED, OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING, OR							
CONVICTED, FINED OR IMPRISONED FOR THE VIOLATION OF ANY LAW (excluding minor traffic violations)? YES NO If "yes", give full particulars of each case in an attached statement.							
11 you, give tail particulate of cacif case in all attached statement.							
33. I certify that the statements made by me in answer to the foregoing questions are true, complete and correct to the best of my knowledge and belief. I							
understand that any misrepresentation or material omission made on a Personal History form or other document requested by the Organization renders a staff member of the United Nations liable to termination or dismissal.							
DATE:			SIGNATURE :				
N.B. You will be	requested to supply	documentary evidence	e which supports the	statements you have made at	pove. Do not, however, send any		
documenta	ry evidence until you	have been asked to	do so by the Organiza	ation and, in any event, do not	submit the original texts of references		
or lesumon	iais uniess they hav	e been obtained for the	e sole use of the Org	arnzaliUII.			