Instructions Please answer each question clearly and completely. Type or print in ink. Read carefully and follow all directions. Please tick appropriate boxes.		Damanal		What p for? Vacancy	RTANT! bost are y y Numbe	you applying r:		
Please tick appr	ropriate	boxes.	Personal	History	1011			
					Title of	Post: F	ORMTEXT	
1. Family name FORMTEXT	Г	First na	Maiden name ITEXT	2. Sex FORMTEXT	T 3. Date of birth (dd/mm/yyyy) FORMTEXT			
4 51 0111			FORMTEXT		6.5			
4. Place of birth FORMTE	ХТ		5. Nationality FORMTEXT		differen		nality (ies) if	
7. Permanent add			8. Present addres			e telepho		
FORMTEXT			FORMTEXT			RMTEX ice fax no		
						RMTEX		
				11. Contact e-mail address FORMTEXT				
Telephone no. (I	FORMT	EXT	Telephone no					
12. Marital status			,	13. Have you an			pendent upon	
FORMTEX	Т			you for financial support? Yes FORMCHECKBOX			N.	
			FORMCHECKBOX			No		
			If the answer is "yes", provide the			following		
				information about			8:	
Name		of birth	Relationship	Name	Date o		Relationship	
FORMTEXT	FORM		FORMTEXT	FORMTEXT	FORM		FORMTEXT	
FORMTEXT	FORM		FORMTEXT	FORMTEXT	FORM		FORMTEXT	
FORMTEXT	FORM		FORMTEXT	FORMTEXT	FORM		FORMTEXT	
			niversity (UNU) se l Nations Universi					
disabilities	or other	restrictic	ons which might li	mit your prospect	ive field	of work of	or your ability to	
engage in tr	avel?	Yes I	FORMCHECKBC				EČKBOX	
If "Y	es", plea	ase descr	ibe:					
FORMTE	XI							
15. Are you curre System agency?	ently, or	have you	ı previously been,	employed by the	United N	lations or	a Common	
	HECKE	ROX N	IN FORMCHECK	ROX If "ves"	nlease st	tate name	of agency and	
Yes FORMCHECKBOX No FORMCHECKBOX If "yes", please state name of agency and your Index Number (Staff Identity No.): FORMTEXT								
•	· ·		anent residence st		v other th	nan that o	of vour	
nationality? Ye	s FORM	ACHECH	XBOX No FOR FORMTEXT		<i>y</i> outer u		, jour	
			ards changing you	r present national	ity? Yes	s FORM	CHECKBOX	
No FORMCHEO If "Yes", exp			MTEXT					

18. Do you have a dependent spouse and/or relatives currently employed by the United Nations or a Common System agency? Yes FORMCHECKBOX No FORMCHECKBOX

If answer is "Yes", give the following information:

Name	Relationship	Name of International		
		Organization		
FORMTEXT	FORMTEXT	FORMTEXT		
FORMTEXT	FORMTEXT	FORMTEXT		
FORMTEXT	FORMTEXT	FORMTEXT		

19. Have you previously submitted an application for employment and/or undergone any tests with UNU? THE REPORT OF THE POPMOTECERDOV IF WY

Yes FORMCHECKBOX	No FORMCHECKBOX	K If "Yes", when? FORMTEXT
20. KNOWLEDGE OF LANGUA	AGES. What is your mothe	er tongue? FORMTEXT

		Read		Write		Speak	Unde	erstand
Other language s	Easily	Not easily	Easily	Not easily	Fluently	Not fluently	Easily	Not easily
FORMT EXT	FORMC HECKB OX	FORM CHEC KBOX						
FORMT EXT	FORMC HECKB OX	FORM CHEC KBOX						
FORMT EXT	FORMC HECKB OX	FORM CHEC KBOX						
FORMT EXT	FORMC HECKB OX	FORM CHEC KBOX						

21. List any software applications in which you are proficient: FORMTEXT

22. EDUCATION. Give full details.	N.B. Please give exact name of institution and titles of
degrees in original language.	
	Diago do not translato ar aquato ta other dogrado

		Please de	o not translate or o	equate to other degrees.		
A. University or equivalent	Years atte	ended Degrees distincti	and academic ons	Main course of study		
(Name, place and country)						
FORMTEXT	FORMTEXT	FORMTEXT	FORMTEXT	FORMTEXT		
FORMTEXT	FORMTEXT	FORMTEXT	FORMTEXT	FORMTEXT		

FORMTEXT	FORMTE	XT	FORM	ITEXT	FOR	MTEXT		FORMTEXT
B. For General Servi vocational training,		only: <i>li</i> .	st other rel	evant form	al educ	ation fro	om age	e 14 (technical,
Institution name, pla and country		stitution type Year		rs attended (Certificates or dip obtained		
			fro	m		to		
FORMTEXT	FORMTEX	Г	FORMT	EXT	FOR	MTEXT		FORMTEXT
FORMTEXT	FORMTEX	Г	FORMT	EXT	FOR	MTEXT		FORMTEXT
 23. List professional memberships and activities in civic, public or international affairs (Continue on separate sheet if necessary) FORMTEXT FORMTEXT 24. List any significant publications you have written (Continue on separate sheet if necessary, but do not submit actual publications) FORMTEXT 24. List any significant publications you have written (Continue on separate sheet if necessary, but do not submit actual publications) FORMTEXT 25. EMPLOYMENT RECORD: Starting with your present employment, list in reverse order every position you have held. Use a separate block for each post. Include service in the armed forces and note any period in which you were not gainfully employed. If you need more space, attach additional pages of the same size. 								
From		То		Salarie	es per ai	inum	Exa	ct title of your post:
Month/Year FORMTEXT	Month/Ye FORMTE			Starting Final FORMTEXT RMTEXT FORMTEXT				
Name of employer:	FORMTEXT			Type of	busines	s: FORN	ATEX	Т
Address of employer	•			Name of	supervi	sor: FC	RMT	EXT
FORMTEXT			nd type of vised: MTEXT	Name of supervisor: FORMTEXT employees Reason for leaving: FORMTEXT			aving:	

Description of your duti FORMTEXT	es and ach	ieveme	ents:					
From		То		Salarie	es per ar	num	Exa	ct title of your post:
Month/Year	Month/Ye FORMTE		Star FORM	ting ITEXT	FO	Final RMTEX	Т	FORMTEXT
Name of employer: FO				Type of l				T
Address of employer:				Name of	supervi	sor FO	RMT	TEXT
FORMTEXT		No a	nd type of			Reason		
		supervised: FORMTEXT			FORMTEXT			
Description of your duti FORMTEXT	es and ach		ents:					
From		То		Salarie	es per ar	num	Exa	ct title of your post:
Month/Year FORMTEXT	Month/Ye FORMTE		Star FORM	ting TEXT	FO	Final RMTEX	Т	FORMTEXT
Name of employer: FO	RMTEXT			Type of l	ousiness	s: FORM	ITEX	T
Address of employer:				Name of	supervi	sor: FO	RMT	EXT
FORMTEXT			nd type of vised: MTEXT	employees Reason for leave FORMTEXT			eaving:	

Description of your duties and achievements: FORMTEXT										
From		~		<i>·</i>						
Month/Year	Month/Ye FORMTE		ting ITEXT	Final FORMTEX	FORMTEXT					
FORMTEXT		AI FORM		siness: FORM						
Name of employer: FC	INNIEAI		Type of ous	SHICSS. FORM	111//1					
Address of employer:			Name of su	pervisor: FC	ORMTEXT					
FORMTEXT		No. and type of supervised: FORMTEXT	employees		for leaving: ITEXT					
26. Have you any object Yes FORMCHECKB			s of your pres		?					
27. REFERENCES: qualifications					with your character and					
	Do not repe	eat the names of su	pervisors alr	eady listed un	der the EMPLOYMENT					
Title and full na	me	Postal address an	nd contact e-r mile no.	mail	Profession					
FORMTEXT		FORMTEXT		FORM	ITEXT					
FORMTEXT		FORMTEXT		FORM	ITEXT					
FORMTEXT		FORMTEXT		FORM	ITEXT					

28. Please provide any other relevant details in support of your application – especially as to how you meet the selection criteria for this particular position. FORMTEXT

29. Have you 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 FORMCHECKBOX No FORMCHECKBOX

If "yes", provide a statement as to the full particulars of each case and attach it in a sealed envelope marked "confidential"

30. 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 United Nations University renders a staff member liable to instant termination and dismissal.

Date: FORMTEXT

Signature:

(dd/mm/yyyy)

N.B.

You will be requested to supply documentary evidence which supports the statements you have made above. Do not, however, send any documentary evidence until you have been asked to do so by the Organization and, in any event, do not submit the original texts of references or testimonials unless they have been obtained for the sole use of the organization.

Applications will, as a general rule, be destroyed 6 months after the post you have applied for has been filled. While you may rest assured that your candidature will be carefully considered, receipt of this form will not be acknowledged, and only candidates short-listed for interview will be contacted.

Please return the completed form to the address quoted in the UNU Vacancy Announcement. UNU will not consider applications for other than advertised vacancies. Please make sure you have clearly indicated the vacancy number and title of the post for which you are applying at the top right hand corner of the first page.

UNU/P.11 (Page PAGE 4 of NUMPAGES 4)