


INSTRUCTIONS Please answer each question clearly and completely. Type or print in ink. Read carefully and follow all directions.		 UNITED NATIONS PERSONAL HISTORY				Do Not Write in This Space				
1. Family name :		First name :		Middle name :		Maiden name, if any				
2. Date of Birth		Day Mo. Yr.		3. Place of birth		4. Nationality (ies) at birth		5. Present nationality (ies)		6. Sex
7. Height	8. Weight	9. Marital status: Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Widow(er) <input type="checkbox"/> Divorced <input type="checkbox"/>								
10. Entry into United Nations service might require assignment to any area of the world in which the United Nations might have responsibilities. (a) Are there any limitations on your ability to perform in your prospective field of work (b) Are there any limitations on our ability to engage in all travel ? YES <input type="checkbox"/> NO <input type="checkbox"/>										
11. Permanent address				12. Present address				13. Office Telephone No.		
Telephone No.				Telephone No.				14. Office Fax. No: E-mail::		
15. Have you any dependent children? YES <input type="checkbox"/> NO <input type="checkbox"/> If the answer is "yes", give the following information:										
Name of Children		Date of Birth (day/mo/year)		Place of Birth		Nationality		Gender		
15.(a) Name of Spouse										
16. Have you taken up legal permanent residence status in any country other than that of your nationality? If answer is "yes", which country? YES <input type="checkbox"/> NO <input type="checkbox"/>										
17. Have you taken any legal steps towards changing your present nationality? If answer is "yes", explain fully: YES <input type="checkbox"/> NO <input type="checkbox"/>										
18. Are any of your relatives employed by a public international organization? If answer is "yes", give the following information: <input type="checkbox"/> YES <input type="checkbox"/> NO										
NAME				Relationship		Name of International Organization				
19. What is your preferred field of work?										
20. Would you accept employment for less than six months YES <input type="checkbox"/> NO <input type="checkbox"/>						21. Have you previously submitted an application for employment with U.N.? YES <input type="checkbox"/> NO <input type="checkbox"/> if so when?				
22. KNOWLEDGE OF LANGUAGES. What is your mother tongue?										
	READ		WRITE		SPEAK		UNDERSTAND			
OTHER LANGUAGES	Easily	Not Easily	Easily	Not Easily	Easily	Not Easily	Easily		Not Easily	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

23. For clerical grades only
Indicate speed in words per minute

Type	English	French	Other languages		List all specific computer programmes you use (i.e. excel, access)
Shorthand					

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 Please give complete address	ATTENDED FROM/TO		DEGREES and ACADEMIC DISTINCTIONS OBTAINED	MAIN COURSE OF STUDY
	Month./Year	Month./Year		

B. SCHOOLS OR OTHER FORMAL TRAINING OR EDUCATION FROM AGE 14 (e.g. high school, technical school or apprenticeship)

NAME, PLACE AND COUNTRY Please give complete address	TYPE	ATTEND FROM/TO		CERTIFICATES OR DIPLOMAS OBTAINED
		From	To	

25. LIST PROFESSIONAL SOCIETIES AND ACTIVITIES IN CIVIC, PUBLIC OR INTERNATIONAL AFFAIRS

26. LIST ANY SIGNIFICANT PUBLICATIONS YOU HAVE WRITTEN (do not attach)

27. EMPLOYMENT RECORD: Starting with your present post, list in reverse order every employment you have had. Use a separate block for each post. Include also service in the armed forces and note any period during which you were not gainfully employed. If you need more space, attach additional pages of the same size. Give both gross and net salaries per annum for your last or present post.

A. PRESENT POST (LAST POST, IF NOT PRESENTLY IN EMPLOYMENT)				EXACT TITLE OF YOUR POST	
FROM	TO	SALARIES PER ANNUM		Full time <input type="checkbox"/>	Part time <input type="checkbox"/> hours/week
MONTH/YEAR	MONTH/YEAR	STARTING	FINAL		
NAME OF EMPLOYER				TYPE OF BUSINESS	
ADDRESS OF EMPLOYER				NAME OF SUPERVISOR	

	NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU	REASON FOR LEAVING
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DESCRIPTION OF YOUR DUTIES

B. PREVIOUS POST (IN REVERSE ORDER)

FROM MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
		STARTING	FINAL	
				Full time <input type="checkbox"/> Part time <input type="checkbox"/> hours/week

NAME OF EMPLOYER:	TYPE OF BUSINESS:
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ADDRESS OF EMPLOYER:	NAME OF SUPERVISOR:
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NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU:	REASON FOR LEAVING:
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DESCRIPTION OF YOUR DUTIES

FROM MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
		STARTING	FINAL	
				Full time <input type="checkbox"/> Part time <input type="checkbox"/> hours/week

NAME OF EMPLOYER:	TYPE OF BUSINESS:
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ADDRESS OF EMPLOYER:	NAME OF SUPERVISOR:
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NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU:	REASON FOR LEAVING:
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DESCRIPTION OF YOUR DUTIES

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FROM	TO	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST: Full time <input type="checkbox"/> Part time <input type="checkbox"/> hours/week
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MONTH/YEAR	MONTH/YEAR	STARTING	FINAL	
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NAME OF EMPLOYER:	TYPE OF BUSINESS:
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ADDRESS OF EMPLOYER:	NAME OF SUPERVISOR:
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	NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU:	REASON FOR LEAVING
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DESCRIPTION OF YOUR DUTIES

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FROM	TO	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST: Full time <input type="checkbox"/> Part time <input type="checkbox"/> hours/week
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MONTH/YEAR	MONTH/YEAR	STARTING	FINAL	
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NAME OF EMPLOYER:	TYPE OF BUSINESS:
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ADDRESS OF EMPLOYER:	NAME OF SUPERVISOR:
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	NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU:	REASON FOR LEAVING
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DESCRIPTION OF YOUR DUTIES

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FROM	TO	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST: Full time <input type="checkbox"/> Part time <input type="checkbox"/> hours/week
MONTH/YEAR	MONTH/YEAR	STARTING	FINAL	

NAME OF EMPLOYER:	TYPE OF BUSINESS:	
ADDRESS OF EMPLOYER:	NAME OF SUPERVISOR:	
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%; text-align: center;">NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU:</td> <td style="text-align: center;">REASON FOR LEAVING</td> </tr> </table>	NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU:
NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU:	REASON FOR LEAVING	

DESCRIPTION OF YOUR DUTIES

28. HAVE YOU ANY OBJECTIONS TO OUR MAKING INQUIRIES OF YOUR PRESENT EMPLOYER? YES NO

29. ARE YOU NOW, OR HAVE TO EVER BEEN, A PERMANENT CIVIL SERVANT IN YOUR GOVERNMENT'S EMPLOY? YES NO
If answer is "yes", WHEN?

30. REFERENCES: List three persons, not related to you, who are familiar with your character and qualifications.
Do not repeat names of supervisors listed under item 27.

FULL NAME	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.

33. OTHER AGENCIES OF THE UNITED NATIONS SYSTEM MAY BE INTERESTED IN OUR APPLICANTS. DO YOU HAVE ANY OBJECTION TO YOUR PERSONAL HISTORY FORM BEING MADE AVAILABLE TO THEM? YES NO

34. 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 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.

UNITED NATIONS

Employment and Academic Certification

Attachment to Personal History Profile (P-11)

To be completed by candidate:

1. PERSONAL DATA:			
Family Name:	Given Name	Middle names	Gender: M/F
e-mail address:			

2. POSITION FOR WHICH YOU ARE APPLYING:	
Title: 1. 2. 3.	Job Opening Number:

3. MILITARY SERVICE HISTORY/POLICE SERVICE HISTORY			
Date of Commission(for military officers) or date of enlistment/entry to service (for police officers):			
Current rank	Date of Last Promoted	Date eligible for promotion to next rank	Projected Retirement date from current rank
Branch/Corp/Mustering			
Sub Specialization/additional qualifications			
4. DEGREES AND ACADEMIC DISTINCTIONS OBTAINED:			
	Name of Institution place and Country, please give complete	Attended	Degrees and academic distinctions obtained

	address	From Month/Year Month/ year	To	
Military or Police Degrees	Military Academy(and /or similar military office institution) name and address			
	Command and Staff College (and/or similar military offices institutions)-name and address:			
	Police Academy(and/or similar law enforcement training institution)- name and address:			
	Name of Institution place and Country, please give complete address	Attended From Month/Year Month/ year	To	Degrees and academic distinctions obtained
Civilian Degrees				
5. MILITARY AND/OR POLICE TRAINING COURSES/SEMINARS: Related to the post				
Name of Coruse	Date attended: From mm/yy- To mm/yy	Institution		

6. EXPERIENCE IN PEACEKEEPING OPERATIONS:

Specify UN or other International Experiences, starting with your most recent experience and list in reverse order

Dates mm/yy- mmyy	Mission/Operation/Lo cation	Position/title(Milob, Hq Staff, Contgt. Adviser, International Police Officer(IPO), Police Adviser, FPU Officer, Professional Post or Above)	Description of duties.

**7. COMMAND EXPERIENCE(at Battalion/equivalent level or above when applying for position at the P5 level and above)
Start with your most recent experience and list in reverse order**

Date From mm/yy- mm/yy	Unit level: Company/Battalion/Bri gade/ Division or equivalent. Police Command Experience	Unit/Position/Org	Significant Unit Activities

**8. SIGNIFICANT EXPERIENCE RELATED TO THE FUNCTIONS OF THE POST/S, YOU ARE APPLYING:
Starting with your most recent experience and list in reverse order**

Date mm/yy	Position/Org	Operation/Activity

**9. INTERNATIONAL EXPOSURE OTHER THAN PEACE KEEPING OPERATIONS:
Starting with your most recent experience and list in reverse order**

Date mm/yy	Position/Org	Operation/Activity

mm/yy		
10 Additional Comments:		

<p>11. I certify that the statements made by me in answer to the foregoing questions are complete and correct. I understand that any misrepresentation or material omission made on a Personal History form or other documents requested by the Organization renders a staff member for the United Nations liable ineligible for further consideration.</p>
<p>I declare that I have never committed, been convicted of and am not currently under investigating or being prosecuted for any criminal, human rights, civil action or disciplinary offence, with the exception of minor traffic violations(driving while intoxicated or dangerous or careless driving are not considered minor traffic violations for this purpose). I declare that I have not been involved, by act or omission, in the commission of any violation of international human rights law or international humanitarian law.</p> <p>I am not able to attest to the preceding paragraphs for the following reasons:-</p> <p>Date Signature</p> <p>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.</p>

TO BE COMPLETED BY THE RELEVANT LOCAL AUTHORITY:

On behalf of -----I certify that the information provided by -----
-----is complete and correct.

I further certify that the nominated candidate has never been convicted of, or is not currently under investigation or being prosecuted for, any criminal or disciplinary offence, or any violations of international human rights law, civil action or disciplinary offence.

The Government of _____ is not aware of any allegations against the nominated candidate that she/he has committed or been involved, by act or omission, in the commission of any act that may amount to violations of international human rights law or international humanitarian law.

In the case of the nominee who has been investigated for, charged with or prosecuted for any criminal offence, with the exception of minor traffic violations(driving while intoxicated or dangerous or careless driving are not considered minor traffic violations for this purpose), but was not convicted, the Government is requested to provide information regarding the investigation(s) or prosecutions concerned.

Date----- Official Stamp-----

PLEASE NOTE:

An incomplete or unsigned form will not be accepted.

Annexure.

BIO-DATAPROFORMA

Recent passport size photograph

1. Name of post applied :
 2. **Job opening number :**
 3. Name of the Officer :
 4. Designation/Rank/organization with present place of posting:
 5. In the case of officers of deputation with other organization :
 - (a) Name of parent organization:
 - (b) Name of organization presently employed
 - © Date of deputation :
 - (d) Expected date of repatriation to parent cadre/organization
 6. Date of birth :
 7. Education/qualification :
 8. Date of Joining Police:
Service
 9. Service/Cadre/Batch :
 10. Present Designation/Rank in :
Indian Police/CAPFs i.e.
Dy.SP/ASP/SP/SSP/DIG/IsG/
Addl.DG/Spl.DG/DG and
specifying the level i.e.
P-3,4,P-5,D-1 & D-2
 11. Specify the ranks equal to Police Organization where the designations indicated as
Assistant Director, Joint Dy Director, Deputy Director, Spl. Director & Director, etc.
 12. Pay Scale with Grade Pay:
 13. Educational Qualification :
 14. Previous UN experience :
- Telephone No. :
- (a) Office
 - (b) Residence
 - (c) Mobile No.
 - (d) Fax No.
 - (e) E-mail id

I hereby certify that, I fulfill the eligibility requirement notified for the post applied for.

(Signature of the applicant)