INSTRUCTIONS Please answer each question clearly and completely. Type or print in ink. Read carefully												Do	Not Write	in T	his Space	
				UNITED W NATIONS												
				44												
and follow all directions.					PERSONAL HISTORY											
1. Family name Firs				First name				М	iddl	e name		Maiden na	me, if any			
2. Day Mo. Yr. 3. Place of birth					th <b>4.</b> Nationa				t bir	th [	<b>5</b> . Pre	Present nationality (ies) 6. Sex			<b>6.</b> Sex	
Date of				J. Flage of Birth			in realisticity (188) at Situ				,					
Birth																
7. Height	8. Weight		ital status: gle 🗌					Separated	parated Widow(er) Divorced							
	into United Na you any disabi		-										ons might h			
• Have		ilities wni	cn might iim							engage in ai				li	f "yes", please	
<b>11</b> . Perma	inent address			<b>12.</b> Pr							Office Telephone No. Office Fax. No					
					E-ma					nail:						
Telephone No.					Telephone/Fax No.											
<b>15.</b> Have y	you any deper	ndents?		_												
			YES	NO □	lf	the	answ	er is "yes"	', giv	ve the follov	ving inf	ormation:				
NAME Date of B			Date of Bir	th Rela	tionship	nip NAME			E	Da		Date of Birth		elationship		
	you taken up l ver is "yes", w			sidence stat	us in an	у со	untry	other tha	n th	at of your n	ational	ity?	YE	s 🗆	NO 🗌	
	you taken any ver is "yes", ex			s changing	your pre	esen	t nati	onality?		YES 🗌	NO [					
<b>18.</b> Are any of your relatives employed by a public international organization?  If answer is "yes", give the following information:																
NAME					Relationship Name of Inte					f Internation	ernational Organization					
<b>19.</b> What is	s your preferre	ed field	of work?													
20. Would	you accept e	;	21. Have you previously submitted an appli						application	for emplo	ymen	t with U.N.?				
than si	ix months	YES [	] NO [	]			if s	so when?								
<b>22.</b> KNOW	LEDGE OF L	.ANGUA	AGES. Wh	at is your mo	other tor	ngue	?									
READ								WRITE						IDER	DERSTAND	
OTHER	LANGUAGES	3	Easily	Not Easily	E	asil	V	Not Easily	Easily		Not Easily	Not Easily Easil		Not Easily		
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	erical grades o te speed in wo		minute					you	can	office mad use	chines o	or equipme	nt			
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Typing Shorthand	ı															

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	AL. Give full details OR EQUIVALENT	s - N.B. Please give exa	act titles of degr ranslate or equa							
A. UNIVERSITI	ON EQUIVALENT		D FROM/TO		S and ACADEM	IC				
NAME, PLA	CE AND COUNTR	Y Mo./Year	Ma Waar	DISTINGT	IONS OBTAINE	I	AIN COURSE OF STUDY			
		Mo./ Year	Mo./Year	DISTINCT	IONS OBTAINE	<u>-</u> υ				
B SCHOOLS OF	OTHER FORMAL	TRAINING OR EDUC	<u>                                     </u>	AGF 14 (e.g. hi	ah school techr	nical schoo	l or apprenticeshin)			
					FROM/TO		RTIFICATES OR			
NAME, PLA	CE AND COUNTR	Y T	YPE	Ma Waar	Ma Maar	חוחו	OMAS OPTAINED			
				Mo./Year	Mo./Year	DIPL	OMAS OBTAINED			
AT LIGHT BROSES	20101141 2001571	EQ AND A OTH (ITIES)	N 00 //0 BUB!	lo op witen		1100				
25. LIST PROFES	SSIONAL SOCIETI	ES AND ACTIVITIES I	N CIVIC, PUBL	IC OR INTERN	NATIONAL AFFA	AIKS				
26 LIST ANY SIG	CNIEICANT DUDI I	CATIONS YOU HAVE	M/DITTEN / .							
26. LIST ANY SIC	SINIFICANT PUBLIC	JATIONS YOU HAVE	VVRIIIEIN (do no	t attach)						
							Jse a separate block for each			
post. Includ	e also service in the ges of the same size.	armed forces and note Give both gross and net	any period during salaries per annu	y which you wer m for your last or	e not gainfully en present post.	nployed. If y	ou need more space, attach			
	•	_	•		process poets					
FROM	TO	IF NOT PRESENTLY IN SALARIES PE		EXACT TIT	LE OF YOUR PO	ST:				
MONTH/YEAR	MONTH/YEAR	STARTING	FINAL							
NAME OF EMPLO	OYER:	<u> </u>		TYPE OF B	TYPE OF BUSINESS:					
ADDRESS OF E	ADLOVED:			NAME OF S	NAME OF SUPERVISOR:					
ADDRESS OF E	VIPLOYER:									
				NO. AND KIND OF EMPLOYEES REASON FOR LEAVING: SUPERVISED BY YOU:						
		DESC	CRIPTION OF Y	OUR DUTIES						
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B. PREVIOUS PO	EXACT TIT	LE OF YOUR PO	ST:							
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FROM	ТО	SALARIES P	ER ANNUM	EXACT TITLE OF YOUR POST:							
MONTH/YEAR	MONTH/YEAR	STARTING	FINAL								
NAME OF EMPLO	DYER:	1		TYPE OF BUSINESS:							
ADDRESS OF EN	MPLOYER:			NAME OF SUPERVISOR:							
				NO. AND KIND OF EMPLOYEES REASON FOR LEAVING SUPERVISED BY YOU:							
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 NA	ME	SS	BUSINESS OR OCCUPATION								
<b>31.</b> STATE ANY OTH	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. 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:	DATE: SIGNATURE :										
documenta	ry evidence until yo		lo so by the Organ		ove. Do not, however, send any submit the original texts of references						