

<b>INSTRUCTIONS</b> Please answer each question clearly and completely. <b>Type or print in Ink.</b> Read carefully and follow all directions	<b>NATIONS</b>  <b>PERSONAL HISTORY</b>	<b>Do not Write in This Space</b>
1. Family name <span style="margin-left: 100px;">First name</span> <span style="margin-left: 100px;">Middle name</span> <span style="margin-left: 100px;">Maiden name, if any</span>		
2. Date Day Mo. Yr. of Birth	3. Place of birth	4. Nationality (ies) at birth
5. Present nationality (ies)	6. Sex	
7. Height	8. Weight	9. Marital status: Widow(er) <input type="checkbox"/> Divorced <input type="checkbox"/>
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 <input type="checkbox"/> NO <input type="checkbox"/> if "yes", please describe.		
11. Permanent address	12. Present address (if different)	13. Office Telephone No.
15. Have you any dependents? YES <input type="checkbox"/> NO <input type="checkbox"/> if the answer is "yes", give the following information:		
NAME	Date of Birth	Relationship
NAME	Date of Birth	Relationship
NAME	Date of Birth	Relationship
16. Have you taken up legal permanent residence status in any country other than that of your nationality? YES <input type="checkbox"/> NO <input type="checkbox"/> if answer is "yes", which country?		
17. Have you taken any legal steps towards changing your present nationality? YES <input type="checkbox"/> NO <input type="checkbox"/> if answer is "yes", explain fully:		
18. Are any of your relatives employed by a public international organization? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> if answer is "yes", give the following information:		
NAME	Relationship	Name of International Organization
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.? if so when?	
22. Knowledge of LANGUAGES. What is your mother tongue? Arabic		
Other LANGUAGES	READ Easily Not Easily	WRITE Easily Not Easily
	SPEAK Fluently Not Fluently	UNDERSTAND Easily Not Easily
23. For clerical grades only Indicate speed in words per minute:		List any office machines or equipment you can use :
	English French	

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	ATTENDED FROM/TO	DEGREES and ACADEMIC DISTINCTIONS OBTAINED	MAIN COURSE OF STUDY
	Mo./Year	Mo./Year	

<b>B. SCHOOLS OR OTHER FORMAL TRAINING OR EDUCATION FROM AGE 14 (e.g. high school, technical school or apprenticeship)</b>									
NAME, PLACE AND COUNTRY			TYPE		ATTEND FROM/TO			CERTIFICATES OR DIPLOMAS OBTAINED	
					Mo./Year		Mo./Year		
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: <b>Starting with your present post, list in reverse order every employment you have had.</b> 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.									
<b>A. PRESENT POST (LAST POST, IF NOT PRESENTLY IN EMPLOYMENT)</b>									
FROM		TO	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:				
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		
DESCRIPTION OF YOUR DUTIES									

**B. PREVIOUS POSTS (IN REVERSE ORDER)**

FROM		TO	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:				
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		
DESCRIPTION OF YOUR DUTIES									
FROM		TO	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:				
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		

			SUPERVISED BY YOU:		
DESCRIPTION OF YOUR DUTIES					
FROM		TO	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
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	
DESCRIPTION OF YOUR DUTIES					
FROM		TO	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
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:	
DESCRIPTION OF YOUR DUTIES					

PLEASE SEE ATTACHMENT, i.e., Continuation of Item 27

28. HAVE YOU ANY OBJECTIONS TO OUR MAKING INQUIRIES OF YOUR PRESENT EMPLOYER? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
29. ARE YOU NOW, OR HAVE YOU EVER BEEN, A PERMANENT CIVIL SERVANT IN YOUR GOVERNMENT'S EMPLOY? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> if answer is "yes", WHEN?		
30. REFERENCES: List three persons, not related to you, who are familiar with your character and qualifications. <b>Do not repeat names of supervisors listed under item 27.</b>		
FULL NAME	FULL ADDRESS	BUSINESS OR OCCUPATION
31. STATE ANY OTHER RELEVANT FACTS. INCLUDE INFORMATION REGARDING ANY RESIDENCE OUTSIDE THE COUNTRY OF YOUR NATIONALITY.		
32. 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 <input type="checkbox"/> NO <input type="checkbox"/> 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: \_\_\_\_\_ 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.