

## Annex

### Internship Agreement for the United Nations Convention to Combat Desertification

1. I accept the internship, which has been awarded to me by the United Nations Convention to Combat Desertification and understand the following:
  - a. UNCCD will not pay me for my internship, all the expenses connected with it will be borne by me or my sponsoring Government or institution/s;
  - b. UNCCD accepts no responsibility for costs arising from accidents and/or illness incurred during the internship; I will provide proof of my enrolment in a health insurance plan;
  - c. I am not eligible to apply for, or be appointed to, any post in the United Nations during the period of my internship or for the six months immediately following the expiration date thereof;
  - d. I am personally responsible for obtaining necessary visas and arranging my travel to and from the duty station where the internship will be performed.
  
2. I undertake the following obligations with respect to the UNCCD internship:
  - a. To observe all applicable rules, regulations, instructions, procedures and directives of the Organization;
  - b. To refrain from any conduct that would adversely reflect on the United Nations or on the receiving department/office and will not engage in any activity which is incompatible with the aims and objectives of UNCCD and the United Nations;
  - c. To respect the impartiality and independence required of the UNCCD and of the receiving department/office and shall not seek or accept instructions regarding the services performed from any Government or from any authority external to the Organization;
  - d. To keep confidential any and all unpublished information made known to me by the accepting Office or Department during the course of my internship that I know or

ought to have known has not been made public, and except with the explicit authorization of UNCCD, not to publish any reports or papers on the basis of information obtained during the programme, both during and after the completion of my internship.

- e. To provide the receiving department/office with a copy of all materials prepared during my internship.
- f. To provide immediate written notice in case of illness or other circumstances which might prevent me from completing the internship;
- g. To complete the internship evaluation questionnaire at the end of my internship and to submit it to the Officer-in-Charge of the Internship programme at the duty station;
- h. To return my identification pass to the Officer-in-Charge of the Internship Programme at the duty station and any equipment or materials loaned to me for the performance of my internship.

3. I have read the attached terms of reference of my internship and I accept and abide them.

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DATE                                  PRINTED NAME OF INTERN                                  SIGNATURE

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DATE                                  PRINTED NAME OF OFFICER IN CHARGE OF INTERNSHIP                                  SIGNATURE