



Personal History Form

INSTRUCTIONS: Please answer each question clearly and completely. Type or print in ink. Read carefully and follow all directions. If you need more space, attach additional pages of the same size.

1. Family name (surname) **2. First names** **3. Maiden name, if applicable**

4. Date of Birth day month year	5. Place of birth	6. Nationality at birth	7. List all your current nationality(ies)	8. Gender Male <input type="checkbox"/> Female <input type="checkbox"/>
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9. Marital status Single ☐ Married ☐ Separated ☐ Widow(er) ☐ Divorced ☐

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 condition/situation, which might limit your prospective field of work or your ability to engage in air travel?

No ☐ Yes ☐ If "yes" please describe:

11. Permanent address Telephone No.	12. Present address if different from that indicated in box 11. Telephone No.	13. Office Telephone number Home/Mobile; Work; 14. Personal and/or professional e-mail address:
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15. Have you any dependents? Yes ☐ No ☐ if the answer is "Yes", give the following information:

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?
No ☐ Yes ☐
if "Yes", which country(ies)?

17. Have you taken any steps towards changing your present nationality?
No ☐ Yes ☐
if "Yes", explain fully:

18. Are any of your family members (spouse/partner, father./mother, brother/sister, son/daughter) employed in the UN common system, including UNDP? Yes ☐ No ☐ if answer is "yes", give the following information:

Name	Relationship	Name of Organization

19. Do you have any other (extended) family members in UNDP? No ☐ Yes ☐ if answer is "yes", give the following information:

Name	Relationship

B. Post-qualification training courses / learning activities				
Name, place and country	Type	Attended From/To Mo./Year Mo. /Year		Certificates or Diplomas obtained

C. UN Language Proficiency Exams (if any)				

D. UNDP Certification Programmes (if any)				

25. List membership of professional societies and activities in civic, public or international affairs

26. List any significant publications you have written (do not attach them) or any special recognition

27. EMPLOYMENT RECORD: Starting with your present post, list in reverse order every employment you have had. Use a separate block for each employment. 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. Provide gross and indicate denomination salary per annum for your last or present post.

Have you already been issued a UN Index Number? No ☐ Yes ☐ If yes, please indicate this number: _____

Are you a current or former UNV? Yes ☐ No ☐ If yes, please indicate roster number: _____

A. PRESENT POST (LAST POST, IF NOT PRESENTLY IN EMPLOYMENT)				
FROM Month/Year	TO Month/Year	SALARIES PER ANNUM Starting (gross) Final (gross)		FUNCTIONAL TITLE: As specified in your Letter of Appointment/Contract: UN Grade of your post (if applicable): Last UN step in your post (if applicable):
NAME OF EMPLOYER:				TYPE OF BUSINESS:
				EMPLOYMENT TYPE: Full time: <input type="checkbox"/> Part Time: <input type="checkbox"/> (%)
				Type of contract: <input type="checkbox"/> 100 Series <input type="checkbox"/> 200 series <input type="checkbox"/> ALD/300 series <input type="checkbox"/> Permanent <input type="checkbox"/> Indefinite <input type="checkbox"/> Continuing <input type="checkbox"/> FTA <input type="checkbox"/> TA <input type="checkbox"/> SSA <input type="checkbox"/> SC <input type="checkbox"/> UNV <input type="checkbox"/> Other

ADDRESS OF EMPLOYER				NAME OF SUPERVISOR:		
				Email Add. and/or Telephone No. Of Supervisor:		
				Number of Professional Staff Supervised:		Reason for leaving:
				Number of Support Staff Supervised:		
DESCRIPTION OF YOUR DUTIES AND RELATED ACCOMPLISHMENTS						
B. PREVIOUS POSTS (IN REVERSE ORDER - I.E. MOST RECENT POSTS FIRST)						
FROM	TO	SALARIES PER ANNUM		FUNCTIONAL TITLE: As specified in your Letter of Appointment/Contract: UN Grade of your post (if applicable): Last UN step in your post (if applicable):		
Month/Year	Month/Year		Final (gross)			
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REASON FOR LEAVING:					
DESCRIPTION OF YOUR DUTIES AND RELATED ACCOMPLISHMENTS					
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NAME OF EMPLOYER	TYPE OF BUSINESS:			
	EMPLOYMENT TYPE: Full time: <input type="checkbox"/> Part Time: <input type="checkbox"/> (%)			
	Type of contract: <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none; vertical-align: top;"> <input type="checkbox"/> 100 Series <input type="checkbox"/> Permanent <input type="checkbox"/> FTA <input type="checkbox"/> SC </td> <td style="width: 33%; border: none; vertical-align: top;"> <input type="checkbox"/> 200 series <input type="checkbox"/> Indefinite <input type="checkbox"/> TA <input type="checkbox"/> UNV </td> <td style="width: 33%; border: none; vertical-align: top;"> <input type="checkbox"/> ALD/300 series <input type="checkbox"/> Continuing <input type="checkbox"/> SSA <input type="checkbox"/> Other </td> </tr> </table>		<input type="checkbox"/> 100 Series <input type="checkbox"/> Permanent <input type="checkbox"/> FTA <input type="checkbox"/> SC	<input type="checkbox"/> 200 series <input type="checkbox"/> Indefinite <input type="checkbox"/> TA <input type="checkbox"/> UNV
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	Number of Professional Staff Supervised: Number of Support Staff Supervised:	Reason for leaving:		
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28. Have you any objections to our making inquiries of: (a) your present employer? No <input type="checkbox"/> Yes <input type="checkbox"/> ; (b) previous employers? No <input type="checkbox"/> Yes <input type="checkbox"/>				
29. Are you now, or have you ever been, a permanent civil servant employee in your government? No <input type="checkbox"/> Yes <input type="checkbox"/> If answer is "yes", WHEN?				
30. References: list three persons not related to you who are familiar with your character and qualifications and who may be contacted for a reference. (Please do not repeat names entered as current or former supervisor)				
FULL NAME	FULL ADDRESS, including E-MAIL ADDRESS and TELEPHONE NUMBER	BUSINESS OR OCCUPATION		
31. State any other relevant facts in support of your application. Include information regarding any residence outside the country of your nationality				
32. Have you ever been convicted, fined, or imprisoned for the violation of any law (excluding minor traffic violations)? No <input type="checkbox"/> Yes <input type="checkbox"/> If "Yes" give full particulars of each case in an attached statement				
33. Have you ever been imposed disciplinary measures, including dismissal or separation from service, on the grounds of misconduct? No <input type="checkbox"/> Yes <input type="checkbox"/> If "Yes" give full particulars of each case in an attached statement				
34. Have you ever been separated from service on the ground of unsatisfactory performance? No <input type="checkbox"/> Yes <input type="checkbox"/> If "Yes" give full particulars of each case in an attached statement				
35. 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 the UNDP Personal History Form may lead to the termination of the appointment or to dismissal. I understand this also applies to any other information or document requested by the Organization for the purpose of my recruitment to and employment with UNDP.				
DATE: _____ SIGNATURE: _____				

Note: You may be requested to provide documentary evidence of the statements you have made above. Do not, however, send any documentary evidence until you have been asked to do so and, in any event, do not submit the originals of any references, testimonials or certificates of academic achievement unless they have been obtained for the sole use of UNDP.