

**United Nations Personal History Profile for
Non-Uniformed Civilian Government Provided Personnel**

Personal Data:

Family Name:	First Name:	Middle Name(s):	
Male/Female:	Date of Birth dd/mm/yy: / /	Place of Birth:	
Passport no.:	Passport Expiry Date: / /	Availability for Deployment mm/yy: /	Preferred Point of Departure:

Contact details: Required for scheduling an interview and shipping of personal effects

Home Address:	Phone:
	E-mail:
Office Address:	Phone:
	E-Mail:

Education:

Institution	Attendance	Degrees and Academic Distinctions Obtained
	From/To	

Employment History: Present Post (Please list your entire work experience, starting with your present/last post)

Exact Title of Post:	From (Month/Year) /	To (Month/Year) /
Name of Employer:	Address of Employer:	
Name of Supervisor: Phone: E-Mail:	Number of Personnel Supervised by You:	Reason for Leaving:
Description of Duties		Significant Achievements

Previous Posts: (In Reverse Order)

Exact Title of Post:	From (Month/Year) /	To (Month/Year) /
Name of Employer:	Address of Employer:	
Name of Supervisor: Phone: E-Mail:	Number of Personnel Supervised by You:	Reason for Leaving:
Description of Duties		Significant Achievements
Exact Title of Post:	From (Month/Year) /	To (Month/Year) /
Name of Employer:	Address of Employer:	
Name of Supervisor: Phone: E-Mail:	Number of Personnel Supervised by You:	Reason for Leaving:
Description of Duties		Significant Achievements
Exact Title of Post:	From (Month/Year) /	To (Month/Year) /
Name of Employer:	Address of Employer:	
Name of Supervisor: Phone: E-Mail:	Number of Personnel Supervised by You:	Reason for Leaving:
Description of Duties		Significant Achievements

Previous Service with the United Nations or other Regional Peace Support Operations

Year:	UN Organization/Mission or Regional Peace Support Operation and Position:

General Information

Are there employment limitations?	
No <input type="checkbox"/>	Yes - provide details: <input type="checkbox"/>
Are there travel limitations?	
No <input type="checkbox"/>	Yes - provide details: <input type="checkbox"/>

Specialized Professional Skills: Please indicate whether you have skills/experience in any specialized area.

	Yes/No <input type="checkbox"/> / <input type="checkbox"/>	Details
	Yes/No <input type="checkbox"/> / <input type="checkbox"/>	
	Yes/No <input type="checkbox"/> / <input type="checkbox"/>	
	Yes/No <input type="checkbox"/> / <input type="checkbox"/>	
	Yes/No <input type="checkbox"/> / <input type="checkbox"/>	
	Yes/No <input type="checkbox"/> / <input type="checkbox"/>	

Language Proficiency:

For languages other than mother tongue, enter appropriate letter from coding below to indicate knowledge level.

Mother Tongue:				
OTHER LANGUAGES	<i>Understand</i>	<i>Speak</i>	<i>Read</i>	<i>Write</i>

CODE:
A- Professional Fluency: Able to work independently in the language, including the preparation of written reports and papers. Able to participate actively in and/or lead meetings conducted in the language.
B- Working Knowledge: Able to follow work-related discussions and participate in them, although command of grammar and syntax may be uncertain. Able to use the telephone, to read and understand work-related documents, and to draft basic correspondence.
C- Limited Knowledge: Able to understand simple conversations and written texts.

Computer Skills:

Software applications for which you have experience:					
Word	Excel	PowerPoint	Access	Outlook	Lotus
Yes/No <input type="checkbox"/> / <input type="checkbox"/>	Yes/No <input type="checkbox"/> / <input type="checkbox"/>	Yes/No <input type="checkbox"/> / <input type="checkbox"/>	Yes/No <input type="checkbox"/> / <input type="checkbox"/>	Yes/No <input type="checkbox"/> / <input type="checkbox"/>	Yes/No <input type="checkbox"/> / <input type="checkbox"/>
Other capabilities or experience:					

Driving Skills:

Have you held a valid driver licence for the last 2 years?	Yes/No <input type="checkbox"/> / <input type="checkbox"/>
Are you able to drive a 4x4 vehicle?	Yes/No <input type="checkbox"/> / <input type="checkbox"/>

Conduct and Discipline:

I attest that I have not committed, been convicted of, nor prosecuted for, any criminal offence. I attest 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.	Signature of Candidate
Or I am not able to attest to the preceding paragraph for the following reasons:	Signature of Candidate

I confirm that above statements are true, complete and correct, without any misrepresentation and material omission:

Date: / /	Signature of Candidate
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The Permanent Mission of.....to the United Nations certifies that the above nominee has not been convicted of, or is not currently under investigation or being prosecuted for, any criminal offence, or any violation of international human rights law or international humanitarian law.

The Permanent Mission of also certifies that it is not aware of any allegations against this candidate to have been involved, by act or omission, in the commission of any acts that amount to violations of international human rights law or international humanitarian law.

The Permanent Mission of to the United Nations submits the above nominee for the indicated post in the indicated mission as meeting the requirement of duty statement of the post.

Date: / /	Signature of Representative of Permanent Mission Name: Contact Details:
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Complementary Sheet – Previous Posts: (In Reverse Order)

Exact Title of Post:	From (Month/Year) /	To (Month/Year) /
Name of Employer:	Address of Employer:	
Name of Supervisor: Phone: E-Mail:	Number of Personnel Supervised by You:	Reason for Leaving:
Description of Duties		Significant Achievements
Exact Title of Post:	From (Month/Year) /	To (Month/Year) /
Name of Employer:	Address of Employer:	
Name of Supervisor: Phone: E-Mail:	Number of Personnel Supervised by You:	Reason for Leaving:
Description of Duties		Significant Achievements
Exact Title of Post:	From (Month/Year) /	To (Month/Year) /
Name of Employer:	Address of Employer:	
Name of Supervisor: Phone: E-Mail:	Number of Personnel Supervised by You:	Reason for Leaving:
Description of Duties		Significant Achievements