INSTRUCTIONS Please answer each question clearly and completely. Type or print in ink. Read carefully and follow all directions.	UNITED NATIONS DEVELOPMENT PROGRAMME PERSONAL HISTORY FORM ***(for Individual Contracts)***	

1. Family Name	First Name	Middle name	Maiden name, if any

2. Date of Birth (Da Mo Yr)	3. Place of Birth	4. Nationality (ies) at birth	5. Present nationality (ies)	6. Sexe

7. Height	8. Weight	9. Marital status
		Single o Married o Separated o Widow o Divorced o

10. Permanent address	11. Present Address (if different)	12. Office Telephone No. Office Fax No. Office E-mail No.
Telephone No. Fax No.	Telephone No. Fax No.	

13. Do you have a spouse and/or children? YES o NO o if the answer is "yes", give the following information:

NAME	Date of birth	Relationship	NAME	Date of birth	Relationship

14. Have you taken up any legal permanent status in any country other than that of your nationality? YES o NO o
If the answer is "yes", which country?

15. Have you taken any legal steps towards changing your present nationality? YES o NO o
If answer is "yes", explain fully:

16. Are any of your relatives employed by UNDP, any other UN organization or any other public international organization? YES o NO o
If the answer is "yes", give the following information:

NAME	Relationship	Name of International Organization

17. What is your preferred field of work?

18. KNOWLEDGE OF LANGUAGES. What is your mother tongue?

OTHER LANGUAGES	READ		WRITE		SPEAK		UNDERSTAND	
	Easily	Not Easily	Easily	Not Easily	Fluently	Not Fluently	Easily	Not Easily

19. For clerical grades only *Indicate speed in words per minute*				*List any office machines or equipment you can use*
	English	French	Other languages	

Typing					
Shorthand					

20. EDUCATIONAL. Give full details - N.B. Please give exact titles or degree 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. SCHOOLS OR OTHER FORMAL TRAINING OR EDUCATION FROM AGE 14 (e.g. high school, technical school or apprenticeship)

NAME, PLACE AND COUNTRY	TYPE	ATTENDED FROM/TO		CERTIFICATES OR DIPLOMAS OBTAINED
		Mo./Year	Mo./Year	

21. LIST PROFESSIONAL SOCIETIES AND ACTIVITIES IN CIVIC, PUBLIC OR INTERNATIONAL AFFAIRS

22. LIST ANY SIGNIFICANT PUBLICATIONS YOU HAVE WRITTEN (Do not attach)

23. EMPLOYMENT RECORD: Starting with your present function, list in reverse order every employment you have had. Use a separate block for each FUNCTION. 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 and present FUNCTION.

A. PRESENT FUNCTION (LAST FUNCTION, IF NOT PRESENTLY IN EMPLOYMENT)

FROM	TO	SALARY PER ANNUM		EXACT TITLE OF YOUR FUNCTION:
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 FUNCTION *(IN REVERSE ORDER)*

FROM	TO	SALARY PER ANNUM		EXACT TITLE OF YOUR FUNCTION:
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	SALARY PER ANNUM		EXACT TITLE OF YOUR FUNCTION:
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	SALARY PER ANNUM		EXACT TITLE OF YOUR FUNCTION:
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	SALARY PER ANNUM		EXACT TITLE OF YOUR FUNCTION:
MONTH/YEAR	MONTH/YEAR	STARTING	FINAL	

NAME OF EMPLOYER:	TYPE OF BUSINESS:

<table>
<tr><td rowspan="2">ADDRESS OF EMPLOYER:</td><td colspan="2">NAME OF SUPERVISOR:</td></tr>
<tr><td>NO AND KIND OF EMPLOYEES SUPERVISED BY YOU:</td><td>REASON FOR LEAVING:</td></tr>
<tr><td colspan="3">DESCRIPTION OF YOUR DUTIES</td></tr>
<tr><td colspan="3"></td></tr>
</table>

FROM	TO	SALARY PER ANNUM		EXACT TITLE OF YOUR FUNCTION:
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	SALARY PER ANNUM		EXACT TITLE OF YOUR FUNCTION:
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	SALARY PER ANNUM		EXACT TITLE OF YOUR FUNCTION:
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	SALARY PER ANNUM		EXACT TITLE OF YOUR FUNCTION:
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		

24. DO YOU HAVE ANY OBJECTIONS TO OUR MAKING ENQUIRIES OF YOUR PRESENT EMPLOYER? YES o NO o

25. ARE YOU NOW, OR HAVE YOU EVER BEEN A PERMANENT CIVIL SERVANT IN YOUR GOVERNMENT'S EMPLOY? YES o NO o
If answer if "yes", WHEN?

26. REFERENCES: List three persons, not related to you, who are familiar with your character and qualifications.
Do not repeat names of supervisors listed in item 24.

FULL NAME	FULL ADDRESS / TEL NO. / EMAIL ADDRESS	BUSINESS OR OCCUPATION

27. STATE ANY OTHER RELEVANT FACTS IN SUPPORT OF YOUR APPLICATION. INCLUDE INFORMATION REGARDING ANY RESIDENCE OUTSIDE THE COUNTRY OF YOUR NATIONALITY.

28. HAVE YOU 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 o NO o
If "yes", give full particulars of each case in an attached statement.

29. 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 may result in the termination of the service contract or special services agreement without notice.

DATE: _____ SIGNATURE: _____

NB. You will be requested to supply documentary evidence which support 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 original texts of references or testimonials unless they have been obtained for the sole use of UNDP.