UNITED NATIONS POPULATION FUND

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 ☐ Female x☐x

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 has responsibilities. Do you have/experience any condition/situation which might limit your prospective field of work or your ability to engage in air travel?

No x☐ Yes ☐ If "Yes", please describe:

	12. Present address if different from that indicated in box 11 Same address Telephone No.	**13. Telephone numbers** Home/Mobil Work **14. Personal and/or professional e-mail address:**

15. Have you any dependents? Yes x☐ No ☐ If the answer is "Yes", give the following information:

Name	Date of birth	Relationship	Name		

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 UNFPA? Yes ☐ No ☐x If "Yes", give the following information:

Name	**Relationship**	**Name of Organization & Duty Station**
–		

19. Do you have any other (extended) family members employed by UNFPA? No x☐ Yes ☐ If "Yes", give the following information:

Name	**Relationship**	**Name of Unit & Duty Station**

20. Would you accept employment for less than six months? Yes ☐ No ☐	**21.** Have you been interviewed for any UNFPA positions in the last 12 months? If so, for which post(s)?

22. Languages – indicate mother tongue 1st	Ability to operate in the listed language(s) in a work environment			
	Read	**Write**	**Speak**	**Understand**
	☐ none ☐ limited ☐ working knowledge ☐x proficient	☐ none ☐ limited ☐ working knowledge ☐x proficient	☐ none ☐ limited ☐ working knowledge ☐x proficient	☐ none ☐ limited ☐ working knowledge ☐ x proficient
	☐ none ☐ limited ☐ working knowledge ☐x proficient	☐ none ☐ limited ☐ working knowledge ☐ x proficient	☐ none ☐ limited ☐ working knowledge ☐ x proficient	☐ none ☐ limited ☐ working knowledge ☐ x proficient
	☐ none ☐ limited ☐ x working knowledge ☐ proficient	☐ none ☐ limited ☐ x working knowledge ☐ proficient	☐ none ☐x limited ☐ working knowledge ☐ proficient	☐ none ☐ limited ☐ working knowledge ☐ proficient
	☐ none ☐ limited ☐ working knowledge ☐ proficient	☐ none ☐ limited ☐ working knowledge ☐ proficient	☐ none ☐ limited ☐ working knowledge ☐ proficient	☐ none ☐ limited ☐ x working knowledge ☐ proficient
	☐ none ☐ limited ☐ working knowledge ☐ proficient	☐ none ☐ limited ☐ working knowledge ☐ proficient	☐ none ☐ limited ☐ working knowledge ☐ proficient	☐ none ☐ limited ☐ working knowledge ☐ proficient
	☐ none ☐ limiteud ☐ working knowledge ☐ proficient	☐ none ☐ limited ☐ working knowledge ☐ proficient	☐ none ☐ limited ☐ working knowledge ☐ proficient	☐ none ☐ limited ☐ working knowledge ☐ proficient
	☐ none ☐ limited ☐ working knowledge ☐ proficient	☐ none ☐ limited ☐ working knowledge ☐ proficient	☐ none ☐ limited ☐ working knowledge ☐ proficient	☐ none ☐ limited ☐ working knowledge ☐ proficient

24. EDUCATION: Give full details - NB Please give exact titles of degrees in original language

Degrees claimed in the job application (even if they are not a requirement for the post) must be completed at the time of the application.

UNFPA only recognizes degrees and diplomas from educational institutions that have been recognized or otherwise approved by competent authorities at the time that they were obtained. Degrees requiring little or no actual course work, degrees awarded for payment of fees only, and degrees granting substantial credits for "lifetime achievements" or "life/work experience" will normally not be recognized. Incomplete degrees are unacceptable to UNFPA, regardless of whether they are associated with a recognized higher educational institution.

A. List all educational institutions attended, including secondary school, and diplomas/degrees or equivalent qualifications obtained (highest level education first). Give the exact name of the institution and the title of degrees, diplomas, etc. (Please do not translate or indicate equivalent degrees).

Name, place and country	**Attended from/to** Mo/Year	Mo. /Year	**Degrees / Diplomas obtained**	**Main course of study**	
		9			

B. **Post-qualification training courses / learning activities**

Name, place and country	Type	Attended from/to Mo/Year	Mo. /Year	Certificates or Diplomas obtained	In person or online/remote?

C. **UN Language Proficiency Exams (if any)**

D. **UNFPA 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 recognitions you have received

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

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

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

A. **PRESENT POST (Last post, if not presently employed)**

FROM	TO	SALARIES PER ANNUM		FUNCTIONAL TITLE: As specified in your Letter of Appointment/Contract: UN grade of your post (if applicable): (do not indicate equivalency) Last UN step in your post (if applicable):
Month/Year	Month/Year	Starting (gross)	Final (gross)	

NAME OF EMPLOYER:

TYPE OF BUSINESS:

EMPLOYMENT TYPE:
Full time: ☐
Part Time: ☐ (%)

Type of contract:

☐ 100 Series	☐ 200 series	☐ ALD/300 series
☐ Permanent	☐ Indefinite	☐ Continuing
☐ FTA	☐ TA	☐ SSA / IC
☐ SC	☐ UNV	☐ Other

ADDRESS OF EMPLOYER

NAME OF SUPERVISOR:
E-mail Address and Telephone No. of Supervisor:

Do/did you supervise staff? If so:
Number of professional staff supervised:
Number of support staff supervised:

Description of your duties and related accomplishments:

Reason for leaving:

B. **PREVIOUS POSTS (In reverse order i.e. most recent post first)**

FROM	TO	SALARIES PER ANNUM		FUNCTIONAL TITLE: As specified in your Letter of Appointment/Contract: UN Grade of your post (if applicable): (do not indicate equivalency) Last UN step in your post (if applicable):
Month/Year	Month/Year		Final (gross)	

NAME OF EMPLOYER	TYPE OF BUSINESS:
	EMPLOYMENT TYPE: Full time: ☐ Part Time: ☐ (%)
	Type of contract: ☐ 100 Series ☐ Permanent ☐ FTA ☐ SC ☐ 200 series ☐ Indefinite ☐ TA ☐ UNV ☐ ALD/300 series ☐ Continuing ☐ SSA / IC ☐ Other
ADDRESS OF EMPLOYER	NAME OF SUPERVISOR: E-mail Address and Telephone No. of Supervisor:
	Did you supervise staff? If so: Number of professional staff supervised: Number of support staff supervised:
Description of your duties and related accomplishments:	
Reason for leaving:	

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	EMPLOYMENT TYPE: Full time: ☐ Part Time: ☐ (%)
	Type of contract: ☐ 100 Series ☐ Permanent ☐ FTA ☐ SC ☐ 200 series ☐ Indefinite ☐ TA ☐ UNV ☐ ALD/300 series ☐ Continuing ☐ SSA / IC ☐ Other
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Type of contract:		
☐ 100 Series ☐ Permanent ☐ FTA ☐ SC	☐ 200 series ☐ Indefinite ☐ TA ☐ UNV	☐ ALD/300 series ☐ Continuing ☐ SSA / IC ☐ Other

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Type of contract:		
☐ 100 Series ☐ Permanent ☐ FTA ☐ SC	☐ 200 series ☐ Indefinite ☐ TA ☐ UNV	☐ ALD/300 series ☐ Continuing ☐ SSA / IC ☐ Other

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ADDRESS OF EMPLOYER	NAME OF SUPERVISOR: E-mail Address and Telephone No. of Supervisor:		
	Did you supervise staff? If so: Number of professional staff supervised: Number of support staff supervised:		

Description of your duties and related accomplishments:

Reason for leaving:

29. Have you any objections to our making inquiries of:
(a) your present employer? No ☐ Yes ☐
(b) your previous employers? No ☐ Yes ☐

30. Are you now, or have you ever been, a national civil servant in your government?
No ☐ Yes ☐

If "Yes", Indicate dates of service: Functions: Country:

31. References: list **three** persons not related to you who are familiar with your character and qualifications and who may be contacted for a reference

UNFPA will not seek a reference from your *current* employer without obtaining prior consent. However, please note that UNFPA may seek references from your former employers.

Full Name	Full Address, including E-Mail Address and Telephone Number	Name of Organization, Business or Occupation

32. State any other relevant facts in support of your application. Include information regarding any periods of residence outside the country of your nationality

33. Have you ever been convicted, fined, or imprisoned for the violation of any law (excluding minor traffic violations)?
No ☐ Yes ☐ If "Yes", give full particulars of each case in an attached statement

34. Have you ever had disciplinary measures imposed on you, including dismissal or separation from service, on the grounds of misconduct?
No ☐ Yes ☐ If "Yes", give full particulars of each case in an attached statement.

35. Have you ever been separated from service on the grounds of unsatisfactory performance?

No ☐ Yes ☐ If "Yes", give full particulars of each case in an attached statement.

36. I certify that the information I have provided in the present document is true, complete and correct to the best of my knowledge. I understand that any misrepresentation or material omission made in this document may lead to the termination of my 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 UNFPA.

In connection with this application, I authorize former employers and educational institutions to release information about my background to UNFPA or its agent. My signature below releases the aforesaid parties providing information about me from any liability whatsoever in collecting and disseminating the information obtained.

DATE: **SIGNATURE**: _____

Note:

Applications for employment at UNFPA must include a completed and signed Personal History form (P.11). By submitting a Personal History form, the applicant authorizes UNFPA or its agent to verify and validate all information provided in the P.11. The P.11 form is not valid without signature. The signed P.11 form serves to release any party cited in the form from any liability whatsoever for releasing information to UNFPA or its agent.

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 UNFPA.

If Degrees/Certificates are in foreign language, you may be required to provide official English translation at time of request.