

BIOGRAPHICAL DATA FORM

Note to Consultants: Consultants are asked to complete this form in addition to the curriculum vitae (CV). This data sheet is supplemental to your CV – ADPC uses the information as a ready reference to assist in consultant selection purposes only. The full CV is submitted to organizations outside ADPC, in relation to specific requests for consultancy work. Please submit the completed form to the Technical Services Division of ADPC. Please word process or, if writing by hand, write legibly. Thank you.

1. PERSONAL INFORMATION

Name <i>(in full):</i>	Nationality:	Date of Birth: <i>(dd/mm/yy)</i>
Home Address:		
Office Address :		
Mobile Phone No: <i>Should mention country code and area code</i> <i>country code area code</i>	Home Tel. No.: <i>Should mention country code and area code</i>	E-mail:

2. EDUCATION HISTORY *(highest qualification and other relevant majors)*

NAME/LOCATION OF INSTITUTION	MAJOR SUBJECTS	DATE COMPLETED	TYPE OF DEGREE	Field of Specialization

3. EMPLOYMENT HISTORY

As per the ToR, please provide your complete and accurate employment history, including all past employment details (use an additional sheet if necessary).

POSITION	EMPLOYER'S NAME	EMPLOYER'S ADDRESS	Assignment in line with the ToR	DATE OF EMPLOYMENT		MONTHLY SALARY (in US \$)
				From	To	

4. CONSULTANCY HISTORY

Please show details for **your last 3 consultancies**. Your CV should show details of these and all others. (please use additional sheet if necessary)

CLIENT'S NAME	CLIENT'S COUNTRY & CITY	TYPES OF SERVICES PERFORMED	COUNTRIES COVERED	DATES PERFORMED		DAILY RATE (in US \$)
				From	To	

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5. LANGUAGE PROFICIENCY (please check appropriately)

LANGUAGE	READ			WRITE			SPEAK		
	FAIR	GOOD	VERY GOOD	FAIR	GOOD	VERY GOOD	FAIR	GOOD	VERY GOOD

6. Relevant Technical in Publications (if any)

NAME OF THE PUBLICATION	YEAR	REMARKS

7. Training Events Conducted

NAME OF THE TRAINING	SESSION/ MODULE	PLACE/ ORGANIZATION

8. Clarification (Conflict of Interest)

Are any of your relatives employed by the Asian Disaster Preparedness Center?

YES NO

If the answer is "yes", give the following information:

Name	Position	Relation

9. REFERENCES (Please provide accurate information)

Name	Name of the Contact Address	Tel. No.:	Fax No.:	Email:

APPLICATION QUESTIONS

Please answer the following questions.

Have you ever been involved in the commission of any act of sexual harassment or sexual exploitation and abuse? <input type="checkbox"/> YES <input type="checkbox"/> NO
Have you ever 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)? <input type="checkbox"/> YES <input type="checkbox"/> NO
Have you ever been imposed disciplinary measures, including dismissal or separation from service, on the grounds of misconduct? <input type="checkbox"/> YES <input type="checkbox"/> NO
Have you resigned or separated from the organization(s) while under investigation or in the course of disciplinary proceedings action? <input type="checkbox"/> YES <input type="checkbox"/> NO

I certify that all the above given information in my application is true, complete and correct. I understand that if I have misrepresented, given any false statement or deliberately hidden or withheld any required information or facts on this application and been subsequently offered a job or employed, it will be grounds for the withdrawal of any offer of appointment or immediate termination of my employment with ADPC. I further authorize ADPC to check all personal and employment references and to verify all information I have provided in this application.

Signature : _____

Applicant's Name : _____

Date : _____