



OFFICE AUTOMATION SKILLS:				
EDUCATION. Give full details – N.B. <i>Please give exact titles of degrees in original language; do not translate or equate to other degrees.</i>				
A. University or equivalent				
NAME, PLACE AND COUNTRY	ATTENDED FROM/TO		DEGREES and ACADEMIC DISTINCTION 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
List professional societies and activities in civic, public or international affairs:				
List any significant publications you have written ( <i>Do not attach</i> ):				
EMPLOYMENT RECORD: Starting with your present post, list <i>in reverse order</i> every employment you have had. Use a separate block for each post. 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 or present post.				
A. PRESENT POST (LAST POST, IF NOT PRESENTLY IN EMPLOYMENT)				
FROM	TO	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
Month/year	Month/year	Starting	Final	
NAME OF EMPLOYER:			TYPE OF BUSINESS:	
ADDRESS OF EMPLOYER:			NAME OF SUPERVISOR:	
			NO. AND KIND OF EMPLOYEES:	REASON FOR LEAVING:
DESCRIPTION OF YOUR DUTIES:				
B. PREVIOUS POST ( <i>IN REVERSE ORDER</i> )				
FROM	TO	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
Month/year	Month/year	Starting	Final	
NAME OF EMPLOYER:			TYPE OF BUSINESS:	
ADDRESS OF EMPLOYER:			NAME OF SUPERVISOR:	
			NO. AND KIND OF EMPLOYEES:	REASON FOR LEAVING:
DESCRIPTION OF YOUR DUTIES:				

C. PREVIOUS POST (IN REVERSE ORDER)				
FROM	TO	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
Month/year	Month/year	Starting	Final	
NAME OF EMPLOYER:			TYPE OF BUSINESS:	
ADDRESS OF EMPLOYER:			NAME OF SUPERVISOR:	
			NO. AND KIND OF EMPLOYEES:	REASON FOR LEAVING:
DESCRIPTION OF YOUR DUTIES:				
D. PREVIOUS POST (IN REVERSE ORDER)				
FROM	TO	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
Month/year	Month/year	Starting	Final	
NAME OF EMPLOYER:			TYPE OF BUSINESS:	
ADDRESS OF EMPLOYER:			NAME OF SUPERVISOR:	
			NO. AND KIND OF EMPLOYEES:	REASON FOR LEAVING:
DESCRIPTION OF YOUR DUTIES:				
Have you any objections to our making inquiries of your present employer? YES <input type="checkbox"/> NO <input type="checkbox"/>				
Are you now, or have you ever been, a permanent civil servant in your government's employ? YES <input type="checkbox"/> NO <input type="checkbox"/>				
REFERENCES: List three persons, not related to you, who are familiar with your character and qualifications. <i>Do not repeat names of supervisors listed under item "EMPLOYMENT RECORD"</i>				
FULL NAME		FULL ADDRESS		BUSINESS OR OCCUPATION
State any other relevant facts. Include information regarding any residence outside the country of your nationality.				
Have you ever been arrested, indicted or summoned into court as defendant in a criminal proceeding, or convicted, fined or imprisoned for the violation of any law (excluding minor traffic violations)? YES <input type="checkbox"/> NO <input type="checkbox"/> If "yes", give full particulars of each case in an attached statement.				
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 Centre renders a staff member of ICGEB liable to termination or dismissal.				
DATE: ..... SIGNATURE:.....				
N.B. You will be requested to supply documentary evidence, which supports the statements you have made above. Do not, however, send any documentary evidence until you have been asked to do so by the ICGEB and, in any event, do not submit the original texts of references or testimonials unless they have been obtained for the sole use of the Centre.				

**The maximum period of validity for a Personal History form is two years.**