

## Personal History

INSTRUCTIONS  Please provide a cover letter along with your completed Personal History form. Please answer each question clearly and completely. Read carefully and follow all directions.  TYPE OR PRINT IN INK.			Please do not write in this space	
1.	DOCT(C) A DDI	IED FOR		
1.	POST(S) APPI	AED FOR (or preferred field of work):		
	PERSONAL II	NFORMATION		
2.		3.	4.	
_	Family Name	First & Middle Name	7.	Maiden Name, if any 8.
9.	Date of Birth (yy	yy/mm/dd) Place of Birth	Marital Status	Gender
	Nationality at Bi			Second Nationality, if any
	CONTACT IN	FORMATION		
12. 14. 	Permanent Addr	ess (Street, City, Country) (Street, City, Country)		13.  Current Home Telephone No.  15.  Work Telephone No.  17.  Mobile Telephone No.
	EDUCATION to other degrees.	Give exact names of institutions and titles of degrees above	secondary school, as they appear in the	e diploma(s). Please do not translate or equate
Mont	h/Year attended	Degrees and Academic Distinctions	Main Course of Study	Name, Place and Country
fron	n to			
		the studies specified above was not finished or is in progress our education that you consider relevant:	and give reasons for any overlaps of st	udy periods. If you wish, provide any other

			very appointment you have had. Use a separate block for each post. nfully employed. If you need more space, attach additional pages of the
	T		
From	То	Exact title of your post:	
N 11 1		Type of business:	
Name, address and	phone number of pres	ent employer:	
Name and title of pr	esent supervisor:		
Have you any objec	tions to our making er	equiries of your present employer? Yes / No	)
Number and kind of	f employees supervised	d by you:	Reason for leaving:
Total annual net inc	come (after deduction	of tax):	
From	То	Exact title of your post:	
		Type of business:	
Name, address and	phone number of emp	loyer:	
Number and kind o	f employees supervise	1 by you:	Reason for leaving:
Total annual net inc	come (after deduction	of tax):	
DESCRIPTION OF			
From	То	Exact title of your post:	
		Type of business:	
Name, address and	phone number of emp	loyer:	
Number and kind o	f employees supervised	d by you:	Reason for leaving:
	come (after deduction	of tax):	
DESCRIPTION OF	YOUR DUTIES:		

From	То	Exact title of your p	ost:			
		Type of business:				
Name, address and	phone number of emp	oloyer:				
				1		
	f employees supervise			Reason for leaving:		
Total annual net inc DESCRIPTION OF	come (after deduction	of tax):				
DESCRIPTION OF	YOUR DUTIES:					
20. If you have h	and more jobs, please	describe them below. A	also, provide reasons for any over	rlans of work periods.		
20. If you have i	ad more jobs, picase	describe them below. A	iso, provide reasons for any ove	riaps of work perious.		
Tar. Department	Name					
21. DEPENDA	NTS - If you have de	pendants give the follo	wing information:			+
		Data of Pirth			Data of Pirth	
Na	me	Date of Birth (Year/Month/Day)	Relationship	Name	Date of Birth (Year/Month/Day)	Relationship
Nat	me		Relationship	Name		Relationship
Nai	me		Relationship	Name		Relationship
Nai	me		Relationship	Name		Relationship
Na	me		Relationship	Name		Relationship
Na	me		Relationship	Name		Relationship
		(Year/Month/Day)	Relationship			Relationship
		(Year/Month/Day)				Relationship
		(Year/Month/Day)				Relationship
		(Year/Month/Day)				Relationship
		(Year/Month/Day)				Relationship
		(Year/Month/Day)				Relationship
		(Year/Month/Day)				Relationship
If you wish, provide	e any other informatio	(Vear/Month/Day)				Relationship
If you wish, provided	e any other information	(Vear/Month/Day)				Relationship
If you wish, provided  22. KNOWLE  What is your mother	DGE OF LANGUA	(Year/Month/Day)  on regarding your depe	ndants that you consider releva	ıt:	(Year/Month/Day)	
If you wish, provided  22. KNOWLE  What is your mother Please specify other	DGE OF LANGUA	(Year/Month/Day)  on regarding your depe		ving keys: LIMITED (LIM) =	(Year/Month/Day)	ading of
If you wish, provided  22. KNOWLE  What is your mother Please specify other newspapers, routing	DGE OF LANGUA	(Year/Month/Day)  on regarding your dependence of the second of the seco	ndants that you consider releva	ving keys: LIMITED (LIM) =	(Year/Month/Day)	ading of
If you wish, provided  22. KNOWLE  What is your mother please specify other newspapers, routing read and write near	DGE OF LANGUA er tongue?	(Year/Month/Day)  on regarding your dependence of the second of the seco	of knowledge by using the follo	wing keys: LIMITED (LIM) = ussions, read and write more o	Limited conversation, recomplex material. FLUE	ading of
If you wish, provided  22. KNOWLE  What is your mother Please specify other newspapers, routing	DGE OF LANGUA er tongue?	(Year/Month/Day)  on regarding your dependence of the second of the seco	ndants that you consider releva	ving keys: LIMITED (LIM) =	(Year/Month/Day)	ading of
If you wish, provided  22. KNOWLE  What is your mother please specify other newspapers, routing read and write near the control of the contro	DGE OF LANGUA er tongue?	(Year/Month/Day)  on regarding your dependence of the second of the seco	of knowledge by using the follo	wing keys: LIMITED (LIM) = ussions, read and write more o	Limited conversation, recomplex material. FLUE	ading of
If you wish, provided  22. KNOWLE  What is your mother please specify other newspapers, routing read and write near the language of the langua	DGE OF LANGUA er tongue?	(Year/Month/Day)  on regarding your dependence of the second of the seco	of knowledge by using the follo	wing keys: LIMITED (LIM) = ussions, read and write more o	Limited conversation, recomplex material. FLUE	ading of
If you wish, provided  22. KNOWLE  What is your mother newspapers, routing read and write near the second s	DGE OF LANGUA er tongue?	(Year/Month/Day)  on regarding your dependence of the second of the seco	of knowledge by using the follo	wing keys: LIMITED (LIM) = ussions, read and write more o	Limited conversation, recomplex material. FLUE	ading of
If you wish, provided  22. KNOWLE  What is your mother newspapers, routing read and write near the second s	DGE OF LANGUA er tongue?	(Year/Month/Day)  on regarding your dependence of the second of the seco	of knowledge by using the follo	wing keys: LIMITED (LIM) = ussions, read and write more o	Limited conversation, recomplex material. FLUE	ading of
If you wish, provided  22. KNOWLE  What is your mother Please specify other newspapers, routing read and write near No. Language  1. 2. 3. 4.	DGE OF LANGUA er tongue?	(Year/Month/Day)  on regarding your dependence of the second of the seco	of knowledge by using the follo	wing keys: LIMITED (LIM) = ussions, read and write more o	Limited conversation, recomplex material. FLUE	ading of
If you wish, provided  22. KNOWLE  What is your mother newspapers, routing read and write near the second s	DGE OF LANGUA er tongue?	(Year/Month/Day)  on regarding your dependence of the second of the seco	of knowledge by using the follo	wing keys: LIMITED (LIM) = ussions, read and write more o	Limited conversation, recomplex material. FLUE	ading of

23.		(for professional or scient publications you have written				
		· · · · · · · · · · · · · · · · · · ·	-			
24.	OFFICE SKILLS	(For clerical posts only) -	Indicate speed in words nor	minute Add ather languages	if necessary	
24.		English	indicate speed in words per	minute. Aud other languages	ii necessary.	
	Typing					
List s	pecial clerical/secretar	rial skills you possess and any	office machine or equipmen	t you can use:		
25.	COMPUTER SKI		go in the areas listed below V	When indicating your level of	knowledge, use the following	Leve FAID = limited
exper	ience. WORKING KN	NOWLEDGE = regular use of you have no knowledge of any	f the software and ability to a	pply it to meet the requireme	ents of the job. PROFICIENT	= advanced user; able to
Word	Processing:					
Sprea	ndsheets:					
Prese	ntation/Desktop publi	shing:				
Datal	pases:					
Inter	net:					
E-Ma	nil/Communication:					
Progr	<u>amming:</u>					
Other	r software:					
Comp	outer hardware/Specia	al equipment:				
26.	List membership in	professional societies and acti	ivities in civic, public or inter	national affairs.		
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Have	MISCELLANEOUS					
	you taken up legal permanent reside	nce status in any country other than that of your natio	nality? Yes	s / No		
Have	you taken any legal steps towards ch	anging your present nationality?		s / No		
	answer to either question is yes, expl		100	· · · · · <del>·</del>		
	q	<b>v</b> ·				
convid		ummoned into court as a defendant in a criminal proc ation of any law (excluding minor traffic violations)? an attached statement.	eeding or Yes	s / No		
State :	State any other relevant facts. Include information regarding any residence outside the country of your nationality.					
Where did you learn about job opportunities at the IAEA?						
28.	28. WORK CONDITIONS					
Have	you previously worked for the IAEA	? Yes / No				
	If so, enter personnel number:					
Have	you previously submitted an applica	tion for employment with the IAEA? Yes	/ No			
	If so, when?					
Would	l you accept employment for less tha	n six months? Yes / No				
29.		by IAEA or any other international organization?	Yes / No	)		
	If the answer is yes, give the followi		. 1			
	Name	Relationsl	ip	Name of international organization		
Entry into the service of the International Atomic Energy Agency may entail assignment and travel to any area of the world in which the Agency might have responsibilities. If you have any disabilities which might limit your prospective field of work or your ability to travel by air, please describe:						
30.	REFERENCES - List three perso	ns, not related to you, who are familiar with your cha	racter and qualifications	. DO NOT repeat names of supervisors listed in		
30.	REFERENCES - List three perso the employment record.	ns, not related to you, who are familiar with your cha	racter and qualifications	. DO NOT repeat names of supervisors listed in		
30.	-	ns, not related to you, who are familiar with your cha Full address, phone number and e-ma		. DO NOT repeat names of supervisors listed in  Business or occupation		
30.	the employment record.					
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	the employment record.  Full name	Full address, phone number and e-ma	l address	Business or occupation		
30.	the employment record.  Full name		l address	Business or occupation		
	the employment record.  Full name	Full address, phone number and e-ma	l address	Business or occupation		
	the employment record.  Full name	Full address, phone number and e-ma	l address	Business or occupation		
	the employment record.  Full name	Full address, phone number and e-ma	l address	Business or occupation		
	the employment record.  Full name	Full address, phone number and e-ma	l address	Business or occupation		
	the employment record.  Full name	Full address, phone number and e-ma	l address	Business or occupation		
	the employment record.  Full name	Full address, phone number and e-ma	l address	Business or occupation		
	the employment record.  Full name	Full address, phone number and e-ma	l address	Business or occupation		
	IMPORTANT - Please provide any  I certify that the statement made by	Full address, phone number and e-ma	e evaluation of your cand	Business or occupation  lidature:  est of my knowledge and belief. I understand that		
31.	I certify that the statement made by any misrepresentation or material	Full address, phone number and e-ma other information that you consider important for the	e evaluation of your cand	Business or occupation  lidature:  est of my knowledge and belief. I understand that		
31.	IMPORTANT - Please provide any  I certify that the statement made by any misrepresentation or material of to termination or dismissal.  Date:	Full address, phone number and e-ma other information that you consider important for the	evaluation of your cand	Business or occupation  lidature:  est of my knowledge and belief. I understand that the IAEA renders a staff member of the IAEA liable		