



PERSONAL HISTORY STATEMENT (PROJECT PERSONNEL)

This form must be completed accurately. Selection for a United Nations Development Programme post depends on clearance by the requesting government. If your name is under consideration for such a post, a copy of PPS/2 will be sent to the government concerned.

INSTRUCTIONS

1. **LANGUAGE:** Complete this form in English, French or Spanish. However, if you are applying for post listing English, French or Spanish as essential, please use the required language. If you wish to be considered as a bilingual or trilingual candidate, please complete separate sets of PPS/2 in each language.
2. **DOCUMENTARY EVIDENCE:** You may be invited to give documentary evidence in support of the statements you have made. Do not, however, send any document 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 the United Nations.
3. **SALARY, DATE OF EMPLOYMENT, NAME OF SUPERVISOR, AND REASON FOR LEAVING:** In giving the annual salary in your present and most recent appointments, it is important to show both gross amounts and net (i.e. after tax); the total of any allowances should be shown separately.
4. **REFERENCES:** Please list three persons, not related to you, who are familiar with your character and qualifications. Do not repeat the names of the supervisors listed under SALARY, NAME OF SUPERVISOR, and REASON FOR LEAVING. (PPS/1)
5. **EDUCATION:** Name all educational institutions and apprenticeship attended since age 15. Under "Degrees", please give the original full title of each degree obtained. If possible, please enclose photocopies of degrees obtained. If you attended a university, but did not receive a degree, please so indicate. (PPS/2)
6. **PUBLICATIONS OR PAPERS:** Please do not attach. Simplify list titles, publisher and year in which published. (PPS/2)
7. **PROFESSIONAL EXPERIENCE:** This is a chronological record of your professional career. Start with your present (or most recent) position and work backward in time to your first professional job. You may use the Supplementary Sheet if you need more space. (PPS/2)
8. **ANALYSIS OF RELEVANT EXPERIENCE:** If you believe that the chronological record as completed by you under PPS/2 is inadequate for the proper evaluation of your experience, you should amplify on PPS/3 sheet, in your own words, any parts of your experience which in your opinion are particularly relevant to your statement concerning your specialization and to the post requirements if you are applying for a specific post.
9. A recent photograph should be attached, unless you have any objection.
10. This instruction sheet is for guidance only and not to be submitted.

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CONFIDENTIAL ADMINISTRATIVE INFORMATION
FOR USE IN UNITED NATIONS HEADQUARTERS AND NOT FOR SUBMISSION TO GOVERNMENT

1. FAMILY NAME		FIRST NAME		MIDDLE NAME		MAIDEN NAME, if any	
2. DATE OF BIRTH (day/month/year)		3. PLACE OF BIRTH		4. NATIONALITY AT BIRTH		5. PRESENT NATIONALITY	
6. SEX	6. a) HEIGHT	6. b) WEIGHT	7. MARITAL STATUS SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> WIDOW(ER) <input type="checkbox"/> DIVORCED <input type="checkbox"/>				
8. PRESENT ADDRESS			9. PERMANENT ADDRESS			10. PRESENT TELEPHONE NO. Office: () Home: () E-mail:	
11. WHAT DO YOU CONSIDER AS YOUR SPECIALIZATION?							
12. HAVE YOU ANY DEPENDANTS? YES <input type="checkbox"/> NO <input type="checkbox"/> IF THE ANSWER IS "YES", PLEASE INDICATE HEREUNDER:							
NAME		Date of Birth (day/mo/year)		RELATIONSHIP		NAME	
						Date of Birth (day/mo/year)	
						RELATIONSHIP	
13. WOULD YOU ACCEPT EMPLOYMENT FOR: LESS THAN SIX MONTHS? <input type="checkbox"/> ONE YEAR? <input type="checkbox"/> MORE THAN ONE YEAR? <input type="checkbox"/>							
14. PLEASE STATE WHETHER YOU ARE A PERMANENT RESIDENCE OF ANY COUNTRY OTHER THAN THAT OF YOUR NATIONALITY AND IF SO, WHICH ONE? IF YOU HAVE YOU TAKEN ANY LEGAL STEPS TOWARDS CHANGING YOUR PRESENT NATIONALITY, PLEASE EXPLAIN:							
15. ARE ANY OF YOUR RELATIVES EMPLOYED BY THE UNITED NATIONS OR AFFILIATED INTERNATIONAL AGENCIES? YES <input type="checkbox"/> NO <input type="checkbox"/> If answer is "yes", please indicate hereunder:							
NAME			RELATIONSHIP		NAME OF INTERNATIONAL ORGANIZATION		
16. HAVE YOU PREVIOUSLY SUBMITTED AN APPLICATION FOR EMPLOYMENT WITH THE UNITED NATIONS OR ANY AFFILIATED AGENCY? YES <input type="checkbox"/> NO <input type="checkbox"/> IF THE ANSWER IS YES, PLEASE INDICATE WHEN AND WHERE:							

17. SALARY, NAME OF SUPERVISOR, AND REASON FOR LEAVING (see Instruction 3)

(Confidential details pertaining to the first five entries listed under PROFESSIONAL EXPERIENCE on the second and third pages of PPS/2)

POSITION AS LISTED on PPS/2	ANNUAL SALARY GROSS AND NET (after taxes)		ALLOWANCES in addition to salary	SUPERVISOR'S NAME	DATES (day/month/year)	Reason for Leaving
		Starting				
A.	gross				From:	
	net				To:	
B.	gross				From:	
	net				To:	
C.	gross				From:	
	net				To:	
D.	gross				From:	
	net				To:	
E.	gross				From:	
	net				To:	

18. HAVE YOU ANY OBJECTIONS TO OUR MAKING INQUIRIES OF YOUR PRESENT EMPLOYER?

YES ☐ NO ☐

19. REFERENCES: (see Instruction 4)

FULL NAME	FULL ADDRESS	TELEPHONE NO.	BUSINESS or OCCUPATION
		Office:	
		Home:	
		Office:	
		Home:	
		Office:	
		Home:	

20. 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)? YES ☐ NO ☐

If "Yes", give full particulars of each case in an attached statement.

I certify that the statements made by me are true, complete and correct to the best of my knowledge and belief. I understand that any material misrepresentation or omission made hereon or on any other document requested by the United Nations renders me liable to termination or dismissal.

DATE: _____

SIGNATURE: _____

JOB No.



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THIS INFORMATION MAY BE SUBMITTED TO MEMBER-GOVERNMENTS

PHOTO

Date: _____

Signature: _____

<i>Family Name</i>	<i>First Name</i>	<i>Middle Name</i>	3. NATIONALITY:	6. Present Telephone No.:
1. NAME:			4. DATE OF BIRTH: (dd/mm/yyyy)	Office:
2. PRESENT ADDRESS:			5. MARITAL STATUS:	Home:

7. Knowledge of Languages:

Mother Tongue: _____

OTHER LANGUAGES	READ		WRITE		SPEAK		UNDERSTAND	
	Easily	Not Easily	Easily	Not Easily	Fluently	Not Fluently	Easily	Not Easily
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. EDUCATION (see Instruction 5)

DATES ATTENDED		NAME and LOCATION of INSTITUTION of LEARNING	ACADEMIC DEGREES and CERTIFICATES or DIPLOMAS OBTAINED	MAIN FIELD of STUDY
From	To			

9. LIST ANY PUBLICATIONS OR PAPERS: (see Instruction 6)

10. LIST SPECIAL QUALIFICATIONS AND SKILLS CONFIRMED BY LICENSES HELD AND MEMBERSHIP IN PROFESSIONAL, CIVIC, PUBLIC OR INTERNATIONAL SOCIETIES OR INSTITUTIONS RELEVANT TO YOUR APPLICATION; INDICATE THE CLASS OF MEMBERSHIP WHEN APPROPRIATE:

11. PROFESSIONAL EXPERIENCE *(see Instruction 7)*

A.	<div style="display: flex; justify-content: space-between;"> From: (dd/mm/yyyy) To most recent date of employment: (dd/mm/yyyy) </div> <p>EMPLOYER (Name and Address) AND TYPE OF BUSINESS:</p> <p>TITLE OF POST AND NATURE OF DUTIES:</p> <p>NUMBER AND KIND OF EMPLOYEES SUPERVISED:</p>
B.	<div style="display: flex; justify-content: space-between;"> From: (dd/mm/yyyy) To most recent date of employment: (dd/mm/yyyy) </div> <p>EMPLOYER (Name and Address) AND TYPE OF BUSINESS:</p> <p>TITLE OF POST AND NATURE OF DUTIES:</p> <p>NUMBER AND KIND OF EMPLOYEES SUPERVISED:</p>
C.	<div style="display: flex; justify-content: space-between;"> From: (dd/mm/yyyy) To most recent date of employment: (dd/mm/yyyy) </div> <p>EMPLOYER (Name and Address) AND TYPE OF BUSINESS:</p> <p>TITLE OF POST AND NATURE OF DUTIES:</p> <p>NUMBER AND KIND OF EMPLOYEES SUPERVISED:</p>

PROFESSIONAL EXPERIENCE <i>(Continued)</i>	
D.	<p>From: (dd/mm/yyyy) To most recent date of employment: (dd/mm/yyyy)</p> <p>EMPLOYER (Name and Address) AND TYPE OF BUSINESS:</p> <p>TITLE OF POST AND NATURE OF DUTIES:</p> <p>NUMBER AND KIND OF EMPLOYEES SUPERVISED:</p>
	<p>From: (dd/mm/yyyy) To most recent date of employment: (dd/mm/yyyy)</p> <p>EMPLOYER (Name and Address) AND TYPE OF BUSINESS:</p> <p>TITLE OF POST AND NATURE OF DUTIES:</p> <p>NUMBER AND KIND OF EMPLOYEES SUPERVISED:</p>
	<p>From: (dd/mm/yyyy) To most recent date of employment: (dd/mm/yyyy)</p> <p>EMPLOYER (Name and Address) AND TYPE OF BUSINESS:</p> <p>TITLE OF POST AND NATURE OF DUTIES:</p> <p>NUMBER AND KIND OF EMPLOYEES SUPERVISED:</p>
	<p>From: (dd/mm/yyyy) To most recent date of employment: (dd/mm/yyyy)</p> <p>EMPLOYER (Name and Address) AND TYPE OF BUSINESS:</p> <p>TITLE OF POST AND NATURE OF DUTIES:</p> <p>NUMBER AND KIND OF EMPLOYEES SUPERVISED:</p>

Use additional sheet if you have held more posts.



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(see Instruction 8)

ANALYSIS OF RELEVANT EXPERIENCE: *Use this space to analyze your experience in relation to your statement concerning your specialization. Additionally, if you are applying for a specific post, please indicate the number of the Job Description of this post both here and in the box provided in the upper left corner of PPS/2, and analyze your experience in relation to the duties and requirements set out in the Job Description.*
