

INTERNATIONAL ORGANIZATION FOR MIGRATION

If you are applying for a specific Vacancy Notice, please quote relevant position title and vacancy number:

Applications must be filed in one of IOM's official languages
(English, French or Spanish).

Applications in other languages may be rejected. Make sure you

PERSONAL HISTORY

ATTACH PHOTOGRAPH HERE

complete all four pages of the personal history form.										
1. A) Surname		First Name			Middle Name			Maiden Name, if any		
B) List any other names used 2. A) Permanent Address								B)	Telephone 1	No.
3. A) Present Residence (Specify 6	City, Province	e or State, Cou	ıntry)		B) Since (date) Until (antic			ipated date) C) Telephone No.		
D) E-mail address (1)					E) E-mail address (2), if applicable					
4. A) Place of Birth (If Swiss, canton and origin)		B) Date of Birth			C) Citizenship at Birth		D) Present Citizenship			
E) Passport or Identity Card No	•			Date of	f Issue/Date o	f Expiry		Place of Issue (in full)		
5. Sex (Check)		6. Marital S	Status (Chec	ek)						
	nale	Single	`	Married	.l	Widow(er)		Divorced _	Se	eparated
7. Have you any depedents?		Yes		No		If answer is	"Yes" give f	ollowing info	ormation:	
Name	Age	Relati	onship		Name		Age		Relationship)
8. LANGUAGES (List mother tongue first)										
Language		READ		WRITE		T _	SPEAK SPEAK		1 _	
		Excellent	Good	Poor	Excellent	Good	Poor	Excellent	Good	Poor
		1								

					is appropria	te of schools	or other form	al training or	education from age 14 (e.g	g. high
school, technical school, apprenticeship, university or its equivale Name and Place			Туре		Years attended From To		Certificates, diplomas, degrees academic distinctions obtained			
							Trom	10	deductific distillctions	ootunice
0. A) Indicate speed in	n words per m	ninute (if app	licable)						you possess and machines	s and
	<u> </u>			O	Other Languages			ou can use		
Shorthand	English	French	Spanish							
Syping										
2. List activities in civ	vic, public or i	nternational	affairs and na	me any signi	ificant public	cations you l	nave written.			
3. For what kind of w	ork do you wi	ish to be con	sidered?							
4. A) Are you willing	g to accept a p	ost requiring	travel?							
B) Would you acce	ept short term	employment	?							
C) Would you acce	ept an emerger	ncy field assi	gnment at sho	ort notice?						
5. In the event of your	r being selecte	ed, how much	n notice would	l you need be	efore appoin	tment?				
6. Have you any object	ctions to our p	naking ingui	ries of vour pr	esent emnlos	ver?			Yes	No	

	additional sheets if	necessary.	Description of duties and responsibilities		
Present or most rec		IA 1 1			
From	Dates To	Annual emoluments:			
(month/year)	(month/year)	Salary			
		Allowances			
		Total			
Business or organiz	zation (name and add	dress, including city)			
Title of your post o	r	Name of Supervisor			
Number and kind o	f employees supervi	sed by you			
Personal address di	uring this period				
Reason for leaving					
I	Dates	Total annual emoluments:	Description of duties and responsibilities		
From (month/year)	To (month/year)				
Business or organiz	zation (name and add	dress, including city)			
Title of your post o	r	Name of Supervisor			
Number and kind o	of employees supervi	sed by you			
Personal address d	uring this period				
Reason for leaving					
I	Dates	Total annual emoluments:	Description of duties and responsibilities		
From (month/year)	To (month/year)				
Business or organiz	zation (name and ado	dress, including city)			
Title of your post o occupation	r	Name of Supervisor			
Number and kind o	of employees supervi	sed by you			
Personal address d	uring this period				
Reason for leaving					

			e order each activity in which you have been engaged, ment of more than six months' duration. Use
Present or most r	recent occupation	1	Description of duties and responsibilities
resent of most i	Dates	Annual emoluments:	Description of duties and responsionities
From (month/year)	To (month/year)	Salary	
		Allowances	
	·- ·· (1 11	Total	
business or orga	nization (name and add	ress, including city)	
Fitle of your post	t or	Name of Supervisor	
Number and kind	d of employees supervis	ed by you	
Personal address	during this period		
Reason for leavir	ng		
	Dates	Total annual emoluments:	Description of duties and responsibilities
From (month/year)	To (month/year)		
Business or orga	nization (name and add	ress, including city)	
Title of your post or occupation		Name of Supervisor	
Number and kind	d of employees supervis	ed by you	
Personal address	during this period		
Reason for leavin			
_	Dates	Total annual emoluments:	Description of duties and responsibilities
From (month/year)	To (month/year)		
Business or orga	nization (name and add	ress, including city)	
Title of your post or occupation		Name of Supervisor	
	d of employees supervis	еа ву уои	
	during this period		
Reason for leaving	ng		

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From (month/year)	To (month/year)	Salary	
		Allowances	
	·- ·· (1 11	Total	
business or orga	nization (name and add	ress, including city)	
Fitle of your post	t or	Name of Supervisor	
Number and kind	d of employees supervis	ed by you	
Personal address	during this period		
Reason for leavir	ng		
	Dates	Total annual emoluments:	Description of duties and responsibilities
From (month/year)	To (month/year)		
Business or orga	nization (name and add	ress, including city)	
Title of your post or occupation		Name of Supervisor	
Number and kind	d of employees supervis	ed by you	
Personal address	during this period		
Reason for leavin			
_	Dates	Total annual emoluments:	Description of duties and responsibilities
From (month/year)	To (month/year)		
Business or orga	nization (name and add	ress, including city)	
Title of your post or occupation		Name of Supervisor	
	d of employees supervis	еа ву уои	
	during this period		
Reason for leaving	ng		

18. References: List three	persons not related to you who are familiar with your charac	cter and qualifications. Do not repeat names of supervisors listed
under Item 17.		
Name in full	Complete Address (Telephone No. if known)	Business or Occupation
		•
10 (a) Have you ever bee	n arrested indicted or summoned into court as a defendant	in a criminal proceeding, or convicted, fined or imprisoned or
placed on probation in conr		ted or required to deposit bail or collateral for the violation of any
	Answer "Yes" or "No"	
	Answer "Yes" or "No"	
	es" under item 19 (a) above, attach separate sheet giving de where arrested, and disposition.	stails of all arrests and fines other than minor traffic violations.
	t facts. Include information regarding any residence or proloncluded in Section 17 which you believe will serve in the e	onged travel abroad, give dates, areas, purpose, etc. State any valuation of your record.
	which might limit the performance of your work. compliance with medical requirements.)	
-		ion contained in this form is, to the best of my knowledge, true, at of material facts may result in disciplinary action including
Place and Date	Signature	
1 face and Date	Dignatule	
	DI EAGE NOTE	
	PLEASE NOTE	
		ore than one year from date of receipt. While you may rest assured owledged, and any further correspondence will be initiated by the