



International Organization for Migration (IOM)
The UN Migration Agency

PERSONAL HISTORY FORM

If you are applying for a specific Vacancy Notice, please quote the relevant position title and SVN/VN number here:

IOM SOUTH AFRICA
Regional & Country Offices
Walker Creek Office Park, Bld. # 4
90 Florence Ribeiro Avenue
Nieuw Muckleneuk, Groenkloof,
0181
PO Box 55391, Arcadia
Pretoria, South Africa

ATTACH PHOTOGRAPH HERE

Personal details:

<u>Surname:</u>	<u>Middle Name/s:</u>	<u>First Name:</u>
<u>Date of birth:</u>	<u>Place of birth (town and country):</u>	<u>Nationality:</u>
<u>ID number/Passport number:</u>	<u>Place of Issue:</u>	<u>Date of issue:</u> <u>Date of expiry:</u>
<u>Gender:</u>	<u>Marital Status:</u>	<u>In case married, date of marriage:</u>
<u>Spouse Name and Surname:</u>	<u>Spouse Date of Birth:</u>	<u>Number of Dependents:</u>

Dependents details:

<u>Full Names and Surname</u>	<u>Age</u>	<u>DoB</u>	<u>Gender</u>	<u>Living with staff member, yes/no</u>



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Contact details:

<u>Full residential address, this includes street name, nr, complex name, nr, suburb (where you are currently staying):</u>	<u>Postal Address:</u>	<u>Telephone number at home:</u>
<u>Telephone number at work:</u>	<u>Mobile number:</u>	<u>Email address:</u>

Competencies:

1. Language skills:

List mother tongue first

<u>Language</u>	<u>READ</u>			<u>WRITE</u>			<u>SPEAK</u>		
	<u>Excellent</u>	<u>Good</u>	<u>Poor</u>	<u>Excellent</u>	<u>Good</u>	<u>Poor</u>	<u>Excellent</u>	<u>Good</u>	<u>Poor</u>

2. Computer skills:

Please list the computer skills you have and rate your ability



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Computer Programs	Basic	Intermediate	Advanced

Educational information:

Give full details, using the following space in so far as it is appropriate of schools or other formal training or education from age 14 (e.g. high school, technical school, apprenticeship, university or its equivalent):

Name and Place	Type	Years attended		Certificates, diplomas, degrees or academic distinctions obtained
		From	To	

A) Indicate speed in words per minute (if applicable)					B) List any special skills you possess and machines and equipment you can use		
	English	French	Portuguese	Other Languages			
Shorthand							
Typing							

List all organizations with which you are or have been affiliated. This list is to include all affiliations, whether social, professional, fraternal, etc.

List activities in civic, public or international affairs and name any significant publications you have written.



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Work expectancy:

For what kind of work do you wish to be considered?

What is your salary expectation?

A) Are you willing to accept a post requiring travel?

B) Would you accept short term employment?

C) Would you accept an emergency field assignment at short notice?

In the event of your being selected, how much notice would you need before appointment?



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Employment History:

Starting with your present occupation, list in reverse order each activity in which you have been engaged, accounting fully for your time. List military service and any period of unemployment of more than six months' duration. Use a separate block for each period and additional sheets if necessary.

Present or most recent occupation

<u>Dates</u>		<u>Total annual emoluments:</u>	<u>Description of duties and responsibilities</u>
From (month/year)	To (month/year)		
Business or organization (name and address, including city)			
Title of your post or occupation		Name of Supervisor	
Number and kind of employees supervised by you			
Personal address during this period			
Reason for leaving			
<u>Dates</u>		<u>Total annual emoluments:</u>	<u>Description of duties and responsibilities</u>
From (month/year)	To (month/year)		
Business or organization (name and address, including city)			
		Name of Supervisor	



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Title of your post or occupation			
Number and kind of employees supervised by you			
Personal address during this period			
Reason for leaving			
Dates		Total annual emoluments:	Description of duties and responsibilities
From (month/year)	To (month/year)		
Business or organization (name and address, including city)			
Title of your post or occupation	Name of Supervisor		
Number and kind of employees supervised by you			
Personal address during this period			
Reason for leaving			
Dates		Total annual emoluments:	Description of duties and responsibilities
From (month/year)	To (month/year)		
Business or organization (name and address, including city)			
		Name of Supervisor	



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Title of your post or occupation	
Number and kind of employees supervised by you	
Personal address during this period	
Reason for leaving	

Reference Checks:

Have you any objections to our making enquiries to your present employer: Yes No

List three persons not related to you who are familiar with your character and qualifications. Do not repeat names of supervisors listed under Item 17.

<u>Name in full</u>	<u>Complete Address</u> (Telephone No. if known)	<u>Email Address</u>	<u>Business or Occupation</u>

(a) Have you ever been arrested, indicted or summoned into court as a defendant in a criminal proceeding, or convicted, fined or imprisoned or placed on probation in connection with such a proceeding, or have you ever been arrested or required to deposit bail or collateral for the violation of any law or regulation, civil or military (excluding traffic violations)?

Answer "Yes" or "No"

(b) If your answer is "Yes" under item 19 (a) above, attach separate sheet giving details of all arrests and fines other than minor traffic violations. Specify charge, date, place where arrested, and disposition.

State any other relevant facts. Include information regarding any residence or prolonged travel abroad, give dates, areas, purpose, etc. State any significant experience not included in Section 17 which you believe will serve in the evaluation of your record.



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State any disabilities which might limit the performance of your work.
(Appointment is subject to compliance with medical requirements.)

Having answered every question above, I, the undersigned, declare that the information contained in this form is, to the best of my knowledge, true, complete and accurate, knowing that, if employed, any false declaration or concealment of material facts may result in disciplinary action including dismissal.

Place and Date: _____

Signature: _____

PLEASE NOTE

Applications will not, as a general rule, be valid or retained by the Organization for more than one year from date of receipt. While you may rest assured that your candidature will be carefully examined, receipt of this form will not be acknowledged, and any further correspondence will be initiated by the Organization.