INTER-PARLIAMENTARY UNION



PERSONAL HISTORY

Attach a recent photo of yourself

Please answer each question clearly and completely.

Type or print in ink.

Read carefully and follow all directions.

1. Family name First name						Other names											
2. Date of birth (DD/MM/YYYY)					3. Country of birth					4. Nationality/ies at birth				5. Present nationality/ies			
6. Sex: M	efer not	to say 🗌	7. Ma	7. Marital status: Single Married				Civil pa	Civil partnership Legally separated			d 🗆	Divorced	☐ Widov	v(er)		
8. Permanent address:							9. Present ac	sent address: 10. Teleph					ephone	none no. during working hours:			
Telephone: E-mail:							Telephone:										
11. Do you h	nave any	depend	lants? Y	′es 🗌	No 🗆	If "	yes", give the	following	g inform	ation:							
	Na	ame		A	Age Relationship			nip		Name		Age		Relationship			
12. Vacancy	Notice a	applied f	or:	•					,			•	•				
-				lication	for empl	oyment	with the IPU?										
If so, whe	en and fo	or which	position?														
14. Indicate	the name	e of any	relatives wor	king in t	he IPU d	or other i	nternational o	rganizati	ons:								
Name:				0	rganizat	ion:				Relations	ship:						
15. KNOWL	EDGE C	F LANG	GUAGES: Ind	icate yo	ur first la	anguage;	; if not the sar	ne, indica	ate also	mother to	ongue:						
Othor	Read				Write					Speak				Understand			
Other languages	Basic	Interm ediate	Advanced	Fluent	Basic	Interm ediate	Advanced	Fluent	Basic	Interm ediate	Advanced	Fluent	Basic	Interm ediate	Advanced	Fluent	
]												

Please return completed form to the Personnel Department of the Inter-Parliamentary Union, 5 chemin du Pommier, P.O.Box 330, CH-1218 Le Grand-Saconnex-Geneva, Switzerland.

E-mail: postbox@ipu.org

16. EDUCATION: Please give equate to other degrees. E	exact name of in exclude primary/se	stitutions and title econdary school	es of de	egrees in original lar nave a university degr	nguage starting with three or equivalent.	he most recent. Ple	ase do not translate or			
Institution Name, place and co	Years atte	ended To	Certificate	s, diplomas, degrees distinctions obtaine	and academic d	Main area of study				
	·									
17. List any significant publicat	ions you have wri	tten (do not atta	ch):							
18. EMPLOYMENT RECORD: Use a separate block for ea If you need more space, att	ach post. Include	also service in the	he armo	reverse order every ed forces and note ar	employment you have ny period during which	e had. n you were not gainf	ully employed.			
From Month/Year	, , , , , , , , , , , , , , , , , , ,									
Name of employer:			Т	Type of activity:						
Address and telephone of emp	loyer:		١	Name of supervisor:						
				Number and kind of el supervised by you:	j:					
DESCRIPTION	N OF YOUR DUT	TIES								
From Month/Year	To Month/Year	Sa Starting	lary per	r annum Final	Exact title of your po	ost:				
Name of employer:			T	Type of activity:						
Address and telephone of emp		١	Name of supervisor:							
				Number and kind of elsupervised by you:	Reason for leaving	j:				
DESCRIPTION	N OF YOUR DUT	TES								

From	To	Salarv	per annum	Exact title of your po	ost:					
Month/Year Month/Year Starting		Final	, , , , , ,							
Name of employer:			Type of activity:							
Address and telephone of emp	loyer:		Name of supervisor:							
			Number and kind of ou	mpleyeee	December legging:					
			supervised by you:	Number and kind of employees Reason for leaving: supervised by you:						
DESCRIPTION	N OF YOUR DUT	TES								
From	To	Salan	nor annum	Exact title of your po	oct:					
Month/Year	Month/Year	Starting	per annum Exact title of your post:							
Name of employer:			Type of activity:							
Address and telephone of emp	loyer:		Name of supervisor:	Name of supervisor:						
			Number and kind of ei	Number and kind of employees supervised by you: Reason for leaving:						
DESCRIPTIO	N OF YOUR DUT	TES	3,700							
From Month/Year	To Month/Year	Salary Starting	per annum Final	per annum Exact title of your post:						
World () Cal	Wienkry Fedr	Otalting	- mai							
Name of employer:			Type of activity:							
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Address and telephone of emp	lover:		Name of supervisor:							
, , , , , , , , , , , , , , , , , , , ,	,									
			Number and kind of er supervised by you:	mployees	Reason for leaving:					
DESCRIPTIO	N OF YOUR DUT	TES	Supervised by you.							
19. Do you have any objections	s to our making in	quiries of your pres	ent employer?	Yes [] No 🗆					
20. REFERENCES: List three	persons, not rela	ted to you, who are	e familiar with your chara	cter and qualifications	i.					
Do <u>not</u> repeat names of su		idei ileili 10.	F.11. ASS	DECC	COCURATION					
FULI	LNAME		FULL ADD	KEOO	OCCUPATION					

21. State any other relevant facts, including membership in professional societies.
22. Compliance with health guidelines
Appointment is subject to a satisfactory medical examination and might entail travel to any area of the world. Do you have any disabilities which might limit your work or your ability to engage in air travel?
No ☐ Yes ☐ Explain:
acknowledge that the IPU places a high priority on the health and safety of its personnel and visitors. I understand that, in the interest of maintaining a safe working environment and for official travel purposes if appointed, I shall comply with all health and safety guidelines, policies, and protocols implemented by the IPU.
No ☐ Yes ☐
23. Have you ever been arrested, indicted, or summoned into a court as a defendant in a criminal proceeding, or convicted, fined or imprisoned for the violation of any law (excluding minor traffic violations)?
No
If "yes", give full particulars of each case in an attached statement.
24. How did you hear about the Inter-Parliamentary Union and this post?
25. 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 misrepresentations or material omission made on a Personal History form or other document requested by the IPU renders a staff member of the IPU liable to 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 Organization 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 Organization.

All information disclosed in your job application, including but not limited to your resume, cover letter, and any supporting documents, will be treated with the utmost confidentiality and in accordance with the IPU <u>Data Protection Policy</u>. This information will be accessible only to individuals involved in the recruitment process, and it will not be disclosed to any third parties without your explicit consent.