

Is this UNHCR experience?

☐ Yes ☐ No

## **Personal History Form Supplementary Sheet**

WORK EXPERIENCE (Mandatory to complete, if any). Please provide as much as much information as possible. Starting with your present position, list in REVERSE ORDER all employment you have had, using a separate block for each work experience. Also include service in the armed forces. Note any period during which you were not gainfully employed. Four blocks are provided; if you need more space, attach additional pages ensuring to give the same information requested here. Start Date (dd/mm/yyyy) End Date (dd/mm/yyyy) ☐ Full ☐ Part-Time ☐ Check if ongoing **Employer** Job Title **Supervisor Name** Type of Employment ☐ Employee ☐ Consultant ☐ Intern ☐ Self-employed ☐ UNV ☐ Volunteer ☐ Other If 'Other' please explain **Type of Workers Supervised** # of Persons Supervised Supervisor e-mail Supervisor Phone **Ending Salary** (annual Net) Currency **Description of Duties** (please enlist in bullet points) Reason for Leaving **Employer Address** City **Postal Code** Country ☐ Governmental Org. ☐ Int. Org. ☐ Non-Governmental Org. ☐ Private Sector ☐ Other Type of Business Is this UN Experience? ☐ Yes ☐ No Grade (if applicable) **UN Index #** Is this UNHCR experience? ☐ Yes ☐ No **UNHCR MSRP ID** ☐ Fixed Term Indefinite □ Temporary Appointment Other **Contract Type** If 'Other' please indicate (e.g. UNV, UNOPS ICA, Individual Consultant, Intern, ICNC, DRC etc.) ☐ Full ☐ Part-Time Start Date (dd/mm/yyyy) End Date (dd/mm/yyyy) ☐ Check if ongoing **Employer** Job Title **Supervisor Name** Type of Employment ☐ Employee ☐ Consultant ☐ Intern ☐ Self-employed ☐ UNV ☐ Volunteer ☐ Other If 'Other' please explain Type of Workers Supervised # of Persons Supervised Supervisor e-mail Supervisor Phone **Ending Salary** (Annual Net) Currency **Description of Duties** (please enlist in bullet points) Reason for Leaving **Employer Address Postal Code** Country City Type of Business ☐ Governmental Org. ☐ Int. Org. ☐ Non-Governmental Org. ☐ Private Sector ☐ Other **UN Index #** Is this UN Experience? ☐ Yes ☐ No Grade (if applicable)

**UNHCR MSRP ID** 

Contract Type	☐ Fixed Term ☐ Indefinite [			☐ Temporary Appointment ☐ Other				
If 'Other' please indicate (e.g. UNV, UNOPS ICA, Individual Consultant, Intern, ICNC, DRC, etc.)								
Start Date (dd/mm/yyyy)		End Date (dd/r	mm/yyyy)		Ft	ıll 🔲 F	art-Time	
Employer					CI	Check if ongoing		
Job Title								
Supervisor Name								
Type of Employment	☐ Employee ☐ Consultant ☐ Intern ☐ Self-employed ☐ UNV ☐ Volunteer ☐ Other							
If 'Other' please explain								
Type of Workers Supervised		# of Persons Supervised						
Supervisor e-mail			Supervisor Phon		none			
Ending Salary (Annual Net)			Currency					
Description of Duties (please enlist in bullet points)					·			
Reason for Leaving								
Employer Address								
City	Postal Code			Country				
Type of Business	☐ Governmenta	l Org. 🗌 Int. O	rg. 🗌 Non	n-Governmental C	rg. 🗌 F	Private	Sector  Othe	er
Is this UN Experience?	☐ Yes ☐ No Grade (if ap		plicable)		UN Ind	lex#		
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Contract Type	☐ Fixed Term [	Indefinite	☐ Tem	porary Appointme	ent	Oth	ner	
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City	Postal Code		Country					
Type of Business	Governmental Org. Int. Or		g. Non-Governmental Org.		rg. 🗌 F	☐ Private Sector ☐ Other		
Is this UN Experience?	☐ Yes ☐ No	Grade (if ap	plicable)	UN Index #				
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