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| Please **type** your answers | | | WASSENAAR ARRANGEMENTPERSONAL HISTORY FORM | | | | | | | | | |  | |
| 1*.* Family name | | | | | First name | | | | | | | Other names | | |
| 2. Date of birth | 3. Place of birth | | | | | | 4. Nationality at birth | | | | 5. Present nationality | | | 6. Gender |
| 7. EMPLOYMENT RECORD Starting with your present position, list *in reverse order* your employment for the last 12 years. Use a separate block for each position. Also include service in the armed forces and note any period during which you were not gainfully employed. If you need more space, attach additional pages of the same size. | | | | | | | | | | | | | | |
| From | | To | | Annual Salary | | | | | | Exact title of your position: | | | | |
| Month/Year | | Month/Year | | Starting | | | | Final | |  | | | | |
| Name of employer: | | | | | | | | | Type of business: | | | | | |
| Address of employer: | | | | | | | |  | Name of supervisor:  May we contact them? Yes  No  If no, do you wish to elaborate?  Telephone No.  Email: | | | | | |
| Number of employees supervised by you: | | | | | | | |  | Reason for leaving: | | | | | |
| DESCRIPTION OF YOUR DUTIES | | | | | | | | | | | | | | |
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| From | | To | | Annual Salary | | | | | | Exact title of your position: | | | | |
| Month/Year | | Month/Year | | Starting | | Final | | | |  | | | | |
| Name of employer: | | | | | | | | | Type of business: | | | | | |
| Address of employer: | | | | | | | |  | Name of supervisor:  May we contact them? Yes  No  Telephone No.  Email: | | | | | |
| Number of employees supervised by you: | | | | | | | |  | Reason for leaving: | | | | | |
| DESCRIPTION OF YOUR DUTIES | | | | | | | | | | | | | | |
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| From | To | Annual Salary | | | | | | | Exact title of your position: | |
| Month/Year | Month/Year | Starting | | | Final | | | |  | |
| Name of employer: | | | | | | | | Type of business: | | |
| Address of employer: | | | | | |  | | Name of supervisor:  May we contact them? Yes  No  Telephone No.  Email: | | |
| Number of employees supervised by you: | | | | | |  | | Reason for leaving: | | |
| DESCRIPTION OF YOUR DUTIES | | | | | | | | | | |
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| From | To | Annual Salary | | | | | | | Exact title of your position: | |
| Month/Year | Month/Year | Starting | | | Final | | | |  | |
| Name of employer: | | | | | | | | Type of business: | | |
| Address of employer: | | | | | |  | | Name of supervisor:  May we contact them? Yes  No  Telephone No.  Email: | | |
| Number of employees supervised by you: | | | | | |  | | Reason for leaving: | | |
| DESCRIPTION OF YOUR DUTIES | | | | | | | | | | |
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| 8. EDUCATION - University or equivalent | | | | | | | | | | |
| Name, city and country | | | Years attended | | | | Degrees and academic distinctions | | | Main course of study |
|  | | | from | to | | |  | | |  |
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| Schools or other formal training (e.g., high school, technical school or apprenticeship) | | | | | | | | | | | | | | | | | | | | | |
| Name, city and country | | | | Type | | | | | | Years attended | | | | | Certificates or diplomas obtained | | | | | | |
|  | | | | | | from | | | | to |  | | | | | | |
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| 9. KNOWLEDGE OF LANGUAGES What is your mother tongue? | | | | | | | | | | | | | | | | | | | | | |
| OTHER LANGUAGES | | | | | | | | SPOKEN | | | | | | | | | WRITTEN | | | | |
| Easily | | | | | Not easily | | | | Fluently | | | Not easily | |
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| 10. Which of the following are you familiar with:  MS WORD: Yes  No  EXCEL: Yes  No  POWERPOINT: Yes  No  LIBRE OFFICE: Yes  No  WEBEX: Yes  No  OTHER: | | | | | | | | | | | | | | | | | | | | | |
| 11. Marital Status: Single  Married  Separated  Divorced  Widowed | | | | | | | | | | | | | | | | | | | | | |
| If married, please provide the following information: | | | | | | | | | | | | | | | | | | | | | |
| Spouse's Name | | Spouse's Nationality | | | | | | | | | Occupation and Company's Name & Address | | | | | | | | | | |
| 12. Permanent address    Telephone No. | | | | | | 13. Present address *(if different)*    Telephone No. | | | | | | | | | | | | 14. Office Tel:    E-mail: | | | |
| 15. Do you have any dependents? Yes  No  If the answer is "yes", give the following information: | | | | | | | | | | | | | | | | | | | | | |
| Name | Date of Birth | | | | | | Relationship | | Name | | | | | | | | | | Date of Birth | | Relationship |
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| 16. Have you taken up legal permanent residence status in any country other than that of your nationality?  Yes  No  If the answer is "yes", which country? | | | | | | | | | | | | | | | | | | | | | |
| 17. Have you taken any legal steps towards changing your present nationality? Yes  No  If the answer is "yes", explain fully: | | | | | | | | | | | | | | | | | | | | | |
| 18. Are any of your relatives employed by a public international organisation? Yes  No  If the answer is "yes", give the following information: | | | | | | | | | | | | | | | | | | | | | |
| Name | | | | | Relationship | | | | | | | Name of international organisation | | | | | | | | | |
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| 19. Have you previously submitted an application for employment with the Wassenaar Arrangement?  If so, when? | | | | | | | | | | | | | | | | | | | | | |
| 20. Are you now, or have you ever been, a permanent civil servant in your government's employ? Yes  No  If the answer is "yes", when? | | | | | | | | | | | | | | | | | | | | | |
| 21. Are you in good physical condition with no chronic health problems that may prevent  you from carrying out your assignment or may pose a threat to the health of others? Yes  No | | | | | | | | | | | | | | | | | | | | | |
| 22. Availability for employment from time of offer? | | | | | | | | | | | | | | | | | | | | | |
| 23. REFERENCES: List three persons, not related to you, who are familiar with your character and qualifications.  *Do not repeat names of supervisors listed under Item 7.* | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | | EMAIL OR TELEPHONE NUMBER | | | | | | | | | | | | | Business or Occupation | | | | | |
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| 24. State any other relevant facts. | | | | | | | | | | | | | | | | | | | | | |
| 25. 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. | | | | | | | | | | | | | | | | | | | | | |
| 26. 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 misrepresentation or material omission made on a Personal History form or other document requested by the Wassenaar Arrangement renders a staff member of the Wassenaar Arrangement liable to termination or dismissal.  DATE       SIGNATURE: ------------------------------------------------------------------------ | | | | | | | | | | | | | | | | | | | | | |
| N.B. You may 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 Wassenaar Arrangement 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 Arrangement.  ONLY THOSE APPLICANTS WHO ARE OF INTEREST TO THE WASSENAAR ARRANGEMENT WILL BE CONTACTED | | | | | | | | | | | | | | | | | | | | | |

*Authorised persons within the Wassenaar Arrangement Secretariat will have access to your personal data to the extent required to process your application for this recruitment. Every precaution will be taken to protect the information you provide. Your data will be retained in our system for up to three years after completion of the recruitment process and thereafter destroyed.*

Unless otherwise specified, please return completed form to:

*Wassenaar Arrangement Secretariat*

*Personnel*

*Mahlerstrasse 12, Stiege 5*

*1010 Vienna*

*Austria*

*E-mail:* [*secretariat@wassenaar.org*](mailto:secretariat@wassenaar.org)