**Personal History Form**

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| --- | --- | --- | --- | --- | --- |
| **I. PERSONAL DATA** | | | | | |
| **1. Family name (surname):** | | | **2. First name (given name):** | | |
|  | | |  | | |
| **3. Gender:** | **4. Date of birth (dd/mm/yyyy):** | | **5. City/country of birth:** | | **6. Present nationality:** |
|  |  | |  | |  |
| **7. Nationality at birth:** | | **8. Present address:** | | | |
|  | |  | | | |
| **8A. Telephone number:** | | **8B. Social media handles:** | | **8C. Email address:** | |
|  | |  | |  | |
| **9. Permanent address:** | | | | | |
|  | | | | | |

|  |  |
| --- | --- |
| **II. EMERGENCY INFORMATION** | |
| **In case of emergency, please notify:** |  |
| **10. Family name (surname):** | **11. First name (given name):** |
|  |  |
| **12. Relationship to applicant:** | **13. Address/telephone:** |
|  |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **III. EDUCATION, EMPLOYMENT AND PERSONAL SKILLS INFORMATION** | | | | | | | | |
| **Higher education (college/university):**  Clearly state the title of the degree(s), the exact start date and the date when the degree(s) was obtained. | | | | | | | | |
| **14. Completed education:** | | | | **Dates of attendance** | | | | |
| Title of Degree, Institution name, city, country | | | | from (mm/yyyy) | | | to (mm/yyyy) | |
|  | | | |  | | |  | |
|  | | | |  | | |  | |
| **15.** **Computer skills:**  Clearly highlight any relevant experience (for instance, with web design, social media, pivot tables, etc.), software (for instance, WORD, Excel, Powerpoint, STATA, R, etc.) and/or programming languages (for instance, C++, Java, Python, etc.). | | | | | | | | |
|  | | | | | | | | |
| **16.** **Publications (if any):** | | | | | | | | |
|  | | | | | | | | |
| **17.** **Knowledge of languages:** | **Read** | | **Write** | | | **Speak** | | |
| Easily | Not easily | Easily | | Not easily | Easily | | Not easily |
| Mother tongue (please specify): |  |  |  | |  |  | |  |
| English |  |  |  | |  |  | |  |
| Other(s) |  |  |  | |  |  | |  |
| **18.** **Scholarships/professional awards:** | | | | | | | | |
|  | | | | | | | | |
| **19. Professional certifications/licenses:** | | | | | | | | |
|  | | | | | | | | |
| **20.** **Employment history** | | | **Dates of employment** | | | | | |
| Name of Employer: | | | from (mm/yyyy) | | | to (mm/yyyy) | | |
|  | | |  | | |  | | |
| Exact title of your post: | | |
|  | | |
| Address: | | |
|  | | |
| Name of Supervisor: | | |
|  | | |
| No. of employees supervised by you: | | |
|  | | |
| Brief description of your duties: | | | | | | | | |
|  | | | | | | | | |
| **20.** **Employment history (continued)** | | | **Dates of employment** | | | | | |
| Name of Employer: | | | from (mm/yyyy) | | | to (mm/yyyy) | | |
|  | | |  | | |  | | |
| Exact title of your post: | | |
|  | | |
| Address: | | |
|  | | |
| Name of Supervisor: | | |
|  | | |
| No. of employees supervised by you: | | |
|  | | |
| Brief description of your duties: | | | | | | | | |
|  | | | | | | | | |
| **20.** **Employment history (continued)** | | | **Dates of employment** | | | | | |
| Name of Employer: | | | from (mm/yyyy) | | | to (mm/yyyy) | | |
|  | | |  | | |  | | |
| Exact title of your post: | | |
|  | | |
| Address: | | |
|  | | |
| Name of Supervisor: | | |
|  | | |
| No. of employees supervised by you: | | |
|  | | |
| Brief description of your duties: | | | | | | | | |
|  | | | | | | | | |

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| --- | --- | --- | --- |
| **IV. OTHER INFORMATION** | | | |
| **21. Other relevant information:** | | Yes | No |
| 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)? | |  |  |
| If yes, please explain and attach the release document from the authorities: | | | |
|  | | | |
| **22. I hereby certify that the foregoing statements and answers are true, complete and correct to the best of my knowledge and belief and can be verified at any time.**  (When applying by email, type your name or use an e-signature image) | | | |
| Signature: |  | | |
| Date (dd/mm/yy): |  | | |

Before submitting the application, please verify that you have:

* Answered all the questions in the form.
* Signed form (see note 22 above).

N.B. When the application is submitted, please submit as a single attached document (preferably in PDF format). Please use your family name followed by your birth date [ddmmyyyy] as the file name (e.g., Williams15121999). You may type your signature.