

<b>WORLD HEALTH ORGANIZATION</b>	<b>APPLICATION FOR VACANCY (P or GS)</b>
FOR USE BY STAFF MEMBERS ONLY (excluding short-term staff)	TO BE SUBMITTED TO PERSONNEL/HEADQUARTERS OR REGIONAL PERSONNEL OFFICE
THE PURPOSE OF THIS FORM IS TO ASSIST THE SELECTION COMMITTEE TO FULLY EVALUATE YOUR QUALIFICATIONS, PLEASE COMPLETE ON A TYPEWRITER IF POSSIBLE OR PRINT IN DARK INK,. ATTACH ADDITIONAL PAGES IF NECESSARY	

1. Vacancy Notice No.	2. Title & grade of post applied for	3. Organizational location
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4. Name of Applicant (Dr/Mr/Mrs/Miss) (Family name in block letters)	5. Nationality	6. Date of Birth
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7. EOD with WHO	8. Present grade/step	9. Present official station	10. Tel. No.
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11. Full mailing address (to be completed by field staff only)
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12. LANGUAGES (list mother tongue first)	SPEAK			READ			WRITE			13. FOR GS POSTS ONLY				
	Excel lent	Good	Fair	Excel lent	Good	Fair	Excel lent	Good	Fair	Indicate speed in words per min.	Eng.	Fr.	Sp.	Word process- ing & EDP packages used
										Typing				
										Shorthand				
UN Language Proficiency Examination passed in the following language (s):										Check if test passed at				
										WHO or other UN agency				

14. EDUCATION. Give full details in chronological order. Give the exact name of the institution and titles of degree/certificates. Exclude primary/secondary school if you have a university degree or equivalent. Include courses and postgraduate studies in your professional or related field

From Month/Year	To Month/ Year	Institution (name, place)	Certificates, degrees diplomas, obtained	Main field(s) or subjects of study

15. WORKING EXPERIENCE. Starting with present post, list first the positions held in WHO, draw a horizontal line and continue listing your experience outside WHO. For each WHO position indicate the **post title, grade, organizational location** and a summary of duties. For each position outside WHO indicate the **name and location of employer, your job title** and a summary of duties.

From Month/Year	To Month/Year	

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15. WORKING EXPERIENCE (contd...) (outside WHO)		
From Month/Year	To Month/Year	

16. WHY ARE YOU APPLYING FOR THIS POST?

17. HOW DO YOUR PRESENT DUTIES AND PREVIOUS EXPERIENCE RELATE TO THIS PARTICULAR VACANCY ?

18. ADDITIONAL PERTINENT INFORMATION (IF ANY) INCLUDING DETAILS OF IN-HOUSE TRAINING COURSES FOLLOWED

19. I certify that these statements are true and complete to the best of my knowledge

Date and Place Signature