

From : Digcent (Pers)Dte

No. D.I.2/2019-Pers-DA-8

Dated 12 /02/2019

U/C (.) Job Opening (.) MHA (PMA Cell) vide letter NO. 21023/01/2019-PMA dtd 30/01/2019 has requested nomination of eligible and willing officers of the rank of SP/DIG for P-4 level and DySP/SP for P-3 levels in the following positions/posts to UN Logistics Base, Brindisi (Italy) :-

Sl.No.	Name of Post	Job Opening No.	Participation Level
1	Gender Affairs Officers (P-3)	2019-SPC-78775-DPO	DySP/ SP (AC to 2-IC)
2	Police Reform Officer (P-4)	2019-SPC-75911-DPO	SP/DIG (2-IC to DIG)
3	Policy Planning officer (P-3)	2019-SPC-75926-DPO	DySP/ SP (AC to 2-IC)

(.)It is strongly recommended to nominate those candidates meeting all the requirements for the positions/posts as described in Job description available on MHA website (Police Division-II-Secondment vacancy) (.) Reqst forward nomination of eligible and willing officers alongwith following documents (all mandatory) required to reach Dte by **23/02/2019** :-

i) United Nations Personal History Profile (PHP) form (P.11) duly completed and signed by the nominated candidate.

ii) United Nations Employment and Academic certification [(attachment to personal history profile (P.11)) Form duly completed and signed by the nominated candidate as well as the relevant local authority.

iii) Personal details as per Annexure-I

iv) Human Rights certificate must be included (proforma enclosed). Mandatory.

(.) No modified format other than the specimen enclosed duly typed will be entertained/accepted as it invites lot of observations from MHA/UN HQ (UNDPKO) while finalizing the nominations (.) Hand written PHP/EAC will not be entertained/accepted (.) It may be ensured that the photographs of the officer applying for the post should be placed on the front side of P-11 form and signature in the last page at relevant place and all the columns are filled up appropriately/correctly (.) It may also be ensured that the nominees are clear from vigilance angle (.) Personal History Profile (P-11) , EAC and HR certificate alongwith forwarding letter of each nominated candidate are required to be submitted in separate file (PDF format only) through E-Mail at digpers@crpf.gov.in (.) In case, any officer is applying for more than one position/post, Personal History Profile (P-11) , EAC and HR certificate should be submitted separately for each post (.) EAC submitted mentioning more than one job opening number will not be accepted/entertained (.) Nomination received after target date will not be entertained (.) No direct application be be entertained////

Encl : As above

sd/- 12/02/2019
Digcent (Pers)

UNITED NATIONAL
Employment and Academic Certification
Attachment to Personal History Profile (P11)

For guidance on the submission package you may refer to the briefing material “ How to prepare the submission”.

A. TO BE COMPLETED BY CANDIDATE (from sections 1 to 11)

1. PERSONAL DATA:			
Family name :	Given Name :	Middle Name:	Gender : M/F
e-mail address :			

2. POSITION/S TO WHICH YOU ARE APPLYING	
Title :	Job Opening Number :
1.	
2.	
3.	

3. MILITARY SERVICE HISTORY/POLICE SERVICE HISTORY			
Date of commission (for military officers) or date of enlistment/entry to service (for police Officers);			
Current rank	Date last promoted	Date eligible for promotion to next rank	Projected Retirement date from current rank
<i>Branch/Corp/Mustering</i>			
Sub Specialization/additional qualification:			

4. DEGREE AND ACADEMIC DISTINCTIONS OBTAINED				
	Name of Institution, place and country. Please give complete address	ATTENDED		Rank/ degrees and Academic Distinctions obtained
		FROM (Month/Year)	TO (Month / Year)	
Military or Police Degrees	Military Academy (and/or similar military officer institution)-name and address:			Rank obtained :

	Command and staff college (an/or similar military officers institutions)-name and address :			Rank obtained:
	Police Academy (and/or similar law enforcement training institution)-name and address :			Rank obtained :

Civilian Degrees	Name of Institution, place and country . Please give complete address	ATTENDED		Degrees and Academic distinctions obtained
		FROM (Month/Year)	TO (Month / Year)	

5. MILITARY AND/OR POLICE TRAINING COURSES/SEMINARS : Related to the post

Name of course	Date attended: From mm/yy – to mm/yy	Institution

6. EXPERIENCE IN PEACEKEEPING OPERATIONS :

Specify UN or other International Experience, start with your most recent experience and list in reverse order

Dates from mmm/yy TO mm/yy	Mission /Operation/Location	Position/title (Milob,HQ Staff Contgt, Adviser, International Police Officer (IPO), Police Adviser, FPU Officer, Professional Post or above)	Description of duties

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7. COMMAND EXPERIENCE (at Battalion/equivalent level or above when applying for position at the P5 level and above :-

Start with your most recent experience and list in reverse order

Date FROM mm/yy TO mm/yy	Unit Level : Company /Battalion/Brigade/Division or equivalent. Police Command experience	Unit/Position/Org	Significant Unit activities

8. SIGNIFICANT EXPERIENCE RELATED TO THE FUNCTIONS OF THE POST/S YOU ARE APPLYING :

Start with your most recent experience and list in reverse order

Date FROM mm/yy TO mm/yy	Position/Org	Operation/Activity

9. INTERNATIONAL EXPOSURE OTHER THAN PEACEKEEPING OPERATIONS :

Start with your most recent experience and list in reverse order

Date FROM mm/yy TO mm/yy	Position/Org	Operation/Activity

10.A additional comments :

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11. I certified that the statements made by me in answer to the foregoing questions are complete and correct. I understand that my misrepresentation or material omission made on a Personal History form or other document requested by the organization renders a candidate ineligible for further consideration

I declare that I have never committed, been convicted or and on not currently under investigations or being prosecuted for any criminal, human rights, civil action or disciplinary offence, with the exception of minor traffic violation (driving while intoxicated or dangerous or careless driving are not considered minor traffic violations for this purpose). I declare that I have not been involved, by act or omission, in the commission of any violation of international human rights law or international humanitarian law.

I am not able to attest to the proceeding paragraphs for the following reasons

Date :Signature :

N.B. You will be requested to supply documentary evidence which support 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 Organisation.

B. TO BE COMPLETED BY THE RELEVANT LOCAL AUTHORITY

On behalf of DG CRPF, I certify that the information provided by _____ is complete and correct.

I further certify that the nominated candidate has never been convicted of, or is not currently under investigation or being prosecuted for, any criminal or disciplinary offence, or any violations of international human rights law, civil action or disciplinary offence.

The Government of India/ MHA/ CRPF is not aware of any allegations against the nominated candidate that he/she has committed or been involved, by act or omission, in the commission of any acts that may amount to violations of international human rights law or international humanitarian law. In the case of the nominee who has been investigated for, charged with or prosecuted for any criminal offence, with the exception of minor traffic violations (driving while intoxicated or dangerous or careless driving are not considered minor traffic violations for this purpose), but was not convicted, the Government is requested to provide information regarding the investigation(s) or prosecutions concerned.

Date :Official Stamp :

PLEASE NOTE :

An incomplete or unsigned form will not be accepted.

BIO-DATA PROFORMA

RECENT PASSPORT SIZE PHOTOGRAPH
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1	Name of Post applied	
2	Job Opening number	
3	Name of officer	
4	Designation/Rank/Organization with present place of posting	
5	In the case of officer of deputation with other organization	
	a) Name of Parent Organization	
	b) Name of organization presently employed	
	c)Date of deputation	
	d) Expected date of repatriation to parent cadre/organization	
6	Date of Birth	
7	Education/ Qualification	
8	Date of Joining Police Service	
9	Service/Cadre/Batch	
10	Previous UN experience Tel. No.	
	a) Office	
	b)Residence	
	c)Mobile No.	
	d) e-mail id (mandatory)	
11	Present Job Profile	
12	NOC from parent cadre(if on deputation)- mandatory	Yes/NO/Not applicable


I hereby certify that, I fulfill the eligibility requirement notified for the post applied for

(Signature of the applicant)

HUMAN RIGHTS CERTIFICATE

It is certified that _____) was neither convicted nor currently under investigation or being prosecuted for any criminal offence including violation of International Human Rights Law and International Humanitarian Law. It is also to certify that Government /Org. of CRPF(concerned state/org) is aware that there is no allegation against him/her as such and he/she has not committed or even involved, by act or omission, the commission of any act that may amount of violations of International Human Rights Law and International Humanitarian Law.

**To be signed by an officer
not below the rank of DIG/Director**

INSTRUCTIONS Please answer each question clearly and completely. Type or print in ink. Read carefully and follow all directions.	 UNITED NATIONS PERSONAL HISTORY	Do Not Write in This Space						
1. Family name : _____ First name : _____ Middle name : _____ Maiden name, if any _____								
2. Date of Birth Day Mo. Yr.	3. Place of birth	4. Nationality (ies) at birth	5. Present nationality (ies)	6. Sex				
7. Height	8. Weight	9. Marital status: Married <input type="checkbox"/> Separated <input type="checkbox"/> Widow(er) <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/>						
10. Entry into United Nations service might require assignment to any area of the world in which the United Nations might have responsibilities. Are there any limitations on your ability to perform in your prospective field of work _____ Are there any limitations on our ability to engage in all travel ? YES <input type="checkbox"/> NO <input type="checkbox"/>								
11. Permanent address Telephone No. _____		12. Present address Telephone No. _____		13. Office Telephone No. 14. Office Fax. No: _____ E-mail:: _____				
15. Have you any dependent children? YES <input type="checkbox"/> NO <input type="checkbox"/> If the answer is "yes", give the following information:								
Name of Children	Date of Birth (day/mo/year)	Place of Birth	Nationality	Gender				
15.(a) Name of Spouse								
16. Have you taken up legal permanent residence status in any country other than that of your nationality? If answer is "yes", which country? YES <input type="checkbox"/> NO <input type="checkbox"/>								
17. Have you taken any legal steps towards changing your present nationality? If answer is "yes", explain fully: YES <input type="checkbox"/> NO <input type="checkbox"/>								
18. Are any of your relatives employed by a public international organization? If answer is "yes", give the following information: <input type="checkbox"/> YES <input type="checkbox"/> NO								
NAME		Relationship		Name of International Organization				
19. What is your preferred field of work?								
20. Would you accept employment for less than six months YES <input type="checkbox"/> NO <input type="checkbox"/>			21. Have you previously submitted an application for employment with U.N.? YES <input type="checkbox"/> NO <input type="checkbox"/> if so when? _____					
22. KNOWLEDGE OF LANGUAGES. What is your mother tongue?								
	READ		WRITE		SPEAK		UNDERSTAND	
OTHER LANGUAGES	Easily	Not Easily	Easily	Not Easily	Easily	Not Easily	Easily	Not Easily
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. For clerical grades only <i>Indicate speed in words per minute</i>								

Type	English	French	Other languages		List all specific computer programmes you use (i.e. excel, access)
Shorthand					

24. EDUCATIONAL. Give full details - N.B. Please give exact titles of degrees in original language.

A. UNIVERSITY OR EQUIVALENT

Please do not translate or equate to other degrees.

NAME, PLACE AND COUNTRY Please give complete address	ATTENDED FROM/TO		DEGREES and ACADEMIC DISTINCTIONS OBTAINED	MAIN COURSE OF STUDY
	Month./ Year	Month./ Year		

B. SCHOOLS OR OTHER FORMAL TRAINING OR EDUCATION FROM AGE 14 (e.g. high school, technical school or apprenticeship)

NAME, PLACE AND COUNTRY Please give complete address	TYPE	ATTEND FROM/TO		CERTIFICATES OR DIPLOMAS OBTAINED
		From	To	

25. LIST PROFESSIONAL SOCIETIES AND ACTIVITIES IN CIVIC, PUBLIC OR INTERNATIONAL AFFAIRS

26. LIST ANY SIGNIFICANT PUBLICATIONS YOU HAVE WRITTEN (do not attach)

27. EMPLOYMENT RECORD: Starting with your present post, list in reverse order every employment you have had. Use a separate block for each post. Include also 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. Give both gross and net salaries per annum for your last or present post.

PRESENT POST (LAST POST, IF NOT PRESENTLY IN EMPLOYMENT)				EXACT TITLE OF YOUR POST	
FROM	TO	SALARIES PER ANNUM		Full time <input type="checkbox"/>	Part time <input type="checkbox"/> hours/week
MONTH/YEAR	MONTH/YEAR	STARTING	FINAL		
NAME OF EMPLOYER				TYPE OF BUSINESS	
ADDRESS OF EMPLOYER				NAME OF SUPERVISOR	
				NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU	REASON FOR LEAVING

DESCRIPTION OF YOUR DUTIES

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B. PREVIOUS POST (IN REVERSE ORDER)

FROM MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM STARTING FINAL		EXACT TITLE OF YOUR POST: Full time <input type="checkbox"/> Part time <input type="checkbox"/> hours/week
NAME OF EMPLOYER:			TYPE OF BUSINESS:	
ADDRESS OF EMPLOYER:			NAME OF SUPERVISOR:	REASON FOR LEAVING:
			NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU:	
DESCRIPTION OF YOUR DUTIES				

FROM MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM STARTING FINAL		EXACT TITLE OF YOUR POST: Full time <input type="checkbox"/> Part time <input type="checkbox"/> hours/week
NAME OF EMPLOYER:			TYPE OF BUSINESS:	
ADDRESS OF EMPLOYER:			NAME OF SUPERVISOR:	REASON FOR LEAVING:
			NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU:	
DESCRIPTION OF YOUR DUTIES				

FROM MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM STARTING FINAL		EXACT TITLE OF YOUR POST: Full time <input type="checkbox"/> Part time <input type="checkbox"/> hours/week
NAME OF EMPLOYER:			TYPE OF BUSINESS:	
ADDRESS OF EMPLOYER:			NAME OF SUPERVISOR:	REASON FOR LEAVING
			NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU:	
DESCRIPTION OF YOUR DUTIES				
FROM	TO	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:

				Full time <input type="checkbox"/> Part time <input type="checkbox"/> hours/week
MONTH/YEAR	MONTH/YEAR	STARTING	FINAL	
NAME OF EMPLOYER:			TYPE OF BUSINESS:	
ADDRESS OF EMPLOYER:			NAME OF SUPERVISOR:	
			NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU:	REASON FOR LEAVING
DESCRIPTION OF YOUR DUTIES				
FROM	TO	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
MONTH/YEAR	MONTH/YEAR	STARTING	FINAL	
				Full time <input type="checkbox"/> Part time <input type="checkbox"/> hours/week
NAME OF EMPLOYER:			TYPE OF BUSINESS:	
ADDRESS OF EMPLOYER:			NAME OF SUPERVISOR:	
			NO. AND KIND OF EMPLOYEES SUPERVISED BY YOU:	REASON FOR LEAVING
DESCRIPTION OF YOUR DUTIES				
28. HAVE YOU ANY OBJECTIONS TO OUR MAKING INQUIRIES OF YOUR PRESENT EMPLOYER? YES <input type="checkbox"/> NO <input type="checkbox"/>				
29. ARE YOU NOW, OR HAVE TO EVER BEEN, A PERMANENT CIVIL SERVANT IN YOUR GOVERNMENT'S EMPLOY? YES <input type="checkbox"/> NO <input type="checkbox"/> If answer is "yes", WHEN?				
30. 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 27.				
FULL NAME		FULL ADDRESS		BUSINESS OR OCCUPATION

<p>31. STATE ANY OTHER RELEVANT FACTS, INCLUDING INFORMATION REGARDING ANY RESIDENCE OUTSIDE THE COUNTRY OF YOUR NATIONALITY</p>		
<p>32. HAVE YOUR 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 <input type="checkbox"/> NO <input type="checkbox"/></p> <p>If "yes", give full particulars of each case in an attached statement.</p>		
<p>33. OTHER AGENCIES OF THE UNITED NATIONS SYSTEM MAY BE INTERESTED IN OUR APPLICANTS. DO YOU HAVE ANY OBJECTION TO YOUR PERSONAL HISTORY FORM BEING MADE AVAILABLE TO THEM? YES <input type="checkbox"/> NO <input type="checkbox"/></p>		
<p>34. 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 Organization renders a staff member of the United Nations liable to termination or dismissal.</p> <p>13</p> <p>DATE: _____ SIGNATURE _____</p>		
N.B.	<p>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.</p>	