

## **Mekong River Commission**

## Personal History Form

		(For C	General Applicant)			
Mekong River Commission P.O. Box 6101, 184 Fa Ngoum Ban Sithane Neua, Sikhottabong Vientiane 01000, Lao PDR Telephone: (856-21) 263 263 Facsimile: (856-21) 263 264	Road, Unit 18				Attach recent Passport Size Photo	
			ent: Newspaper  On-line recruitmease specify			
Instructions: 1. Personal History Form (Prequired and submitted to 2. Please answer each questions)	the specified addre	ss before the de		ation sourc	e and other information as	
1. Family name:	name: Given names: Title: 2. Gender: M F F					
3. Date of Birth: (dd/mm/yy)	4. Place of birth	h:	5. Nationality(ies) at birth:		urrent nationality(ies) ountry of permanent ace:	
7. Permanent Address: (reg	istered address)	Dayt Mob Facs:		E-mail: Daytim Mobile Facsim	e Telephone: :	
Telephone:  Telephone:  Widow(er) Divorced Divor						

Name (Family Name / Given Name	e) Date	e of birth	Nationality	Relationship
you have spouse, please specify his/h	er current occupa	tion and name of	organization or company	7.
1. Name of person to be notified in c	ase of emergency.	Please provide co	omplete contact address/	telephone numbers.
2. Have any of your relative (includiorking, in the Mekong River Commityes, please provide names, relations	ission Secretariat,	National Mekon		
3. What is your preferred field of wo	ork?			
4. Knowledge of LANGUAGES: Wh	nat is your mother	tongue?		
	nowledge of other			
6. Please indicate the level of your knowledge, 3	nowledge of other		Speaking	Understandin
6. Please indicate the level of your knowledge, 3	nowledge of other 3=fair, 4=basic	languages.	Speaking	Understandin
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6. Please indicate the level of your knowledge, in the Language:  7. EDUCATION: Please give exact to degrees.	nowledge of other 3=fair, 4=basic Reading	languages.  Writing		
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6. Please indicate the level of your knowledge, in the Language:  7. EDUCATION: Please give exact to degrees.	nowledge of other 3=fair, 4=basic  Reading  titles of degrees in	languages.  Writing  original language	e. Please do not translate  Degrees and academic	or equate to other
6. Please indicate the level of your knowledge, in the Language:  7. EDUCATION: Please give exact to degrees.  1. UNIVERSITY or equivalent	nowledge of other 3=fair, 4=basic  Reading  titles of degrees in	languages.  Writing  original language	e. Please do not translate	or equate to other
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Other Language:  17. EDUCATION: Please give exact to degrees.  a) UNIVERSITY or equivalent	nowledge of other 3=fair, 4=basic  Reading  titles of degrees in	languages.  Writing  original language	e. Please do not translate  Degrees and academic	or equate to other

		luding profess l part- time st		alifications	of specialised	training (e.g. C	Certified Public	Accountant, Bar
Attended fro								
Name of s	school, Place	e, Country	Mo/Yı		other qua	Diplomas or difications nined	Main c	ourse of study
		mation techno proficiency lev				orogramming la	nguages, equip	ment, and others.
19. Meml	bership in p	rofessional so	cieties a	nd activities	s in civic, publ	ic or internation	nal affairs.	
20. List a	ny significai	nt publication	s you ha	ve written (	Please do not att	ach)		
more than	20 years). U	se a separate b	lock for	each post. If		e space, please a		nad (do not go back pages of the same size.
A. Prese	nt post (or la	ast post if not cur	rently in	employment)				
From	То	Salaries (indicate g			tle of your post	:		
Mo/Yr	Mo/Yr	Starting	_	nal				
Name of emp	oloyer:			Ту	pe of business	:		
Address of e	mployer:				o. and type of e pervised by yo		Reason fo	or leaving:

			Descr	ription of	your duties	
From	То	Salaries per an (indicate gross or currency)	r net &	Title of	your post:	
Mo/Yr	Mo/Yr	Starting	Final			
Name of emp	loyer:			Type of	business:	
Address of en	mployer:				No. and type of employees supervised by you:	Reason for leaving:
			Descr	ription of	your duties	
From	То	Salaries per an (indicate gross of currency)	num r net &	Title of	your post:	
Mo/Yr	Mo/Yr	Starting	Final			

Name of employer:	Type of	business:	
Address of employer:	•	No. and type of employees supervised by you:	Reason for leaving:
Description	of your o	luties	
-	•		
22. Do you have any objection to our making inquiries	with you	r current or most recent employ	er?
Yes No No			
23. Have you previously submitted an application in M	IRCS? If	yes, please indicate the positions	s and dates.
24. Have you ever been an employee of MRCS; or hire NMCS? If yes, please indicate type of employments, pos			taff, contractual, or others; or
25. Have you ever been arrested, indicated or summon or imprisoned for the violation of any law? If yes, pleas			proceeding or convicted, fined
26. Have you ever been discharged or forced to resign	from any	position? If yes, please specify.	
27. If you were selected for the position applied, how so	oon will y	ou be available to start works at	ter the notification?

'ull Name/ Position/ Relationship	Full Address	E-mail and telephone contacts
29. State any other relevant facts, including	g international experience, which n	nay support your application.
30. Are you physically able and willing to t	ravel?	
Yes No By Air? Yes [		
31. Do you have any disability, which migh	t limit your prospective field of wo	ork? (The Secretariat is fully accessible)
Yes No If yes, please pro	ovide details:	
belief. Permission is given to the MRC to ma	ake such investigations as necessary	nplete, and correct to the best of my knowledge at on the information provided. I understand that a
misrepresentation or material omission made to termination of service or dismissal.	herein or in any other document requ	uested by the MRC can render a staff member lia
Date:	Signature:	
	umentation / evidence which support	ss the statements you have made above upon the