Civilian Pe	ersonnel Office u	se only						
No.	Received on.	-						
Status:	ATTACH RECENT IDENTITY							
Application fe	PHOTOGRAPH (passport size)							
(together w ALLIED AIR O 1. Reference of the vacancy for which y								
2.a. Surname: 2.b. First name(s): 2.c. Maide				n name (if applicable):				
3.a. Permanent address:	3.b. Mailing add (if different from		4. Telephone: Home: Work: Fax:					
5.a. Country and place of birth:	5.b. Date of birt	h:	6.a. Citizenship at birth:					
	5.d. Status:	ried	-					
5.c. Sex: 🗌 Male 🗌 Female				Citizenship now (if different from explain).				
7. Please give the following information about spouse and children:								
Name	Date of birth		Relationship					

8.a. Secondary Education										
Name, Place and Country	Place and Country Of attendance			Type of School			Qualifications obtained (e.g. certificate(s), diploma(s)) indicating main subjects			
	From	n T	ō				<u> </u>			
8.b. Further Education										
Name, Place and Country		and Mo		s Type of School			Qualifications obtained (e.g. certificate(s), diploma(s) indicating main subjects			
	Fron	n T	0							
			<u> </u>							
9.a. List professional societies t	to which y	ou belon	g:			-				
9.b. List, but do not attach, any	significan	t publica	tions you	have writte	n:					
10. Languages: describe profici	iency belo	w, by tic	king the a	opropriate I	box. Please	e start wi	th your moth	ner tongue.	L	
Language	;	Speaking	1	Reading			Writing			
	Very Good	Good	Fair	Very Good	Good	Fair	Very Good	Good	Fair	
11. Shorthand and typing: indicate speed in words per minute.										
Г		English			French			Other		
Tursia au	English									
Typing:										
Shorthand:										
12. Indicate your computer skill	S.									
Hardware:										
Application Software:										
Computer Languages:										

13. Type(s) of driving licence								
14. Have you completed your compulsory military service?								
If yes, indicate dates:	From				То			
If no, give reason:								
Do you have further service co	ommitment	s? 🗌 No	י <u>ר</u>	es, please ξ	give detai	ls		
15. EMPLOYMENT RECORD Starting with your present post, list in reverse order, details of present / previous employment. 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 required, attach additional pages in the same format. If employed as a NATO Civilian, or with one of the co-ordinated organisations, indicate (last) grade and step.								
A). PRESENT EMPLOYMENT Dates of employment		Si	ince					
Net salary per annum			tarting	Pres	ent			
Name and address of employe	er		0					
Tel. No.		Ty	ype of b	usiness				
Title of your position		Ν	umber o	of employees	s under y	our direct s	upervision	
Name and position of your sup	ervisor							
Reason for wishing to leave yo	our present	employment						
Summary of your work:								

B). PREVIOUS EMPLOYMENT					
Dates of employment	From	То			
Net salary per annum	Starting	Final			
lame and address of employer					
Fel. No.	Type of business				
Title of your position	Number of employees under your direct supervision				
Name and position of your supervisor					
Reason for leaving your employment					
Summary of your work:					
C). PREVIOUS EMPLOYMENT					
Pates of employment	From	То			
et salary per annum	Starting	Final			
ame and address of employer					
el. No.	Type of business				
itle of your position	Number of employee	s under your direct supervision			
ame and position of your supervisor					
eason for leaving your employment					
ummary of your work:					

D). PREVIOUS EMPLOYME	NT								
Dates of employment		From		То					
Net salary per annum		Starting		Fin	al				
Name and address of employ	ver								
Tel. No.		Type of b	usiness						
Title of your position				Number of employees under your direct supervision					
Name and position of your su		Number of employees under your direct supervision							
Reason for leaving your empl									
	e jet								
Summary of your work:									
16. List periods of residence a	-	ry, excludir	ng holiday trips.						
Country	Reason			Dates (Fi	rom - To)				
17. Have you ever been conv		er than min	nor traffic violations	?					
No Yes, nature of offence(s) 18. What is your present state of health? Indicate any physical disabilities or chronic illness(es).									
19.a. Would you object if we contact your present employer? Yes: No									
19.b. Would you object if we contact your previous employer(s)?					🗌 No				
20. References: List three persons not related to you by blood or marriage, who are familiar with your character and									
qualifications. Do not repeat s	supervisor(s) given in it Full address	em 15.	Telephone		Profession/Relationship				