



Government of India
Ministry of Home Affairs
Police Division-II
[PMA Cell]

Subject : Nominations of Expert Trainers (Train the trainers certified instructors) to be deployed as Joint Integrated Police (JIP) Trainers in UNMISS.

The undersigned is directed to refer to the subject and say that this ministry has sought nominations of **Expert Trainers (Train the trainers certified instructors-desirable) to be deployed as Joint Integrated Police (JIP) Trainers in UNMISS by 20th April , 2017** alongwith the following documents duly completed in all respect:-

- i. United Nations Personal History Profile (PHP) form (P.11) duly completed and signed by the nominated candidate.
- ii. EASP form (proforma enclosed)
- iii. Personal details as per **Annexure-I.**
- iv. **Human Rights certificate must be included**(proforma enclosed). **Mandatory**
- v. **UN Medical form (MS-2) proforma enclosed and also download from MHA's website(Police-II Division (forms section)**

Qualifications:-

Education: Graduation from Police College or Academy and/pr University degree in related filed or relevant combination of academic qualifications, professional training and experience is required.

Work Experience:- A Minimum of 7 yerars of active pratical experience in police or other national law enforcement and/or in a national training instituation as a trainer is required.

Three (3) years of practical experience in training curriculum development, management of training process organization, training delivery both academic and in-serive (various levels), Methodic support of training process is highly desirable.

Languages: Fluency in oral and written English is required. Knowledge of a second official UN Language is an advantage.

3. The nominated officers may be advised to send the above **document** as per the format enclosed **through electronic mail at e-mail address** at uspma@nic.in. **(Mandatory)**

4. **No modified format other than the specimen enclosed duly typed will be entertained/accepted as it invites lot of observations from 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.

5. It may please be ensured that the nominees are clear from Vigilance angle and Necessary Cadre Clearance (for all Officers) from MHA/State Government/CAPFs/any other lending organization must be forwarded with nomination. (without cadre clearance and NOC from parent cadre, nominations will not be entertained).

6. No direct application will be entertained. The interested officers/trainers must forward their nominations through Proper channel.

 30/3/17

(Raman Kumar)

Under Secretary to the Government of India

☎/☎: 23094009

✉: uspma@nic.in

Directors General, of All CAPFs

MHA ID No. 21023/16/2015-PMA

Dtd

March, 2017

Copy to :-

SO (IT), MHA - With the request to upload the above communication on MHA website (Police Division-II(UN SAAT) and 'what's new

BIO-DATA PROFORMA

Recent passport
size photograph

1. Name of Post applied.
2. Job opening number
3. Name of the Officer
4. Designation/Rank/organization and Pay scale/pay band with present place of posting.
5. In the case of officers 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 and date of superannuation
9. Service/Cadre/Batch:
10. Previous UN experience
 - Telephone No.
 - a. Office
 - b. Residence
 - c. Mobile No(mandatory)
 - d. Fax No.
 - e. 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)

HR 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(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 LEGIBLY. Read carefully and follow all directions.

UNITED NATIONS



Do not Write in This Space

PERSONAL HISTORY

1. Family name: _____ First name: _____ Middle name: _____ Maiden name, if any: _____

2. Date of (day/month/yr) Birth: _____ 3. Place of birth: _____ 4. Nationality(ies) at birth: _____ 5. Present Nationality(ies): _____ 6. Sex: _____

7. Height: _____ 8. Weight: _____ 9. Marital Status: Single Married Separated Widow(er) Divorced

10. Entry into United Nations service might require assignment in any area of the world in which the United Nations might have responsibilities.
 (a) Are there any limitations on your ability to perform in your prospective field of work? YES NO
 (b) Are there any limitations on your ability to engage in all travel? YES NO

11. Permanent address: _____ Telephone No. () _____
 12. Present address: _____ Telephone/Fax No. () _____
 13. Office Telephone No. () _____
 14. Office Fax No. () _____
 E-mail: _____

15. Do you have any dependent children? YES NO If the answer is "yes", give the following information:

Name of Children	Date of Birth (day/month/year)	Place of Birth	Nationality	Gender

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 NO

17. Have you taken any legal steps towards changing your present nationality? If answer is "yes", explain fully: YES NO

18. Are any of your relatives employed by a public international organization? If answer is "yes", give the following information: YES 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 NO 21. Have you previously submitted an application for employment and/or undergone any tests with U.N.? YES NO If so, when? _____

22. KNOWLEDGE OF LANGUAGES. What is your mother tongue? _____

OTHER LANGUAGES	READ		WRITE		SPEAK		UNDERSTAND	
	Easily	Not Easily	Easily	Not Easily	Fluently	Not Fluently	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"/>

23. For clerical grades only. Indicate speed in words per minute

	English	French	Other languages
Typing			
Shorthand			

List any office machines or equipment and computer programmes you use.

24. EDUCATION, Give full details - N.B. Please give exact titles of degrees in original language. Please do not translate or equate to other degrees.

A. University or equivalent 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	YEARS ATTENDED		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.

A. PRESENT POST (LAST POST, IF NOT PRESENTLY IN EMPLOYMENT)

FROM MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
		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:				

D. PREVIOUS POSTS (IN REVERSE ORDER)

FROM MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
		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 MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
		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 MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
		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				

28. HAVE YOU ANY OBJECTIONS TO OUR MAKING INQUIRIES OF YOUR PRESENT EMPLOYER? YES NO

29. ARE YOU NOW OR HAVE YOU EVER BEEN A CIVIL SERVANT IN YOUR GOVERNMENT'S EMPLOY? YES NO
If answer is "yes", WHEN?

30. REFERENCES: List three persons, not related to you, and are not current United Nations staff members, 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

31. STATE ANY OTHER RELEVANT FACTS. INCLUDE INFORMATION REGARDING ANY RESIDENCE OUTSIDE THE COUNTRY OF YOUR NATIONALITY.

32. 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)? YES NO
If "yes", give full particulars of each case in an attached statement.

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 NO

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.

DATE (day, month, year) _____ SIGNATURE: _____

N.B. 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.

EMPLOYMENT RECORD - SUPPLEMENTARY SHEET

17

PLEASE 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. See next page for more blocks.

FROM MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
		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 MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
		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 MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
		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 MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:
		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				

EMPLOYMENT RECORD - SUPPLEMENTARY SHEET

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PLEASE 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.

FROM MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:	
		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 MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:	
		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 MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:	
		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 MONTH/YEAR	TO MONTH/YEAR	SALARIES PER ANNUM		EXACT TITLE OF YOUR POST:	
		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					



UNITED NATIONS

Electronic Application for Seconded Police

Non-Contracted Post

INSTRUCTION
Please read carefully and follow the directions. Please answer the questions clearly and completely. Confidential information submitted by candidates to the United Nations will be held by the UN Police Division.

1. CANDIDATE AND APPLICATION INFORMATION

Family Name: _____ First Name: _____ Middle Name: _____
 Date of Birth: / / Nationality: _____
 National ID Type: _____ National ID Number: _____ Gender: _____
 Type of post for which you are applying? _____ Married Status: _____
 Did you pass an Assessment for Mission Service (A.M.S.)? _____ For which UN Field Mission is this application (if known)? _____
 If yes, Date (dd/mm/yyyy): / / Place: _____
 Type of National Service: _____ Current Rank: _____

2. CONTACT INFORMATION

Primary Phone: + _____ Office: + _____ Email: _____
 City: _____ State/Province: _____ Country: _____

3. POLICE EXPERTISE

Preferred Field of Work: _____ Main Field of Expertise: _____
 Additional Expertise: _____ Additional Expertise: _____

4. POLICE AND ACADEMIC EDUCATION HISTORY

When did you join the Police? / /

POLICE TRAINING INSTITUTION	DATES ATTENDED		RANK UPON GRADUATION	LOCATION	
	From	To			
	/	/			
	/	/			
	/	/			
ACADEMIC INSTITUTION (NAME & LOCATION)	DATES ATTENDED		DEGREE LEVEL	COURSE OF STUDY	
	From	To			
		/	/		
		/	/		
		/	/		
	/	/			
	/	/			

Other Educational Achievement: _____

5. PREVIOUS WORK EXPERIENCE (continued)				
ORGANIZATION	DATES ATTENDED		POSITION TITLE(S)	BRIEF DESCRIPTION OF RESPONSIBILITIES
	From:	To:		
12.	From: /	To: /		
13.	From: /	To: /		
14.	From: /	To: /		
15.	From: /	To: /		
16.	From: /	To: /		
17.	From: /	To: /		
18.	From: /	To: /		
19.	From: /	To: /		
20.	From: /	To: /		
21.	From: /	To: /		
22.	From: /	To: /		

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6. LANGUAGE PROFICIENCY

What is your Mother Tongue? _____

If another Mother Tongue: _____

Proficiency in Other Language(s):	READ		WRITE		SPEAK		UNDERSTAND	
	Easily	Not Easily	Easily	Not Easily	Fluently	Not Fluently	Easily	Not Easily
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. VEHICULAR PROFICIENCY (If you have a driver's license, please provide the details below)

You Began Driving: _____ Driver License Number: _____ Category: _____
 Frequency of Driving: _____ Date of Issue: / / Date of Expiry: / /

8. TECHNOLOGY PROFICIENCY

LEVEL	LEVEL	Please specify any other relevant technological knowledge or skills:
1. Word Processing	3. Spreadsheet	
2. Presentation	4. General Interest	

9. CERTIFICATIONS

Please list any Professional or Academic Certifications which you may have received.

TITLE	DATE ISSUED	ISSUING AUTHORITY	BRIEF DESCRIPTION
1.	/		
2.	/		
3.	/		
4.	/		
5.	/		
6.	/		
7.	/		
8.	/		

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10. OTHER RELEVANT INFORMATION

Please provide any other relevant information regarding your experience:

RASH

11. CONDITIONS FOR SERVICE

Entry into United Nations service might require assignment to any area of the world in which the United Nations might have responsibilities.

a.) Are there any limitations on your ability to perform in your prospective field of work? YES NO

b.) Are there any limitations on your ability to engage in all travel? YES NO

If yes to either of the above questions, please explain:

12. DECLARATION OF DISCIPLINARY CLEARANCE

I attest that I have not committed, been convicted of, nor prosecuted for, any criminal or disciplinary offences. I attest 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 preceding paragraph for the following reasons:

DATE: / /

Signature: _____

13. DECLARATION OF AUTHENTICITY

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 remains a staff member of the United Nations liable to termination or dismissal.

DATE: / /

Signature: _____

10/14