**Application form for**

**LOCAL STAFF VACANCIES – SOMALIA**

to be sent by e-mail to [jobs@eucap-som.eu](mailto:jobs@eucap-som.eu)

Only duly-filled in English official application forms will be accepted. All other forms of applications and/or after deadline for submission will be disregarded.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **1. NOMINATION DETAILS (indicate positions applied for)**   |  |  | | --- | --- | | **Post Number:** | **Title of Vacancy:** | | First priority: |  | | Second priority: |  |   **2. PERSONAL DATA**   |  |  |  |  | | --- | --- | --- | --- | | Last name  (**Father and grandfather name**) |  | First name  **(Given name)** |  | | Birth date  **(dd/mm/yyyy)** |  | Country of birth |  | | National ID card no. |  | Gender | Male  Female | | Present nationality |  | Other nationality |  | | Driving license | Yes  No | If yes, category: |  |   **3. CONTACT DETAILS**   |  |  |  |  | | --- | --- | --- | --- | | **Home address** | | | | | Street | | | Zip/postal Code | | Town/city | County/state/province | | Country | | Telephone no. | Mobile no. | Email address | | | **Alternative/current contact details** | | | | | Street | | | Zip/postal code | | Town/city | County/state/province | | Country | | Telephone no. | Mobile no. | Email address | |   **4. EDUCATION AND PROFESSIONAL TRAINING**   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **University and/or College education or equivalent** | | | Attended (mm/yyyy) | | | Name institution / university, place and country | Degrees/qualifications obtained  (Title of qualification awarded) | Main course/field of study | From: | To: | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | | **Secondary education and/or formal vocational education/training** | | | | | | Name institution / place and country | Degrees/qualifications obtained  (Title of qualification awarded) | Main course/field of study | From: | To: | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | | **Other courses** | | | | | | Name institution | Place and country | Course title | From: | To: | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |

**5. EMPLOYMENT RECORD (in reverse chronological order)**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Current/most recent position** | | | | Current position: Yes  No | | | |
| Organisation | Place and country | | Job title | | | Date (mm/yyyy) | |
| From: | To: |
|  |  | |  | | |  |  |
| Description of tasks and responsibilities (management level, supervisory level, number of personnel supervised): | | | | | | | |
| Supervisor’s name: | | Email: | | | Phone No.: | | |
| **Previous position** (**1)** (only positions longer than 6 months) | | | | | | | |
| Organisation | Place and country | | Job title | | | Date (mm/yyyy) | |
| From: | To: |
|  |  | |  | | |  |  |
| Description of tasks and responsibilities (management level, supervisory level, number of personnel supervised): | | | | | | | |
| Supervisor’s name: | | Email: | | | Phone No.: | | |
| **Previous position (2)** (only positions longer than 6 months) | | | | | | | |
| Organisation | Place and country | | Job title | | | Date (mm/yyyy) | |
| From: | To: |
|  |  | |  | | |  |  |
| Description of tasks and responsibilities (management level, supervisory level, number of personnel supervised): | | | | | | | |
| Supervisor’s name: | | Email: | | | Phone No.: | | |
| **Previous position (3)** (only positions longer than 6 months) | | | | | | | |
| Organisation | Place and country | | Job title | | | Date (mm/yyyy) | |
| From: | To: |
|  |  | |  | | |  |  |
| Description of tasks and responsibilities (management level, supervisory level, number of personnel supervised): | | | | | | | |
| Supervisor’s name: | | Email: | | | Phone No.: | | |
| **Previous position (4)** (only positions longer than 6 months) | | | | | | | |
| Organisation | Place and country | | Job title | | | Date (mm/yyyy) | |
| From: | To: |
|  |  | |  | | |  |  |
| Description of tasks and responsibilities (management level, supervisory level, number of personnel supervised): | | | | | | | |
| Supervisor’s name: | | Email: | | | Phone No.: | | |
| **Previous position (5)** (only positions longer than 6 months) | | | | | | | |
| Organisation | Place and country | | Job title | | | Date (mm/yyyy) | |
| From: | To: |
|  |  | |  | | |  |  |
| Description of tasks and responsibilities (management level, supervisory level, number of personnel supervised): | | | | | | | |
| Supervisor’s name: | | Email: | | | Phone No.: | | |
| **Other previous positions and positions shorter than 6 months** | | | | | | | |
| Organisation | Place and country | | Job title | | | Date (mm/yyyy) | |
| From: | To: |
|  |  | |  | | |  |  |
|  |  | |  | | |  |  |
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**6. OTHER SKILLS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Languages** (European level \*) | | | **Native language:** | | |
| Other languages | Speak | Write | | Read | Understand |
|  |  |  | |  |  |
|  |  |  | |  |  |
|  |  |  | |  |  |
|  |  |  | |  |  |
|  |  |  | |  |  |

C1, C2 = Proficient; B1, B2 = Independent User; A1, A2 = Basic User

(\*) [Common European Framework of References for Languages](http://www.coe.int/T/DG4/Portfolio?L=E&M=/main_pages/levels.html)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Computer skills** | | | | | |
| Word processor |  | Web browsing |  | Presentations |  |
| Spreadsheets |  | Financial software |  | Project management |  |

C = Proficient User; B = Independent User; A = Basic User; N/A

**7. REFERENCES**

|  |  |  |  |
| --- | --- | --- | --- |
| Please provide minimum of 2 persons who will provide a reference. NO RELATIVES | | | |
| **NAME** | **COMPANY** | **EMAIL** | **TELEPHONE** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**8. MOTIVATION AND ADDITIONAL INFORMATION**

|  |
| --- |
| Please explain the reasons for your application, covering your profile and particular interest in this position. Add any other information that might be relevant to your application, including any skills, knowledge and experience for which there was no space above. |
|  |

**9. FINAL QUESTIONS**

|  |  |  |  |
| --- | --- | --- | --- |
| Please read and answer carefully all questions | | | |
| Do you have any objections to our making enquires of your employers? | | | Yes  No |
| Do you have any objections to undergoing a medical examination prior to employment? | | | Yes  No |
| Is any relative of yours, to the best of your knowledge, working in EUCAP | | | Yes  No |
| Have you ever been convicted or sentenced in any criminal proceedings (excluding minor traffic violations)? | | | Yes  No |
| Do you have any objections to undergoing Biometric and Security checks prior to/during employment? | | | Yes  No |
| If you responded “yes” to any of the previous questions, please provide details | | | |
|  | | | |
| By submitting this application form, 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 the Application Form will result in the application being void and will result in termination or dismissal from the mission | | | I agree:  Yes  No |
| Place | Date | Signature (typed name is sufficient) | |

**Due to the high number of applications received in each selection procedure, only shortlisted candidates invited for the interview phase will be contacted.**

**If selected for interview you will be requested to supply documentary evidence which supports your education and other statements you made above**.

**Do not send any documentary evidence until you have been asked to do so.**

**Please submit the completed form as a MS Word Document**