

**PROGRAMME ON FELLOWSHIPS ON DISARMAMENT
NOMINATION FORM**

I. LETTER OF TRANSMISSION

To be completed by senior official of the nominating Government. The certified nomination form has to be forwarded to:

*Coordinator,
Disarmament Fellowship, Training and Advisory Services Programme,
Office for Disarmament Affairs, Geneva Branch,
United Nations Office at Geneva, Palais des Nations,
1211 Geneva 10, Switzerland.*

The Government of _____

nominates _____

for a fellowship on disarmament issues.

The Government certifies that:

- a) The activities under this fellowship will contribute to the specialization of the nominee in the field of disarmament, thereby enabling her/him to engage more effectively in international disarmament deliberative and negotiating fora;
- b) In the case of a fellowship being granted to the nominee, full use would be made of the fellow's expertise in the field covered by her/his fellowship;
- c) All information supplied by the nominee is complete and correct;
- d) The nominee has a good working knowledge of English;
- e) The absence of the nominee during her/his fellowship would not have any adverse effect on her/his status, seniority, salary, pension and similar rights.

On return from the fellowship it is proposed to employ the fellow as follows:

Title of post: _____

Duties and responsibilities: _____

Place and date: Official address: Telephone: Facsimile:	<i>Signature of responsible Government official</i>
	Name and title of responsible Government official (capital letters)

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II. PERSONAL HISTORY AND PROPOSED STUDY PROGRAMME

Nomination forms are to be completed in capital letters. Each question must be answered clearly and completely. If necessary, additional pages of the same size may be attached.

1. Family name (<i>underline name by which formally addressed</i>)		First name		Other names	
2. Mailing address Tel. No.: Fax no.: E-mail:			3. Home address Tel. No.:		
5. Gender		6. Coordinates of person to contact in case of emergency			
7. Languages		Read	Write		Speak
Mother tongue:					
Other					
Other					
Other					
8. Residence in foreign countries in relation to the candidate's professional studies or interests					
Country		Year		Duration of stay	

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9. Education			
Name of institution	Year (from – to)	Major field of study	Degree(s)
10. List membership to professional societies			
11. List any relevant publications you have written (<i>do not attach</i>)			
12. Employment record (<i>it is important to give complete information</i>)			
Employment	Period (from-to)	Title of position	Duties and responsibilities
13. Preferred topics in the field of disarmament			

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14. Description of the practical use you will make of this study on your return home in relation to the responsibilities you expect to assume:

15. Give details of any fellowships or scholarships previously held by you, which you now hold, or for which you are a candidate:

16. I certify that my statements in answer to the foregoing questions are true, complete and correct to the best of my knowledge and belief. If selected as a fellow, I undertake to:

- conduct myself at all times in a manner compatible with my status as holder of a United Nations fellowship;
- spend full time during the period of the programme as directed by the United Nations;
- refrain from engaging in political, commercial, or any other activities other than those covered by the fellowship work programme;
- submit reports in accordance with the requirements of the programme;
- return to my duty station or home country at the end of the fellowship.

Date: _____ Signature of candidate: _____

17. Copy of the first page of the candidate's national passport, which contains the particulars of the candidate, to be attached to this form *(the provided copy will be used for the purposes of this fellowship application and will not be shared with any other entity)*

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III. RECOMMENDATIONS OF NATIONAL SELECTING AUTHORITY

1. Comments on educational qualifications, experience in the fellowship subject and personality of the candidate

2. Comments on the linguistic ability of the candidate.
(Note: the working languages of the United Nations are English and French. Based on past practice, the lectures are primarily conducted in English)

3. Comments on the proposed programme of work and duration of fellowship
(Note: the programme requires the release of the fellow for a period of about 10 weeks)

4. Comments on future use of the fellow's training

Name and title of responsible official: _____

Signature of responsible official: _____

Date: _____

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IV. MEDICAL REPORT

INSTRUCTIONS

To be completed in capital letters by a registered medical practitioner after thorough clinical and laboratory examination including x-ray of chest. The United Nations reserves the right to require the candidate to undergo a further medical examination before she/he takes up the fellowship.

1. Name of candidate:

Age:

Gender:

2. Is the person examined at present in good health and able to work full time?

3. Is the person examined able physically and mentally to carry on an intensive study programme away from her/his duty station/home place?

4. Is the person examined free from infectious diseases which could present risks for both the candidate and her/his contacts during the fellowships?

5. Does the person examined have any medical conditions which might require treatment during her/his fellowships?

6. Full name and address of examining physician

Signature and stamp of
examining physician: _____

Place and date: _____