个人简历

CURRICULUM VITAE

Note: Please complete this form in English. If you wish to be considered as a bilingual or trilingual candidate, please complete separate forms in each language.

备注:请用英文填写申请表。如具备双语或多门外语,请使用每种语言单独填表。

Recent Photo 最近照片

1. FAMILY NAME		FIRST NAME			2. I.D	2. I.D Card No.		
3. DATE OF BIRTH (day/m	onth/year)		4. NATIONALITY				5. GENDER MALE □	FEMAIL □
6. MARITAL STATUS				_				
SINGLE □ MARR	IED ⊔		DIVORCED) <u></u>	WIDOWE	D ⊔		
7. CURRENT ADDRESS			8. PERMANENT ADDRESS			9. CC	9. CONTACT INFORMATION	
						Mobi	Mobile: (
						Home	e: ()
						E-mail:		
10. EMERGENCY CONTAC	CT:	•						
NAME PF		HONE NUMBER			RELAT	RELATIONSHIP		
11. KNOWLEDGE OF OTH	IER LANGU	JAC	GES (Good, U	Jseful, A little	e)			
LANGUAGES READ					LISTEN	AND		ADE
			WRITE	SPEAK	UNDERSTAND		`	OEFL, TEM,
							C	ET)

12. EDU	12. EDUCATION AND TRAINING BACKGROUND (Name all educational institutions and apprenticeship attended					
since age	since age 18.					
DA	ATES	NAME and LOCATION	ACADEMIC DEGREES and	MAIN FIELD of		
ATTI	ENDED	of INSTITUTION of	CERTIFICATES or	STUDY	GPA(/5)	
From	То	LEARNING	DIPLOMAS <u>OBTAINED</u>	51001		
13 I IST	L ΔNV PHR	LICATIONS OR PAPERS:				
13. LIST	MITTOD	EICHTIONS OR THE ERS.				
14. LIST SPECIAL QUALIFICATIONS AND SKILLS CONFIRMED BY LICENSES HELD AND MEMBERSHIP IN						
PROFESSIONAL, CIVIC, PUBLIC OR INTERNATIONAL SOCIETIES OR INSTITUTIONS RELEVANT TO YOUR						
APPLICATION; INDICATE THE CLASS OF MEMBERSHIP WHEN APPROPRIATE:						
15. RECORD OF AWARD/ACHIEVEMENTS:						
13. KEC	OKD OF A	VARD/ACIIL VEIVENTS.				

16. WORKING/INTERNSHIP EXPERIENCE					
From(dd/mm/yyyy) TO(dd/mm/yyyy)	EMPLOYER AND TYPE OF BUSINESS:	TITLE OF POST AND NATURE OF DUTIES:	SUPERVISER	CONTACT NUMBER	
Use additional sheet if you have held more posts.					

*I certify that the statements made by me are true, complete and correct to the best of my knowledge and belief. I understand that any material misrepresentation or omission made hereon or on any other document requested by CSC or UNESCO renders me liable to termination or dismissal.

DATE:	SIGNATURE:
DATE:	SIGNATURE: