

UNU-INWEH Internship Programme Application Form

Important Note: This application form must be accompanied by a <u>cover letter</u> that includes a <u>brief statement of purpose</u>.

REF NO if applicable:	
UNU-INWEH/Intern_	

	PART I - TO I	BE COMPLE	TED BY TI	HE APPLICA	NT		
1. Family Name:			Given Name:				
2. Sex: F() M()			3. Date of Birth: day/month/year				
4. Place of Birth: 5. Nationality at birth:		lity at	6. Present nationality (ies) if different:				
7. Have you taken up nationality? Yes (If "Yes", which cour) No ()		tatus in any	country othe	r than that	of your	
8. Permanent Address:			9. Present Address:				
Tel:			Tel:				
Cell:			Fax:				
Email:			Email:				
10. Please list a name	of the person t	o be notified,	in case of e	mergency.			
Name:							
Address:							
Tel:							
11. Insurance (only fo							
I hereby confirm that I	hold a health/a	ccident insuran	ice policy as	follows:			
Policy Number:							
12. Knowledge of Lan	guages:						
What is your mother							
Language	R	ead	Write		Speak		
	Easily	Not easily	Easily	Not easily	Easily	Not easily	
English							
French							

Other (Please specify):							
13. Higher Education:							
Institution	Attendan	ce from/to	Degree Major subject of str			ct of study	
Name, place & country	Mo./Year	Mo./Year	(Date awarded/expected)				
14. Employment: Please	provide your	employment	history.				
45 Od D 1 4 T	e 4•						
15. Other Relevant Int		م مناه الم مانسة	.:				
a) University scholars	mps or acade	emic distinct	.10II:				
b) Publications (if any	v):						
(<u>-</u>	b) I deficutions (if dify).						
c) Please indicate how	•	.				-	
(An intern may be o							
partially subsidize	-	expenses suc	ch as meals, t	transportatio	n, and interr	net costs for	
the duration of the	the duration of the internship.)						
d) Please indicate who	d) Please indicate whether you receive any financial support from any institution or					r	
programme, such as a university, government, foundation or scholarship programme.							
	Yes No						
							
If yes, please spec	If yes, please specify organisation amount and currency					nd currency	
	and carrone)						
e) Have you ever been convicted, fined or imprisoned for the violation of any law							
(excluding minor traffic violations)?							
Yes No							
If yes, please give full details in an attached statement.							

16. Internship Period:					
Please indicate your availability for the internship (month and year):					
From: To:					
17. Two References: Please list TWO individuals not related to you who are familiar with your qualifications, work experience and character, and who have agreed to provide a reference if requested after the interview.					
Full name & title Address (Postal and e-mail) Profession					
18. I CERTIFY that the foregoing statements and answers are true, complete and correct to the best of my knowledge and belief.					
Signature: Date:					
This duly completed application – accompanied by a cover letter that includes a brief statement of purpose – must be uploaded as instructed under "How to apply" of the Vacancy. United Nations University, Institute for Water, Environment and Health (UNU-INWEH), hosted at					
McMaster University, 204-175 Longwood Road South, Hamilton, Ontario L8P 0A1, CANADA Tel: (905) 667-5511; Email: intern.at.inweh@unu.edu					

PART II - TO BE COMPLETED BY THE NOMINATING INSTITUTION (Where applicable)

Name of Institution/Organization:				
nominates				
to participate in the UNU-INWEH Internship Progra out by UNU-INWEH.	mme in Hamilton, Canada under the conditions set			
Duration and timing of internship:				
Purpose of candidate's proposed participation in the UNU-INWEH Internship Programme:				
Name and Address of Nominating	Name of Certifying Official:			
Institution/Organization				
(Must be stamped with the official seal)				
	Signature:			
	Date:			