



APPLICATION FOR MEMBERSHIP

Mr.: _____ Mrs.: _____ Last Name: _____

First name: _____ Date of birth: _____ Nationality: _____

Private address: _____

Organization: _____ Division: _____ Office n°: _____

Telephone: _____ Professional email: _____ Marital status: _____

Private email: _____ Entry date on duty: _____

Type of contract: _____ Grade: _____ End of contact: _____

Duty station: _____ Index/staff N°: _____

I, the undersigned, declare that I have read the Internal Rules and Regulations and Statutes and, by joining, agree to comply with them.

Date: _____

Handwritten signature: _____