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| **UNITED NATIONS** UNITED NATIONS – HAMILTON SHIRLEY AMERASINGHE MEMORIAL FELLOWSHIP **NOMINATION and RECOMMENDATION FORM** Instructions: To be completed by a senior official of the nominating Government, Government Agency, Educational institution or other body who will sign and stamp the form. A copy should be sent by E-mail to [DOALOS@un.org](mailto:DOALOS@un.org).  Please see <https://www.un.org/oceancapacity/HSA> and <https://forms.office.com/e/TeXwFbyjKR> for additional information.  I hereby \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Print name of individual nominating the candidate) (Title or Post, and Institution or Body of individual nominating candidate)  Nominate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Candidate’s surname, given name, middle initial)  On behalf of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (State, institution or body) As a candidate for United Nations – Hamilton Shirley Amerasinghe Memorial Fellowship And I also hereby certify that:   1. The research/studies to be made under this Fellowship are necessary for the advancement of the economic or social development or public administration of the State, and that in the case of a Fellowship being granted, full use would be made of the Fellow in the field covered by the Fellowship; 2. All information supplied by the candidate is complete and correct; 3. The candidate has adequate knowledge, appropriately tested, of the English language; 4. The absence of the candidate during the period of research/studies abroad would not have any adverse effect on the status, seniority, salary, pension and similar rights of the candidate; and 5. Upon completion of the Fellowship, the Candidate will be employed as:   Title of post or position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Duties and responsibilities:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Nominating Authority’s Address:  Place and date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Address line 1)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (City, District/Province)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of nominating official  (Postal Code, Nation )  Fax (Obligatory): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  E-mail (Obligatory):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (place official seal above) |

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| Instructions: **To be completed in detail by the nominating authority as identified in page 1.** |
| 1. Comments on educational qualifications, experience in the subject to be studied, age, health, and personality of the candidate: |
| 1. Comments on the linguistic ability of the candidate (participation in the Fellowship requires good working knowledge of English): |
| 1. Comments on proposed course of research/study, preferred institutions: |
| 4. Comments on the use to which the Fellow’s training will be put upon return home: |
| 5. Certification of nominating official as identified on page 1:  Place and Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature of nominating official  Please note:  This nomination and recommendation form contains two (2) pages. All fields must be duly completed and both pages stamped and signed.  (place official seal above) |