

PROGRAM NATO/PFP TRUST FUND Implemented by IOM

To be eligible to receive assistance from the NATO/PFP Trust Fund Programme implemented by IOM, you must complete the following registration form and return it to IOM as soon as possible and before 31 May 2007 at midnight (the Post Office stamp will certify the date and time) along with a copy of the letter from the Ministry of Defence related to your discharge or redundancy. Registration to the NATO/PFP Trust Fund assistance programme is voluntary. Please take some time to answer all questions as accurately as possible. The information you provide here will be used to identify what form of assistance is best suited to your background, skills, education and experience.

Registration Form Guidelines

There are 5 sections to this Registration Form:

- Section A Year of Discharge
- Section B Bio data
- Section C Socio-economic Data
- Section D Education and Professional skills
- Section E Possible assistance through NATO Trust Fund Programme
 - 1. *Self-Employment*
 - 2. *Self-Employment*
 - 3. *Agriculture Agro-Business*
 - 4. *Education / Training*
 - 5. *Job Placement*
 - Business Start-up*
 - Business Expansion*
 - Advisory (Start-up and/or expansion)*
 - Enhancing existing skills*
 - Employment Referral*

Be sure to carefully answer all questions by selecting the best answer to your situation: (i) clearly mark with an "X" in the box next to 'Yes' or 'No'; (ii) Print clearly questions requiring a written answer. Note that section "E" is indicative and can be changed during upcoming, personalised counselling sessions/meetings.

Please send the completed registration form as well as a copy of the letter from the Ministry of Defence related to your discharge or redundancy latest by 31 May 2007. The Post Office (PTT) stamp will certify the date and time. Applications postmarked beyond the deadline will not be considered valid. Make sure that you keep a copy of all documents sent.

Please read the form carefully before completion. Completed copies should be sent to the below address.

IOM Mission in Bosnia and Herzegovina
NATO/PFP Trust Fund Programme
Vilsonovo Šetalište 10, 71000 Sarajevo

TO confirm that your application has been received, contact the MoD info-line or the IOM Offices:

Ministry of Defence Info-line (033) 286-694 IOM ■ IOM (033) 648-165



NATO/PPF TRUST FUND PROGRAMME
Implemented by IOM
REGISTRATION FORM

A. Year of discharge				
1. When were you discharged?	<input type="checkbox"/> 2004 <input type="checkbox"/> Employee	<input type="checkbox"/> 2006 <input type="checkbox"/> Civil Servant	<input type="checkbox"/> 2007 <input type="checkbox"/> Military	
B. Personal data				
1. Family name:	2. Name:			
3. Father's name:	4. Date of birth:			
5. Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male	6. Do you have any disability? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7. Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Widow(er) <input type="checkbox"/> Divorced	8. JMBG br.:			
9. Municipality of residence:				
10. Address of residence: 			11. Mailing address (if different from residence address) 	
12.1 Contact telephone number:			12.2 Contact telephone number	
13. Valid Diver's licence <input type="checkbox"/> Yes <input type="checkbox"/> No			13.1 Diver's licence Category <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E	
C. Social and economic situation of the applicant				
1) Please fill in the below table, starting with yourself and then all the members of your household				
Family name and Name	Relationship (Spouse, child, etc.)	JMBG 	Employed (Yes / No)	Monthly income in BAM
2) Where are you and your family currently living? <input type="checkbox"/> Own property (or family property) <input type="checkbox"/> Temporary accommodation <input type="checkbox"/> Rented accommodation				
3) Are you:				
i. Internally Displaced Person <input type="checkbox"/> Yes (since when) / / <input type="checkbox"/> No				
ii. What are the reasons for not returning to your own? <input type="checkbox"/> Destroyed / Damaged home <input type="checkbox"/> Occupied home <input type="checkbox"/> Economic / employment opportunities <input type="checkbox"/> Personal <input type="checkbox"/> Other				
iii. Returnee <input type="checkbox"/> Yes <input type="checkbox"/> No				
4) What is the condition of your own accommodation?				
<input type="checkbox"/> I do not own an accommodation <input type="checkbox"/> Not damaged but occupied				
<input type="checkbox"/> Totally destroyed <input type="checkbox"/> Not damaged and habitable				
<input type="checkbox"/> Damaged -needs major repair <input type="checkbox"/> In construction				
<input type="checkbox"/> Damaged -needs minor repair <input type="checkbox"/> Other:				

D. Education and professional skills

1) Please indicate your education level (check all that are applicable):

- Elementary
 Secondary general/gymnasium (specify)
 University degree (Specify)

Post Graduate Education (degree obtained):

Name of Institution

Year (From – To)

Subject / Skills

2) Did you attend other specialised courses or training besides your formal education (if yes, specify)

Name of Institution

Year (From – To)

Subject / Skills

3) List your Employment history with and/or before joining the MoD (list last position first)

Type of Job or Work performed
& any additional skills you may have

Date (From – To)

Additional Skills:

4) List any foreign languages that you can speak, read or write:

LANGUAGE	<i>Speaking</i> (poor, good, fluent)	<i>Reading</i> (poor, good, fluent)	<i>Writing</i> (poor, good, fluent)

5) Computer skills:

	Basic	Very Good	Advanced
MS Windows			
MS Office Applications (Word, Excel, Access, PowerPoint)			
Database design			
Web Design			
Desktop publishing			
Other (please specify)			

E. Possible reintegration assistance through NATO Trust Fund

Out of the five reintegration options provided by IOM under the NATO Trust-Fund, indicate from "1" to "5" your preferred assistance, with "1" being your favourite, and "5" being your least favourite.

1. Self-employment (through business start-up):

<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
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i. Are you interested in starting your own business? Yes No

ii. If yes, what kind of business would you consider to start?

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iii. Do you own your business premises? Yes No

iv. Do you plan to register your business? Yes No

v. Would you be interested in receiving training on business plan development? Yes No

vi. Would you be interested in receiving a loan? Yes No

2) Self-employment (through business development and / or expansion)

<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
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- i. Do you (or your family) currently own a business? Yes No
- ii. Are you interested in continuing or re-starting your business? Yes No
- iii. Is your business registered? Yes N
- iv. What is the activity of your company?
- v. What kind of assistance do you expect to improve the capacity of your existing business?
- vi. Would you be interested in receiving training on business plan development? Yes No
- vii. Would you be interested in receiving a loan? Yes No

3) Agriculture

<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
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- i. Were you or are you (or your family member) involved in farming? Yes No
- ii. Would you be interested in starting up an agricultural business / activity? Yes No
- iii. If you are interested in agriculture, do you own land? Yes No
- iv. If yes, specify land surface area available for the agriculture activity you intend pursuing
- v. If you are interested to start working in agriculture, which assistance will help you most:
 Agricultural tools/Equipment Livestock
 Seeds & Fertilizers Other (specify in-kind contribution)
- vi. Would you be interested in receiving training on business plan development? Yes No
- vii. Would you be interested in receiving a loan? Yes No

4) Education / Training / Re-qualification

<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
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- 1) Are you interested in receiving vocational or re-qualification training? Yes No
If yes, specify training sector you would like receiving training in
- 2) Are you interested in pursuing your education? Yes No

5) Employment (* IOM does not guarantee to find job opportunities for all candidates)

<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
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- 1. Are you interested in being referred to a vacancy related to your afore-mentioned skills?
 Yes (Specify) No
- 2. If you are seeking direct employment, would you be interested in receiving training on job searching, preparing a resume and interview techniques?
 Yes No

I hereby certify that all information included in this registration form is true. I also certify that I have not received any assistance from any institution/agency or organization with respect to my discharge from the Armed Forces other than the severance pay received from the Ministry of Defence.

Date/Place

Signature of Applicant

N.B. The information and attachments contained in this application will be treated as confidential and are intended for the sole, specific use of IOM staff to support the applicant in securing and achieving the reintegration goals set within.