



4 ALBERT EMBANKMENT
LONDON SE1 7SR

Telephone: +44 (0)20 7735 7611

Fax: +44 (0)20 7587 3210

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19 July 2010

To: All IMO Member States
Intergovernmental Organizations
Non-governmental Organizations in Consultative Status

Subject: **Invitation for the nomination of auditors for the verification of conformity with goal-based standards (GBS)**

1 The Secretary-General has the honour to refer to the International goal-based ship construction standards for bulk carriers and oil tankers (resolution MSC.287(87)) (the Standards), the Guidelines for verification of conformity with goal-based ship construction standards for bulk carriers and oil tankers (resolution MSC.296(87)) (the Guidelines) and the associated amendments to SOLAS chapter II-1 (resolution MSC.290(87)), adopted by the eighty-seventh session of the Maritime Safety Committee on 20 May 2010. The aforementioned SOLAS amendments are expected to be accepted on 1 July 2011 and subsequently to enter into force on 1 January 2012.

2 Reference is made, in particular:

- .1 to paragraph 6.1 of the Standards, which provides, *inter alia*, that the rules for the design and construction of bulk carriers and oil tankers of an organization which is recognized by an Administration, or national rules of an Administration, shall be verified as conforming to the Tier I goals and Tier II functional requirements of the Standards, based on the Guidelines developed by the Organization; and
- .2 to paragraphs 21 to 27 of the Guidelines providing the conditions and modalities for the establishment of GBS Audit Teams which will conduct audits of the documentation package submitted for verification to determine whether the above rules conform to the Standards.

3 Paragraph 22 of the Guidelines states that Administrations and non-governmental organizations in consultative status with the Organization may nominate individuals for inclusion in a list of experts, maintained by the Secretary-General, from which the members of the GBS Audit Teams will be selected; and that nominations should be provided to the Secretary-General, accompanied by a curriculum vitae.

4 Therefore, to enable the Secretary-General to prepare and maintain a list of GBS auditors, Member States and international organizations are hereby invited to nominate individuals who could be made available to conduct GBS audits, pending the entry into force of new SOLAS regulation II-1/3-10 on 1 January 2012.

5 Member States and international organizations are requested to ensure that nominated experts meet the qualifications and competencies as set out in paragraph 23 of the Guidelines, which are repeated hereunder for ease of reference:

"Nominees should have adequate knowledge of, and experience in, ship structural design and construction, the Standards and classification society rules and rule development and be able to correctly interpret the rules for correlation with relevant regulatory requirements. Additionally, nominees should satisfy at least some of the following requirements:

- .1 a degree in naval architecture and/or structural engineering;
- .2 scientific or engineering knowledge of technical subjects addressed in ship structural standards including strength of materials, structural analysis, fatigue analysis, hydrodynamics and load calculations, and structural reliability;
- .3 design, construction or operating experience with the type of ship addressed by the ship rules being verified;
- .4 knowledge of ship safety construction requirements, including SOLAS requirements and industry standards, guidelines and practices;
- .5 knowledge of environmental protection requirements related to ship structures;
- .6 knowledge and experience in survey, inspection and maintenance of ship structures;
- .7 knowledge and experience in shipbuilding and ship construction practices;
- .8 knowledge and experience in auditing; and
- .9 research experience in any of the areas referred to in .1 to .7 above."

6 In nominating auditors, Member States and international organizations are requested to ensure that the attached IMO Personal History Forms are duly completed and submitted for each expert* being nominated.

* Separate CVs, additional to the forms, need **not** be submitted.



**INTERNATIONAL MARITIME ORGANIZATION
PERSONAL HISTORY STATEMENT (FIELD STAFF)**

*CONFIDENTIAL ADMINISTRATIVE INFORMATION
FOR USE IN IMO HEADQUARTERS AND NOT FOR SUBMISSION TO GOVERNMENT*

1.	FAMILY NAME	FIRST NAME	MIDDLE NAME	MAIDEN NAME, (IF ANY).	
2.	DATE OF BIRTH	3. PLACE OF BIRTH	4. NATIONALITY AT BIRTH	5. PRESENT NATIONALITY	
6.	SEX	7. MARITAL STATUS			
		SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> WIDOW(er) <input type="checkbox"/> DIVORCED <input type="checkbox"/>			
8. PRESENT ADDRESS		9. PERMANENT ADDRESS		10. PRESENT TELEPHONE NOS.	
				Office: Home: Fax: Mobile: E-mail:	
11. WHAT DO YOU CONSIDER AS YOUR SPECIALIZATION?					
12. HAVE YOU ANY DEPENDENTS? YES <input type="checkbox"/> NO <input type="checkbox"/> IF ANSWER IS "YES", PLEASE INDICATE HEREUNDER:					
NAME		Date of Birth	RELATIONSHIP	NAME	
13. WOULD YOU ACCEPT EMPLOYMENT FOR:					
LESS THAN SIX MONTHS? <input type="checkbox"/> ONE YEAR? <input type="checkbox"/> MORE THAN ONE YEAR? <input type="checkbox"/>					
14. PLEASE STATE WHETHER YOU ARE A PERMANENT RESIDENT OF ANY COUNTRY OTHER THAN THAT OF YOUR NATIONALITY AND IF SO, WHICH ONE?					
IF YOU HAVE TAKEN ANY LEGAL STEPS TOWARDS CHANGING YOUR PRESENT NATIONALITY, PLEASE EXPLAIN:					
15. ARE ANY OF YOUR RELATIVES EMPLOYED BY THE UNITED NATIONS OR AFFILIATED INTERNATIONAL AGENCIES?					
YES <input type="checkbox"/> NO <input type="checkbox"/> IF THE ANSWER IS "YES", PLEASE INDICATE HEREUNDER:					
NAME		RELATIONSHIP		NAME OF INTERNATIONAL ORGANIZATION	
16. HAVE YOU PREVIOUSLY SUBMITTED AN APPLICATION FOR EMPLOYMENT WITH THE UNITED NATIONS OR ANY AFFILIATED AGENCY?					
YES <input type="checkbox"/> NO <input type="checkbox"/> IF THE ANSWER IS "YES", PLEASE INDICATE WHEN AND WHERE:					

17. SALARY, NAME OF SUPERVISOR, AND REASON FOR LEAVING (<i>see Instruction 3</i>) (Confidential details pertaining to the first five entries listed under PROFESSIONAL EXPERIENCE on the second and third pages of IMO/2)							
POSITION AS LISTED on IMO/2		ANNUAL SALARY GROSS and NET (after taxes)		ALLOWANCES in addition to salary	SUPERVISOR'S NAME	DATES	REASON FOR LEAVING
		Start	Final				
A.	Gross					From:	
	Net					To:	
B.	Gross					From:	
	Net					To:	
C.	Gross					From:	
	Net					To:	
D.	Gross					From:	
	Net					To:	
E.	Gross					From:	
	Net					To:	
18. HAVE YOU ANY OBJECTIONS TO OUR MAKING INQUIRIES OF YOUR PRESENT EMPLOYER? Yes <input type="checkbox"/> No <input type="checkbox"/>							
19. REFERENCES: (<i>see Instruction 4</i>)							
FULL NAME		FULL ADDRESS		TELEPHONE NO.		BUSINESS or OCCUPATION	
				Office:			
				Home:			
				Mobile:			
				Office:			
				Home:			
				Mobile:			
				Office:			
				Home:			
				Mobile:			
20. HAVE YOU EVER BEEN ARRESTED, INDICTED, OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING, OR CONVICTED, FINED OR IMPRISONED FOR THE VIOLATION OF ANY LAW? (excluding minor traffic violations)? Yes <input type="checkbox"/> No <input type="checkbox"/> If "YES", give full particulars of each case in an attached statement.							
<p style="text-align: center;"><i>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 IMO renders me liable to termination or dismissal.</i></p>							
Date:				Signature:			



INTERNATIONAL MARITIME ORGANIZATION

PERSONAL HISTORY STATEMENT (FIELD STAFF)

This form must be completed accurately. Selection for a United Nations Development Programme post depends on a clearance by the requesting government. If your name is under consideration for such a post, a photocopy of IMO/2 will be sent to the government concerned. To facilitate copying, please use black typescript.

INSTRUCTIONS

1. LANGUAGE: Complete this form in one of the working languages of the United Nations, English, French or Spanish. However, if you are applying for a post listing English, French or Spanish as essential, please use the required language. If you wish to be considered as a bilingual or trilingual candidate, please complete separate sets of IMO/2 in each language.
2. DOCUMENTARY EVIDENCE: You may be invited to give documentary evidence in support of the statements you have made. Do not, however, send any document until you have been asked to do so and, in any event, do not submit the original texts of references or testimonials unless they have been obtained for the sole use of the International Maritime Organization.
3. SALARY, DATE OF EMPLOYMENT, NAME OF SUPERVISOR, AND REASON FOR LEAVING: In giving the annual salary in your **present** and most **recent appointments**, it is important to show both gross amounts and net (i.e. after tax); the total of any allowances should be shown separately.
4. REFERENCES: Please list three persons, not related to you, who are familiar with your character and qualifications. Do not repeat the names of the supervisors listed under SALARY, NAME OF SUPERVISOR AND REASON FOR LEAVING. (IMO/1)
5. EDUCATION: Name all educational institutions and apprenticeships attended since age 15. Under "Degrees", please give the original full title of each degree with equivalent in English when necessary. (IMO/2)
6. PUBLICATIONS OR PAPERS: Please do not attach. Simply list titles, publisher and year in which published. (IMO/2)
7. PROFESSIONAL EXPERIENCE: This is a chronological record of your professional career. Start with your present (or most recent) position and **work backward** in time to your first professional job. You may use the Supplementary Sheet if you need more space. (IMO/2)
8. ANALYSIS OF RELEVANT EXPERIENCE: If you believe that the chronological record as completed by you under IMO/2 is inadequate for the proper evaluation of your experience, you should amplify on IMO/3 in your own words, any parts of your experience which in your opinion are particularly relevant to your statement concerning your specialization and to the post requirements if you are applying for a specific post.
9. A recent photograph should be attached, unless you have any objection.
10. *This instruction sheet should be torn off and not returned.*



INTERNATIONAL MARITIME ORGANIZATION
PERSONAL HISTORY STATEMENT (FIELD STAFF)

THIS INFORMATION MAY BE SUBMITTED TO MEMBER GOVERNMENTS

CANDIDATE MAY
AFFIX PHOTOGRAPH HERE

Date: _____ Signature: _____

1. FAMILY NAME FIRST NAME MIDDLE NAME

2. PRESENT ADDRESS: _____ 3. PRESENT TELEPHONE NOS. _____

Office: _____ Mobile: _____
 Home: _____ E-mail: _____
 Fax: _____ Other: _____

4. NATIONALITY: _____ 5. DATE OF BIRTH: _____ 6. MARITAL STATUS: _____

D M Y

7. KNOWLEDGE OF LANGUAGES: Mother Tongue:

OTHER LANGUAGES	READ		WRITE		SPEAK		UNDERSTAND	
	EASILY	NOT EASILY	EASILY	NOT EASILY	FLUENTLY	NOT FLUENTLY	EASILY	NOT EASILY

8. EDUCATION: (see Instruction 5)

DATES ATTENDED		NAME and LOCATION of INSTITUTION of LEARNING	ACADEMIC DEGREES and CERTIFICATES or DIPLOMAS OBTAINED	MAIN FIELD of STUDY
From	To			

9. LIST ANY PUBLICATIONS OR PAPERS: (see Instruction 6)

10. LIST SPECIAL QUALIFICATIONS AND SKILLS CONFIRMED BY LICENCES HELD AND MEMBERSHIP IN PROFESSIONAL, CIVIC, PUBLIC OR INTERNATIONAL SOCIETIES OR INSTITUTIONS RELEVANT TO YOUR APPLICATION; INDICATE THE CLASS OF MEMBERSHIP WHEN APPROPRIATE:

11. *PROFESSIONAL EXPERIENCE* (see Instruction 7)

A.	<p>From: To most recent date of employment:</p> <p>EMPLOYER (Name and Address) AND TYPE OF BUSINESS:</p> <p>TITLE OF POST AND NATURE OF DUTIES</p> <p>NUMBER AND KIND OF EMPLOYEES SUPERVISED</p>
B.	<p>From: To most recent date of employment:</p> <p>EMPLOYER (Name and Address) AND TYPE OF BUSINESS:</p> <p>TITLE OF POST AND NATURE OF DUTIES</p> <p>NUMBER AND KIND OF EMPLOYEES SUPERVISED</p>
C.	<p>From: To most recent date of employment:</p> <p>EMPLOYER (Name and Address) AND TYPE OF BUSINESS:</p> <p>TITLE OF POST AND NATURE OF DUTIES</p> <p>NUMBER AND KIND OF EMPLOYEES SUPERVISED</p>

D.	<p>From: To most recent date of employment:</p> <p>EMPLOYER (Name and Address) AND TYPE OF BUSINESS:</p> <p>TITLE OF POST AND NATURE OF DUTIES</p> <p>NUMBER AND KIND OF EMPLOYEES SUPERVISED</p>
E.	<p>From: To most recent date of employment:</p> <p>EMPLOYER (Name and Address) AND TYPE OF BUSINESS:</p> <p>TITLE OF POST AND NATURE OF DUTIES</p> <p>NUMBER AND KIND OF EMPLOYEES SUPERVISED</p>
F.	<p>From: To most recent date of employment:</p> <p>EMPLOYER (Name and Address) AND TYPE OF BUSINESS:</p> <p>TITLE OF POST AND NATURE OF DUTIES</p> <p>NUMBER AND KIND OF EMPLOYEES SUPERVISED</p>
G.	<p>From: To most recent date of employment:</p> <p>EMPLOYER (Name and Address) AND TYPE OF BUSINESS:</p> <p>TITLE OF POST AND NATURE OF DUTIES</p> <p>NUMBER AND KIND OF EMPLOYEES SUPERVISED</p>

Use additional sheets if you have held more posts

12. DO WE HAVE YOUR PERMISSION TO CIRCULATE YOUR DATA TO OTHER ORGANIZATIONS/COMPANIES IF SO REQUESTED?
Yes ☐ No ☐



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THIS INFORMATION MAY BE SUBMITTED TO MEMBER GOVERNMENTS
(see *Instruction 8*)

ANALYSIS OF RELEVANT EXPERIENCE: Use this space to analyse your experience in relation to your statement concerning your specialization. Additionally, if you are applying for a specific post, please indicate the number of the Job Description of this post and analyse your experience in relation to the duties and requirements set out in the Job Description.
