

UNODC Country Office in the Islamic Republic of Iran

TERMS OF REFERENCE (TOR) Internship with the Regional Programme for Afghanistan and Neighbouring Countries

Background Information:

The Regional Programme for Afghanistan and Neighbouring Countries (Regional Programme) is a core part of UNODC's programme response in West and Central Asia. The Regional Programme complements ongoing assistance at country and global levels, adding a dedicated facility to support regional cooperation initiatives, with special significance given to confidence building measures and cooperation between Afghanistan and its West and Central Asian neighbours – namely Iran, Kazakhstan, Kyrgyzstan, Pakistan, Tajikistan, Turkmenistan, and Uzbekistan.

The Regional Programme serves a key coordination function for UNODC assistance linking the work of the Country offices in Afghanistan, Pakistan, Iran and Central Asia, building linkages with neighbouring Regional Programmes through the Inter-Regional Drug Control Approach (IRDCA) and working with global projects such as the Global Programme on Money Laundering (GPML), the Afghan Opium Trade Project (AOTP) and the Container Control Programme (CCP). The Regional Programme is closely integrated with the Paris Pact Initiative (PPI) being the operational body supporting its work in the West and Central Asia region. The Regional Programme's approach to countering narcotics is addressed through four priority interventions: (i) Regional Law Enforcement Cooperation, (ii) Regional / International Cooperation in Criminal Matters, (iii) Prevention and Treatment of Addiction among Vulnerable Groups, and (iv) Trends and Impacts Analysis to promote, support and enable evidence based policy making.

Sub-programme 3 of the Regional Programme seeks to facilitate regional cooperation and action on the prevention and treatment of addiction and to reduce the spread of HIV among high risk populations by building the capacities of countries to address these issues through providing training in international standards and providing countries the opportunity to share experiences and best practices. Evidence-based methods (such as FAST training) are then rolled out in the Member States if requested. The Regional Programme also supports regional networking to strengthen drug and related HIV prevention, treatment and rehabilitation services.

Internship Objective:

To assist in the planning and implementation of programme activities and to gain understanding main planning issues related to the Regional Programme activities and outcomes.

Specific Assignments:

- Assist in organizing the events or workshops;
- Drafting reports, MoMs and letters on the RP activities in English and Persian;
- Assist in preparing follow- ups related to the RP activates;
- Assist in designing 1 pager for the conducted activities under RP donors funds including European Union fund in 2018;
- Any other administrative tasks required by the supervisor.

Learning Elements:

During the assignment, the intern will gain experience in:

- Drafting and preparation of reports;
- Understanding the complexities of implementation of sound demand reduction programmes;
- Hands-on planning and implementation of drug demand reduction measures;
- Awareness-raising in the Regional Programme activities.

Travel:

In case of any travel to inside Iran, DSA and ticket cost will be separately provided by the UNODC Regional Programme.

If travel is required under the contract, the individual consultant shall:

- Obtain the security clearance from UNDP office (the details of travel including date of departure and arrival, accommodation and purpose of travel shall be submitted to UNDP office 2 working days before date of travel).

- Undertake the training courses on Basic Security in the Field and Advanced Security in the Field (only applicable for certain destination; to be checked with UNDP) and provide UNDP with both certificates; the related CD ROMs are available at UNDP office.

- Undertake a full medical examination and obtain medical clearance from a physician.

Duty Station:

Tehran, Iran;

Supervisor:

Ms. Roya Soltanian; Regional Programme Assistant, Regional Programme, Sub-programme 3

Internship Duration:

2 to 4 months, in the period of February to December 2018;

Qualifications of the Successful Individual Contractor:

- Undergraduate education in the field of social sciences, political science, international relations or economics;
- Studying in a higher education programme;
- Proficiency in English and Persian (especially writing) is required. Knowing Russian is an advantage;
- Proficiency in working with Microsoft office
- Knowledge in the field of Drug Demand Reduction is an advantage;

Presentation of Offer

The following documents are requested:

- a) **Personal P11**, indicating all past experience from of similar experiences, as well as the contact details (email and telephone number) of the Candidate and at least three (3) professional references (Annex I);
- b) Brief description of why you consider yourself as the most suitable for the assignment,

Interested candidates are invited to send the above mentioned documents to <u>fo.iran@unodc.org</u> making sure to mention their "Name" and "Vacancy for "RP Intern" in the subject line of their email.

Annex I:

UNITED NATIONS	DEVELOPN	IENT PROGRAI	MME						
UN									
		Pe	rsonal H	istory Fo	orm		DP		
INSTRUCTIONS: F follow all directior							ead carefully and		
1. Family name (se	urname)	2.	First names			3. Maiden na	ame, if applicable		
4. Date of birth day month yea		lace of birth	6. National birth	ity at	7. List a nationa	III your current lity(ies)	8. Gender Male 🗌 Female 🗌		
9. Marital status	Single				/idow(er)				
Nations has respon work or your ability	 10. Entry into United Nations service might require assignment and travel to any area of the world in which the United Nations has responsibilities. Do you have/experience any condition/situation which might limit your prospective field of work or your ability to engage in air travel? No Yes I If "Yes", please describe: 								
11. Permanent add		12. Present ac that indicated i		erent from		elephone numbe /Mobile;	rs		
Telephone No.		Telephone No.			addre	ss:	ofessional e-mail		
15. Have you any d	lependents?		f the answer	is "Yes", giv	e the foll	owing information			
Name	Date of birt	h Relatio	onship	Name		Date of birth	Relationship		
16. Have you taken up legal permanent residence status in any country other than that of your nationality? 17. Have you taken any steps towards changing your present nationality? NoYes									
18. Are any of your Common System, i			🗌 If "Yes", g	ive the follow		rmation:	nployed in the UN		
Name Relationship			μh		Name of Organi	zation & Duty Station			

	ame	Relations	nıp	Name o	f Unit & Duty Station	
20. Would you acc Yes No	ept employment for less th		21. Have you be the last 12 month		for any UNDP positions in hich post(s)?	
22. Languages – indicate mother tongue 1 st	Abilit	y to operate in the li	sted language(s)	in a work envir	onment	
5	Read	Write	S	peak	Understand	
	none limited working knowledge proficient ervice support level posts or istrative Support Assessm		dge proficie none limited dge workin proficie none limited dge workin proficie dge workin proficie none limited dge workin proficie none limited dge workin proficie none limited dge workin proficie none limited dge workin proficie none	g knowledge ent g knowledge ent g knowledge ent g knowledge ent g knowledge ent g knowledge ent g knowledge ent g knowledge ent	 none limited working knowledge proficient 	
No Yes if "Yes", date taken: UNDP/AFT – UNDP Accountancy and Finance Test: No Yes if "Yes", date taken:						

UNDP only recognizes degrees and diplomas from educational institutions that have been recognized or otherwise approved by competent authorities at the time that they were obtained. Degrees requiring little or no actual course work,

degrees awarded for payment of fees only, and degrees granting substantial credits for "lifetime achievements" or "life/work experience" will normally not be recognized. Incomplete degrees are unacceptable to UNDP, regardless of whether they are associated with a recognized higher educational institution.

A. List all educational institutions attended, including secondary school, and diplomas/degrees or equivalent qualifications obtained (highest level education first). Give the exact name of the institution and the title of degrees, diplomas, etc. (Please do not translate or indicate equivalent degrees).

Name, place and country	Attende Mo/Year	d from/to Mo. /Year	Degrees / Diplomas obtained	Main course of study	In person or online/remote?
	•	•			

B. Post-qualification training courses / learning activities						
Name, place and country	Туре	Attended Mo/Year		Certificates or Diplomas obtained	In person or online/remote?	

C. UN Language Proficiency Exams (if any)

D. UNDP Certification Progr	D. UNDP Certification Programmes (if any)						

						1	
25. List membe	ership of profe	essional societies	and activ	ities in civic, _l	bublic or intern	national af	airs
26. List any sig received	nificant publi	cations you have	written (d	o not attach t	nem) or any sp	ecial reco	gnitions you have
27. Have you al	ready been iss	ued a UN Index N	umber? No	Yes 🗌 If	'Yes", please in	dicate this	number:
a separate block gainfully employ and indicate cu	for each emp ed. If you nee rrency for you	loyment. Include s	ervice in th ach additio ost.	e armed forces nal pages of th	s and note any p e same size. P	period durir	nt you have had. Use ng which you were not s salary per annum
		ost, if not present					
FROM Month/Year	TO Month/Voor	SALARIES PER			AL TITLE: As s	pecified in	your Letter of
Month/Year	Month/Year	Starting (gross)	Final (gross)	Appointmer	t/Contract:		
			(9.000)	UN grade o	f your post (if ap	oplicable):	
				(do not indi	cate equivalency	y)	
				Last UN ste	p in your post (i	if applicable	e):
NAME OF EMP	LOYER:			TYPE OF B	USINESS:		
				EMPLOYM	ENT TYPE:		
				Full time:			
				Part Time:	(%)		
				Type of col			
				100 Ser		0 series	ALD/300 series
				Perman		lefinite	Continuing SSA / IC
					∐ TA <u>□</u> UN		Other
ADDRESS OF E	EMPLOYER				SUPERVISOR:		
				E-mail Addr	ess and Teleph	one No. of	Supervisor:
					·		-

				Do/did you ouponvice staff2 If act		
				Do/did you supervise staff? If so: Number of professional staff supervised:		
				Number of support staff supervised:		
Description of ye	our duties and re	elated accomplish	ments:			
Reason for leav	ing:					
		erse order i.e. m				
FROM	ТО	SALARIES PER		FUNCTIONAL TITLE: As specified in your Letter of		
Month/Year	Month/Year		Final	Appointment/Contract:		
			(gross)	UN Grade of your post (if applicable):		
				(do not indicate equivalency)		
				Last UN step in your post (if applicable):		
NAME OF EMP	LOYER			TYPE OF BUSINESS:		
				EMPLOYMENT TYPE:		
				Part Time: \Box (%)		
				Type of contract:		
				100 Series 200 series ALD/300 series Permanent Indefinite Continuing		
				SC UNV Other		
ADDRESS OF E	EMPLOYER			NAME OF SUPERVISOR:		
				E-mail Address and Telephone No. of Supervisor:		
				Did you supervise staff? If so: Number of professional staff supervised:		
				Number of support staff supervised:		
Description of ye	our duties and re	elated accomplish	ments:			
Reason for leav	ing:					
FROM	ТО	SALARIES PER	RANNUM	FUNCTIONAL TITLE: As specified in your Letter of		
Month/Year	Month/Year		Final	Appointment/Contract:		
			(gross)	UN Grade of your post (if applicable):		
				(do not indicate equivalency)		
				Last UN step in your post (if applicable):		
NAME OF EMP				TYPE OF BUSINESS:		
	LUTER					
				EMPLOYMENT TYPE:		
				Full time:		
				Part Time: 🗌 (%)		

				Type of contract:			
				100 Series	200 series	ALD/300 series	
				Permanent			
ADDRESS OF I				SC NAME OF SUPERV		Other	
						- (0	
				E-mail Address and	I l'elepnone No.	of Supervisor:	
				Did you supervise s			
				Number of profession			
				Number of support	stall supervised	1.	
Description of v	our duties and r	elated accomplish	ments:				
2 000		o					
Reason for leav	ing:						
	-						
FROM	ТО	SALARIES PER		FUNCTIONAL TITL	E: As specified in	n vour Letter of	
Month/Year	Month/Year		Final	Appointment/Contra	•		
			(gross)			N	
				UN Grade of your p):	
				(do not indicate equ	• •		
				Last UN step in your post (if applicable):			
NAME OF EMP	LOYER			TYPE OF BUSINESS:			
				EMPLOYMENT TY	PE:		
				Full time:			
				Part Time: 🗌 (%)		
				Type of contract:			
				☐ 100 Series	200 series	ALD/300 series	
				Permanent			
				FTA			
				SC SC	UNV 🗌	Other	
ADDRESS OF I	EMPLOYER			NAME OF SUPERV	/ISOR:		
				E-mail Address and Telephone No. of Supervisor:			
				Did you supervise s	taff? If so		
				Did you supervise staff? If so: Number of professional staff supervised:			
				Number of support staff supervised:			
Description of y	our duties and r	elated accomplish	iments:				
Reason for leav	ing:						
	ing.						
FROM	ТО	SALARIES PER	ANNUM	FUNCTIONAL TITL	E: As specified in	n your Letter of	
Month/Year	Month/Year		Final	Appointment/Contra	•	•	
			(gross)).	
				UN Grade of your p	· · ·).	
				(do not indicate equ	• •		
				Last UN step in you		ole):	
NAME OF EMPLOYER			TYPE OF BUSINESS:				

				EMPLOYMENT TY	PE:		
				Full time:	0()		
				Part Time: (Type of contract:	%)		
				Type of contract.			
				100 Series	200 series	ALD/300 series	
				Permanent			
				│		SSA / IC	
ADDRESS OF I	EMPLOYER						
				E-mail Address and		f Supervisor:	
				Did you supervise s	staff? If so:		
				Number of professi		sed:	
				Number of support	staff supervised:		
Description of y	our duties and	related accomplish	ments:				
Reason for leav	ring:						
FROM	ТО	SALARIES PER	ANNUM	FUNCTIONAL TITL	E: As specified in	your Letter of	
Month/Year	Month/Year		Final	Appointment/Contra	act:		
			(gross)	UN Grade of your p	ost (if applicable):		
				(do not indicate equ			
				Last UN step in your post (if applicable):			
NAME OF EMP				TYPE OF BUSINESS:			
				EMPLOYMENT TY	PE:		
				Full time: 🗌 Part Time: 🗍 (%)		
				Type of contract:	/0)		
				100 Series	200 series	ALD/300 series	
				│ □ FTA │ □ SC		SSA / IC Other	
ADDRESS OF I	EMPLOYER						
				E-mail Address and		f Supervisor:	
				Did you supervise s			
			Number of professi		sed:		
				Number of support	statt supervised:		
Description of y	our duties and	related accomplish	ments:	1			
Reason for leav	ing:						
FROM	TO	SALARIES PER	ANNUM	FUNCTIONAL TITL	E: As specified in	your Letter of	

Month/Year	Month/Year		Final	Appointment/Contra	act:		
			(gross)	UN Grade of your p	oost (if applicable):		
				(do not indicate equ	,		
				Last UN step in your post (if applicable):			
NAME OF EMP	LOYER	I	1	TYPE OF BUSINES	SS:		
				EMPLOYMENT TY	PE:		
				Full time: 🗌 Part Time: 🔲 (%)		
				Type of contract:	/0)		
				100 Series	200 series	ALD/300 series	
					UNV	Other	
ADDRESS OF I	EMPLOYER			NAME OF SUPERV			
				E-mail Address and	I Telephone No. of	Supervisor:	
				Did you supervise s			
				Number of profession Number of support		ed:	
					stall superviseu.		
Description of y	our duties and r	elated accomplish	nments:				
Reason for leav	ing:						
FROM	ТО	SALARIES PER	1	FUNCTIONAL TITL		your Letter of	
Month/Year	Month/Year	Starting	Final	Appointment/Contra UN Grade of your p			
		(gross)	(gross)	(do not indicate equ			
				Last UN step in you	ir post (if applicable	e):	
NAME OF EMP	LOYER			TYPE OF BUSINES	SS:		
				EMPLOYMENT TY	PE:		
				Full time:			
				Part Time: (%)		
				Type of contract:			
				100 Series	200 series	ALD/300 series	
				Permanent			
				∐ FTA ∏ SC		SSA / IC	
ADDRESS OF I	EMPLOYER			NAME OF SUPERV			
				E-mail Address and	d Telephone No. of	Supervisor:	
				Did you supervise s			
				Number of profession		ed:	
				Number of support	stall supervised:		
Description of y	our duties and r	elated accomplish	nments:				
Reason for leav	ing:						

FROM	ТО	SALARIES PER	R ANNUM	FUNCTIONAL TITL		your Letter of	
Month/Year	Month/Year	Starting	Final	Appointment/Contra			
		(gross)	(gross)	UN Grade of your p			
				(do not indicate equ			
				Last UN step in you		e):	
NAME OF EMP	LOYER			TYPE OF BUSINES	SS:		
				EMPLOYMENT TY	PE:		
				Full time:	0()		
				Part Time: (%)		
				Type of contract:			
				☐ 100 Series	200 series	ALD/300 series	
				Permanent			
						Other	
ADDRESS OF E				NAME OF SUPER			
				E-mail Address and		Supervisor:	
				Did you supervise s	staff? If so:		
				Number of profession		ed:	
				Number of support			
					-		
Description of yo	our duties and i	related accomplis	shments:				
Reason for leave	ina:						
Reason for leave	ing.						
FROM	ТО	SALARIES PE	R ANNUM	FUNCTIONAL TITL	E: As specified in y	your Letter of	
Month/Year	Month/Year	Starting	Final	Appointment/Contra			
		(gross)	(gross)	UN Grade of your p			
				(do not indicate equ		、	
				Last UN step in you		e):	
NAME OF EMP	LOYER			TYPE OF BUSINES	SS:		
				EMPLOYMENT TY	PE		
				Part Time: [] (%)		
				Type of contract:			
				100 Series	200 series	ALD/300 series	
				Permanent	Indefinite	Continuing	
				🔲 FTA	🗌 TA	SSA / IC	
						Other	
ADDRESS OF E	EMPLOYER			NAME OF SUPER		- .	
				E-mail Address and	Telephone No. of	Supervisor:	
			Did you supervise staff? If so: Number of professional staff supervised:				
				Number of support		<i>i</i> u.	
					otan Superviseu.		
Description of vo	our duties and i	related accomplis	shments:				
Deegar							
Reason for leave	ing:						
29. Have you an	iy objections to	our making inqu	iries of:				

 (a) your present employer? No Yes (b) your previous employers? No Yes 						
30. Are you now, or have you ever been, a national civil servant in your government? No Yes						
If "Yes", Indicate dates of service:	Functions:	Country:				
be contacted for a reference	elated to you who are familiar with your ch ur <i>current</i> employer without obtaining prior					
UNDP may seek references from your for						
Full Name						
32. State any other relevant facts in sup outside the country of your nationality	port of your application. Include informatio	n regarding any periods of residence				
	l, or imprisoned for the violation of any law particulars of each case in an attached sta					
grounds of misconduct?	sures imposed on you, including dismissal particulars of each case in an attached sta					
35. Have you ever been separated from	service on the grounds of unsatisfactory p	performance?				
No 🗌 Yes 🗌 If "Yes", give full	particulars of each case in an attached sta	atement.				
36. I certify that the information I have provided in the present document is true, complete and correct to the best of my knowledge. I understand that any misrepresentation or material omission made in this document may lead to the termination of my appointment or to dismissal. I understand this also applies to any other information or document requested by the Organization for the purpose of my recruitment to and employment with UNDP.						
In connection with this application, I authorize former employers and educational institutions to release information about my background to UNDP or its agent. My signature below releases the aforesaid parties providing information about me from any liability whatsoever in collecting and disseminating the information obtained.						
DATE: SIGNATURE:						
Note:						
Applications for employment at UNDP must include a completed and signed Personal History form (P.11). By submitting a Personal History form, the applicant authorizes UNDP or its agent to verify and validate all information provided in the P.11. The P.11 form is not valid without signature. The signed P.11 form serves to release any party cited in the form from any liability whatsoever for releasing information to UNDP or its agent.						

13

You may be requested to provide documentary evidence of the statements you have made above. Do not, however, send any documentary evidence until you have been asked to do so and, in any event, do not submit the originals of any references, testimonials or certificates of academic achievement unless they have been obtained for the sole use of UNDP.

If Degrees/Certificates are in foreign language, you may be required to provide official English translation at time of request.