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| **UNITEDNATIONS** UNITED NATIONS - THE NIPPON FOUNDATION STRATEGIC NEEDS FELLOWSHIP **NOMINATION and RECOMMENDATION FORM** Instructions: To be completed by an official of the nominating Government, 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/content/unnf-strategic-fellowship> and <https://www.un.org/oceancapacity/content/apply-now> for additional information.  I herby       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 the four (4) month United Nations - The Nippon Foundation Strategic Needs Fellowship in  Ocean Affairs and the Law of the Sea  And I also herby 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 Candidate`s post or position:  Candidate’s duties and responsibilities:  Nominating Authority’s Address: Place and date:    (Address line 1)    (Address line 2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_        Signature of nominating official  (City, District/Province)    (Postal Code, Nation )  Fax (Obligatory):  Website (Obligatory):  E-mail (Obligatory):           (place official seal above)  (please leave personal or professional email; generic emails will not be accepted) a |

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| Instructions: **To be completed in detail by the nominating authority as identified in page 1.** |
| 1. Comments on health, personality and professionalism 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 three most critically important and time-sensitive issues in ocean affairs and the law of the sea that need to be addressed in your country and the candidate’s professional role in addressing them: |
| 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) |