Ref.: SCBD/SAM/DC/SBG/LM/AAS/85153 6 January 2016

# N O T I F I C A T I O N

**Nominations for the Capacity-building workshop for Africa on achieving**

**Aichi Biodiversity Targets 11 and 12**

**22 to 25 March 2016 – Uganda**

Dear Madam/Sir,

I am pleased to inform you that a capacity-building workshop for Africa on achieving Aichi Biodiversity Targets 11 and 12 will be held from 22 to 25 March 2016 in Uganda. The workshop is organized by the Secretariat of the Convention on Biological Diversity (CBD) and hosted by the Government of Uganda, with generous financial support provided by the Government of Japan, through the Japan Biodiversity Fund. The workshop will be conducted in English, with French interpretation. Meeting documents and logistical information will be posted on the CBD website at <http://www.cbd.int/doc/?meeting=PAWS-2016-01> in due course.

The workshop is part of a series of capacity-building workshops organized pursuant to the request of the Conference of the Parties through paragraph 10 of decision XI/24. Under the same decision, paragraph 1(b), Parties were invited to, consistent with national circumstances, undertake major efforts, with appropriate support, to achieve all elements of Aichi Biodiversity Target 11.

The fourth edition of the *Global Biodiversity Outlook* (GBO-4) has reported varying levels of progress for the elements of Aichi Biodiversity Target 11: the quantitative elements (to protect 17 per cent of terrestrial and 10 per cent of coastal and marine areas) are on track, but the other elements (ecological representation, coverage of areas important for biodiversity, management effectiveness, governance, and integration of protected areas into wider land- and seascapes) still needing more attention in order to be achieved by 2020. In addition, the elements of Aichi Biodiversity Target 12 (known threatened species and conservation status of species in decline) have not had significant overall progress and require concrete commitment and actions to enhance implementation.

The overall objective of the workshop is thus to:

1. Collect and share information and data on the status of each element of Aichi Biodiversity Targets 11 and 12;
2. Identify priority actions for Africa for achieving the elements of both targets by 2020 and to explore opportunities for advancing these actions through financial support from national budgets and from bilateral and multilateral sources, including the biodiversity allocations of the sixth replenishment cycle of the Global Environment Facility’s (GEF-6) System for Transparent Allocation of Resources (STAR); and
3. Share experiences, assessments, case studies, identified priority actions and other relevant information on Aichi Biodiversity Targets 11 and 12, with a view to discussing and highlighting commonalities, as well as building partnerships for project development and implementation.

I invite your Government to nominate an official in charge of managing protected areas (e.g. the protected areas focal point, or another expert from the Ministry of Environment) to participate in the regional workshop. The nominee or the nominees proposed should be in a position to translate the capacity and insights gained from the workshop to enable their government to finalize their identify priority actions for achieving the elements of both targets.

In the weeks leading up to the workshop, the participants will be provided with pre-work questions on the status of Aichi Biodiversity Targets 11 and 12 and asked to submit identified priority actions for their achievement. Participants may present collated information or case studies at the workshop and will also be offered the opportunity to benefit from online learning modules on key protected areas themes. Other in-country staff may also wish to take these modules.

The participation of nominated representatives from countries eligible to receive funding will be supported with a direct, economy-class round-trip ticket and a Daily Subsistence Allowance (DSA) for the duration of the workshop, in accordance with relevant United Nations rules.

Nominations should be submitted using **the attached nomination form (Annex I), accompanied by an official letter of nomination** to the Secretariat at [secretariat@cbd.int](mailto:secretariat@cbd.int) or faxed to + 1 514 288 6588, as soon as possible but **no later than 1 February 2016**. **Nominations need to be accompanied with the duly completed HR Mini Master Request Form attached herewith (Annex II), as well as a scanned photocopy (in pdf format) of the nominee’s national passport.**

Please kindly note that, in the context of the United Nations-wide introduction of a new resource planning system called “Umoja”, arrangements for travel and DSA disbursement for delegates can only be initiated once the information contained in the Mini Master Request Form and the national passport is entered into the system. Submission of these documents together with the nomination form is therefore important in order to expedite the necessary administrative arrangements and to conclude them on time.

I look forward to receiving your nominations and thank you for your support and cooperation.

Please accept, Madam/Sir, the assurances of my highest consideration.

Braulio Ferreira de Souza Dias

Executive Secretary

Enclosure

Annex I

**NOMINATION FORM**

**Sub-regional Capacity-building workshop for Africa on achieving**

**Aichi Biodiversity Targets 11 and 12**

**22 to 25 March 2016 – Uganda**

**I. INFORMATION ON THE NOMINEE**

Family name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gender: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the Ministry/Agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the Department/Unit:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone (country and city codes): +\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Fax:+\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**II. QUALIFICATIONS AND EXPERIENCE OF THE NOMINEE**

*(To be completed by the nominee)*

***2. Current employment***

(a) Official title (current position): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(b) Date of appointment to current position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(c) Expected duration of current position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***3. Description of the relevant activities of your organization

***4. Indicate what relevant information and experience you can contribute to the workshop:***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***5. Please provide a brief statement indicating how you and your organization would benefit from participation in this meeting/training and how you plan to utilize the experience in your work in the context of the implementation of the Convention on Biological Diversity:***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**III. ADDITIONAL INFORMATION**

***6. Indicate if you have participated in other meetings/workshops on a similar topic:***

|  |  |
| --- | --- |
| Name of meeting/training: | Date/Venue: |
|  |  |

***7.*** ***I agree that, if selected, I will complete all the pre- and post-meeting/training assignments requested and attend all the meeting/training sessions. I also agree that, upon return to my work place, I will apply and share with others the knowledge and skills acquired from the meeting/training and will report back to the CBD Secretariat within the prescribed period for this event.***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

**OFFICIAL ENDORSEMENT**

**A *letter of nomination signed by the national focal point* and *this official endorsement signed* *by the administrative head of the nominee’s organization* and the nominee’s CV *must be attached to the nomination form*. Without this signed letter and CV, the application will not be complete and the Secretariat *will not* be able to consider them.**

*(This statement in support for the candidate is required. It must be completed, signed, and stamped by the head of the national institution from which the candidate comes.)*

Name of Head of Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Institution:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

endorses the application of Mr./Mrs./Miss \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (*name of meeting/training*) to be held from \_\_\_\_ to \_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (*name of city and country*).

The institution confirmsthat on his/her return, Mr./Mrs./Miss \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ will retain his/her current responsibilities related to subject matter of the meeting/training and will be supported to apply and share the knowledge and skills gained from the meeting/training.

Signature and Stamp Date:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name (Please Print) (Signature)**

**THIS APPLICATION HAS TO BE SIGNED, DATED AND ACCOMPANIED BY AN OFFICIAL LETTER OF NOMINATION AND RECEIVED BY THE SECRETARIAT:**

The Executive Secretary

Secretariat of the Convention on Biological Diversity

413 St.-Jacques Street, Suite 800

Montreal, Quebec, Canada. H2Y 1N9

Tel.: 1 514 288 2220

Fax: 1 514 288 6588

Web: <http://www.cbd.int>

E-mail: [secretariat@cbd.int](mailto:secretariat@cbd.int)

Annex II

**HR MINI MASTER REGISTRATION FORM**

NOTE: This form is to be used by non-staff individuals including meeting participants and staff administered by other agencies.

**Instructions:**

1. Please answer each field completely. TYPE or PRINT in dark ink.
2. Please attach copy of passport. Please understand Government ID as passport only.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***Part A – General Data*** | | | | | |  |
| **Title** (Mr./Mrs./etc): | |  | | | |  |
| **First Name** (as in Government ID): | |  | | | |  |
| Middle Name (as in Government ID): | |  | | | |  |
| **Last Name** (as in Government ID): | |  | | | |  |
| **Have you worked with the UN in the past?** | | Yes  No | **If yes, please provide Index Number** | |  |  |
| **Date of Birth** (dd/mm/yyyy): | |  | | | |  |
| Place of Birth(Country)**:** | |  | (City): | |  |  |
| **Gender:** | | Male  Female | | | |  |
| **Nationality:** | |  | | | |  |
| **Email Address**: | |  | | | |  |
| **Telephone Number**: | |  | | | |  |
| **Address**: | |  | | | |  |
|  |  | | |  | |  |
| (**City**) | (Zip Code) | | | **(Country)** | |  |
| **ID Number: (Passport)** | |  | | | |  |
| **ID Date of Issue** (mm/dd/yyyy)**:** | |  | **ID Valid to date** | |  |  |
| **ID Place of Issue:** | |  | | | |  |
| **ID Country of Issue:** | |  | | | |  |

**Travel Information details:**

|  |  |  |
| --- | --- | --- |
| **Departure City:** |  |  |
| **Return City:** |  |  |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Part B – Banking Data***  ***(UNEP/SCBD comment: Bank details will not be used for transactions without prior written consent by Delegate/Participant/Non-Staff)*** | | | | | | | | | |
| Account Title: | |  | | | | | | | (Refer #1) |
| Currency of payment: | |  | | | | | | |  |
| Name of Bank: | |  | | | | | | |  |
| Address of Bank: | |  | | | | | | |  |
|  | |  | |  | | |  | |  |
|  | | (City) | | (Zip Code) | | | (Country) | |  |
| Bank ID number: | |  | | | | | | | (Refer #2) |
| Account # or IBAN: | |  | | | | | | |  |
| Currency of Account: | |  | | | | | | |  |
| Type of Account: | | Checking | | OR | | | Savings | | (Refer #3) |
| Routing Instructions | |  | | | | | | | (Refer #4) |
| ***Part C – Certification by Non Staff/External Individual*** | | | | | | | | | |
| Full Name: |  | | | | | | | | |
| By checking this box I certify that the above information is accurate: | | | | |  | Date (mm/dd/yyyy): | |  | |
| ***Part D – To be filled by HR Mini Master Administrator*** | | | | | | | | | |
| Personnel Subarea (Duty Station) of engagement/meeting: | | |  | | | | |  | |
| Personnel Area (Country) of engagement/meeting: | | |  | | | | |  | |
| Effective date (dd/mm/yyy): | | |  | | | | |  | |
| Name & Signature  (HR Mini Master Administrator) | | |  | | | | |  | |
| Date (mm/dd/yyyy): | | |  | | | | |  | |

**INSTRUCTIONS TO FILL IN THE HR MINI MASTER REGISTRATION FORM**

***(UNEP/SCBD comment: Bank details will not be used for transactions without prior written consent by Delegate/Participant/Non-Staff)***

**#1 BANK ACCOUNT TITLE**

You should have an account in your name or a joint account maintained by yourself and no more than one other person. Please note that deposits will not be made to bank accounts without the name of the Delegate/Participant/Non-Staff.

**#2 BANK ID NUMBER AND ACCOUNT NUMBER**

It is the responsibility of the Delegate/Participant/Non-Staff to provide us with complete and unambiguous payment instructions. For the cross-border payment, you may wish to include the BIC code (SWIFT number) of your bank.

The account number formats for some countries are provided below.

USA ABA Number (9 digits) + Account Number

Australia: BSB Number (3 digits + 3 digit) + Account Number

Canada: Transit Number (5 digits + 3 digits) + Account Number

Russia Bank Number (8 digits) + Account Number

Since the introduction of euro, many European banks are adopting IBAN as a new standard format to indicate the account numbers. A table below shows the IBAN structures.

IBAN (International bank Account Number)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Country** | **Total Digits** | **Country Code** | **Check Digits** | **Bank Code** | **Branch Code** | **Account Number** | **Check Digits** |
| **Albania** | **28 digits alpha numeric number** | AL (2a) | 2n | 3n | 5n | 16an |  |
| **Andorra** | **24 digits alpha numeric number** | AD (2a) | 2n | 4n | 4n | 12an |  |
| **Austria** | **20 digits alpha numeric number** | AT (2a) | 2n | 5n | 11n |  |  |
| **Azerbaijan** | **28 digits alpha numeric number** | AZ (2a) | 2n | 4a |  | 20an |  |
| **Bahrain** | **22 digits alpha numeric number** | BH (2a) | 2n | 4a |  | 14an |  |
| **Belgium** | **16 digits alpha numeric number** | BE (2a) | 2n | 3n | 7n | 2n |  |
| **Bosnia and H** | **20 digits alpha numeric number** | BA (2a) | 2n | 3n | 3n | 8an | 2n |
| **Brazil** | **29 digits alpha numeric number** | BR (2a) | 2n | 8n | 5n | 10an | 2an |
| **Bulgaria** | **22 digits alpha numeric number** | BG (2a) | 2n | 4a | 4n | 2n+8an |  |
| **Costa Rica** | **21 digits alpha numeric number** | CR (2a) | 2n | 3n |  | 14n |  |
| **Croatia** | **21 digits alpha numeric number** | HR (2a) | 2n | 7n |  | 10n |  |
| **Cyprus** | **28 digits alpha numeric number** | CY (2a) | 2n | 3n | 5n | 16an |  |
| **Czech** | **24 digits alpha numeric number** | CZ (2a) | 2n | 4n | 6n | 10n |  |
| **Denmark** | **18 digits alpha numeric number** | DK (2a) | 2n | 4n | 9n | 1n |  |
| **Dominican R.** | **28 digits alpha numeric number** | DO (2a) | 2n | 4a |  | 20n |  |
| **Estonia** | **20 digits alpha numeric number** | EE (2n) | 2n | 2n | 2n | 11n | 1n |
| **Finland** | **18 digits alpha numeric number** | FI (2a) | 2n | 6n | 7n | 1n |  |
| **Country** | **Total Digits** | **Country Code** | **Check Digits** | **Bank Code** | **Branch Code** | **Account Number** | **Check Digits** |
|  |  |  |  |  |  |  |  |
| **France** | **27 digits alpha numeric number** | FR (2a) | 2n | 5n | 5n | 11an | 2n |
| **Georgia** | **22 digits alpha numeric number** | GE (2a) | 2n | 2a |  | 16n |  |
| **Germany** | **22 digits alpha numeric number** | DE (2a) | 2n | 8n | 10n |  |  |
| **Gibraltar** | **23 digits alpha numeric number** | GI (2a) | 2n | 4a | 15an |  |  |
| **Greece** | **27 digits alpha numeric number** | GR (2a) | 2n | 3n | 4n | 16an |  |
| **Guatemala** | **24 digits alpha numeric number** | GT (2a) | 2n | 4a |  | 20an |  |
| **Hungary** | **28 digits alpha numeric number** | HU (2a) | 2n | 3n | 4n + 1n | 15n | 1n |
| **Iceland** | **26 digits alpha numeric number** | IS (2a) | 2n | 4n | 2n | 6n + 10n |  |
| **Ireland** | **22 digits alpha numeric number** | IE (2a) | 2n | 4a | 6n | 8n |  |
| **Israel** | **23 digits alpha numeric number** | IL (2a) | 2n | 3a | 3n | 13n |  |
| **Italy** | **27 digits alpha numeric number** | IT (2a) | 2n+1a | 5n | 5n | 12n |  |
| **Jordan** | **30 digits alpha numeric number** | JO (2a) | 2n | 4a | 4n | 18an |  |
| **Kazakhstan** | **20 digits alpha numeric number** | KZ (2a) | 2n | 3n |  | 13an |  |
| **Kuwait** | **30 digits alpha numeric number** | KW (2a) | 2n | 4a |  | 22an |  |
| **Kosovo** | **20 digits alpha numeric number** | XK (2a) | 2n | 4n |  | 10n | 2n |
| **Latvia** | **21 digits alpha numeric number** | LV (2a) | 2n | 4a | 13an |  |  |
| **Lebanon** | **28 digits alpha numeric number** | LB (2a) | 2n | 4an |  | 20an |  |
| **Liechtenstein** | **21 digits alpha numeric number** | LI (2a) | 2n | 5n |  | 12an |  |
| **Lithuania** | **20 digits alpha numeric number** | LT (2a) | 2n | 5n |  | 11n |  |
| **Luxembourg** | **20 digits alpha numeric number** | LU (2a) | 2n | 3n | 13an |  |  |
| **Macedonia** | **19 digits alpha numeric number** | MK (2a) | 2n | 3n |  | 10an | 2n |
| **Malta** | **31 digits alpha numeric number** | MT (2a) | 2n | 4a | 5n | 18an |  |
| **Mauritania** | **27 digits alpha numeric number** | MR (2a) | 2n | 5n | 5n | 11n | 2n |
| **Mauritius** | **30 digits alpha numeric number** | MU (2a) | 2n | 6an | 2n | 12n | 6an |
| **Moldova** | **24 digits alpha numeric number** | MD (2a) | 2n | 2an |  | 18an |  |
| **Monaco** | **27 digits alpha numeric number** | MC (2a) | 2n | 5n | 5n | 11an | 2n |
| **Montenegro** | **22 digits alpha numeric number** | ME (2a) | 2n | 3n |  | 13n | 2n |
| **Netherlands** | **18 digits alpha numeric number** | NL (2a) | 2n | 4a | 10n |  |  |
| **Norway** | **15 digits alpha numeric number** | NO (2a) | 2n | 4n | 6n | 1n |  |
| **Pakistan** | **24 digits alpha numeric number** | PK (2a) | 2n | 4a |  | 16an |  |
| **Palestine** | **29 digits alpha numeric number** | PS (2a) | 2n | 4a |  | 21an |  |
| **Poland** | **28 digits alpha numeric number** | PL (2a) | 2n | 4n | 4n | 16an |  |
| **Portugal** | **25 digits alpha numeric number** | PT (2a) | 2n | 4n | 4n | 11n | 2n |
| **Romania** | **24 digits alpha numeric number** | RO (2a) | 2n | 4a |  | 16an |  |
| **Qatar** | **29 digits alpha numeric number** | QA (2a) | 2n | 4a |  | 21an |  |
| **San Marino** | **27 digits alpha numeric number** | SM (2a) | 2n | 1a+5n | 5n | 12an |  |
| **Sandi Arabia** | **24 digits alpha numeric number** | SA (2a) | 2n | 2n |  | 18an |  |
| **Serbia** | **22 digits alpha numeric number** | RS (2a) | 2n | 3n |  | 13n | 2n |
| **Slovak R.** | **24 digits alpha numeric number** | SK (2a) | 2n | 4n | 6n | 10n |  |
| **Slovenia** | **19 digits alpha numeric number** | SI (2a) | 2n | 5n |  | 8n | 2n |
| **Spain** | **24 digits alpha numeric number** | ES (2a) | 2n | 4n | 4n+2n | 10n |  |
| **Sweden** | **24 digits alpha numeric number** | SE (2a) | 2n | 3n |  | 16n | 1n |
| **Switzerland** | **21 digits alpha numeric number** | CH (2a) | 2n | 5n |  | 12an |  |
| **Timor-Leste** | **23 digits alpha numeric number** | TL (2a) | 2n | 3n |  | 14n | 2n |
| **Tunisia** | **24 digits alpha numeric number** | TN (2a) | 2n | 2n | 3n | 13n | 2n |
| **Turkey** | **26 digits alpha numeric number** | TR (2a) | 2n | 5n+1n |  | 16an |  |
| **UAE** | **23 digits alpha numeric number** | AE (2a) | 2n | 3n |  | 16n |  |
| **U.K.** | **22 digits alpha numeric number** | GB (2a) | 2n | 4a | 6n | 8n |  |
| **B. Virgin Is** | **24 digits alpha numeric number** | VG (2a) | 2n | 4a |  | 16an |  |
|  |  |  |  |  |  |  |  |

**#3 TYPE OF ACCOUNT (necessary if you wish to receive US dollar payments into an account in USA)**

* Accounts at banks in the USA. If your bank is a member of ACH network, the full amount will be credited into your bank account without a deduction of bank charges.
* Please obtain the ABA routing number of your bank. The ABA routing number may be obtained from your personal cheque. It is the first nine-digit number at the bottom left corner of your personal cheque. You may wish to send us a copy of your voided cheque for verification of the ABA routing number.
* Accounts at non-bank financial institutions in the USA A few staff members have asked us to transfer payments into their accounts at non-bank financial institutions such as investment firms or brokerage houses. The United Nations may make payments to non-bank financial institutions. It is the responsibility of a staff member to provide complete and unambiguous payment instructions. Please note that there are two types of payments: ACH payments (direct deposits) and wire transfers. Some non-bank institutions may have different ABA routing numbers for ACH and wire transfers. Please obtain complete payment instructions from your financial institution.

For purpose of processing direct deposits (ACH payments), bank accounts in the USA are classified either as checking or savings. If you wish to receive your DSA payments to an account in the USA, please find out from your financial institution the type of your account for purpose of receiving direct deposits (ACH payments).

**#4 ROUTING INSTRUCTIONS (if you wish to receive US dollar payments into an account outside USA)**

The United Nations will make cross-border payments to send US dollar payments into your bank accounts outside of USA. Providing us complete and unambiguous payment routing information will help us to make your payments on time with minimum bank charges. While this information is not a requirement to complete the form, we recommend that you supply this information after obtaining guidance from your bank. It may be helpful for your banker to note that the United Nations makes US dollar payments from JP Morgan Chase Bank, New York. Please find out from your bank the name of the correspondent bank of your bank in the USA. The routing instruction should be as specific as possible to minimize fees.