**Form OAG 01**

**UNITED REPUBLIC OF TANZANIA**

**THE OFFICE OF THE ATTORNEY GENERAL**

**OAG-MIS NECCESARY INFORMATION**

**Names ……………….……………………………………………..**

**Institution…………………………………………………..………**

**E-mail………………………………………………………………..**

**Phone Number……………………………………………………..**

**Place ……………………………………………………………**

**Employment detail**

|  |  |  |  |
| --- | --- | --- | --- |
| **Detail** | **Date of hire** | **Recategorization** | **Date of Recategorization** |
|  |  |  |  |

**Education**

|  |  |  |  |
| --- | --- | --- | --- |
| **Program Name** | **Awarding body** | **Certificate type** | **Year of Award** |
|  |  |  |  |

**Working experience**

|  |  |  |  |
| --- | --- | --- | --- |
| **Institution** | **Position** | **Duration** | **Date** |
|  |  |  |  |

**Board Membership / Committees**

|  |  |  |  |
| --- | --- | --- | --- |
|  **Board/ committee** | **Name** | **Role** | **Duration** |
|  |  |  |  |

**Competency Area / Trainings / Handled cases**

|  |  |  |  |
| --- | --- | --- | --- |
| **Title** | **Institution**  | **Award** | **Year** |
|  |  |  |  |

**Legal Research**

|  |  |  |  |
| --- | --- | --- | --- |
| **Tittle** | **Research area** | **Author** | **Publisher** |
|  |  |  |  |