



# Pre-arrival Information Package

for new OSCE  
mission members



# Welcome!

Dear Mission Member,

Greetings and welcome to the OSCE!

We are pleased that you have decided to join the OSCE, the largest regional security organization in the world with 57 participating States from Europe, Central Asia and North America.

Before commencing your new assignment, you are required to attend the General Orientation (GO) Programme in Vienna. The GO Programme is a mandatory programme aimed at introducing new staff/mission members to their working environment in the Organization. It provides a common platform to address a wide range of issues, incorporating organizational values and activities, priorities and objectives, management principles and best practices. It also provides an opportunity for all incoming staff/mission members to become familiar with the resources that the Organization places at their disposal.

This OSCE pre-arrival information package aims to assist you to prepare the necessary documentation that you will require for your arrival in Vienna, prior to deployment to the mission.

Please read all information carefully prior to your arrival in Vienna. If you need further information regarding any of the content, please contact us. Contact details for both the Learning & Development staff responsible for the GO Programme and the Personnel Assistants responsible for your mission can be found on page 12.

We look forward to meeting you at the General Orientation Programme.

Sincerely,

*Department of Human Resources*

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## 1. The General Orientation Programme in Vienna

### Dates of the GO Programme

The GO Programme is organized in Vienna by the Learning & Development Unit of the OSCE Secretariat. The programme commences on a Monday and lasts five working days. The programme is usually offered at an interval of seven weeks, this year it will be offered eight times.

### GO Programme dates from January to December 2015

Course No.	Days 1-5 <i>Core Module</i>
1	19 – 23 January 2015
2	02 – 06 March 2015
3	20 – 24 April 2015
4	15 – 19 June 2015
5	27 – 31 July 2015
6	07 – 11 September 2015
7	19 – 23 October 2015
8	07 – 11 December 2015
	<b><i>Function-Specific Briefings (tailored to individual needs) are embedded in the programme and take place on the afternoon of Day 4 and the morning of Day 5</i></b>

#### **Please note:**

The Orientation Programme consists of a **core** training module and **function-specific** briefings which you will attend on the afternoon of Day 4 and the morning of Day 5. These will be tailored to address your specific needs, function and level of responsibility. Any specific individual briefing needs should be communicated to the Learning & Development Unit prior to your arrival via your respective Personnel Administrator.

An overview of the main briefings and their time frames can be found in the outline on the next page (further details will be distributed to the respective participants during the course).

Attendance of the five-day programme is mandatory.

## Programme Outline

The GO Programme addresses the different needs of individuals joining the Organization in a number of sessions, covering the following range of issues:

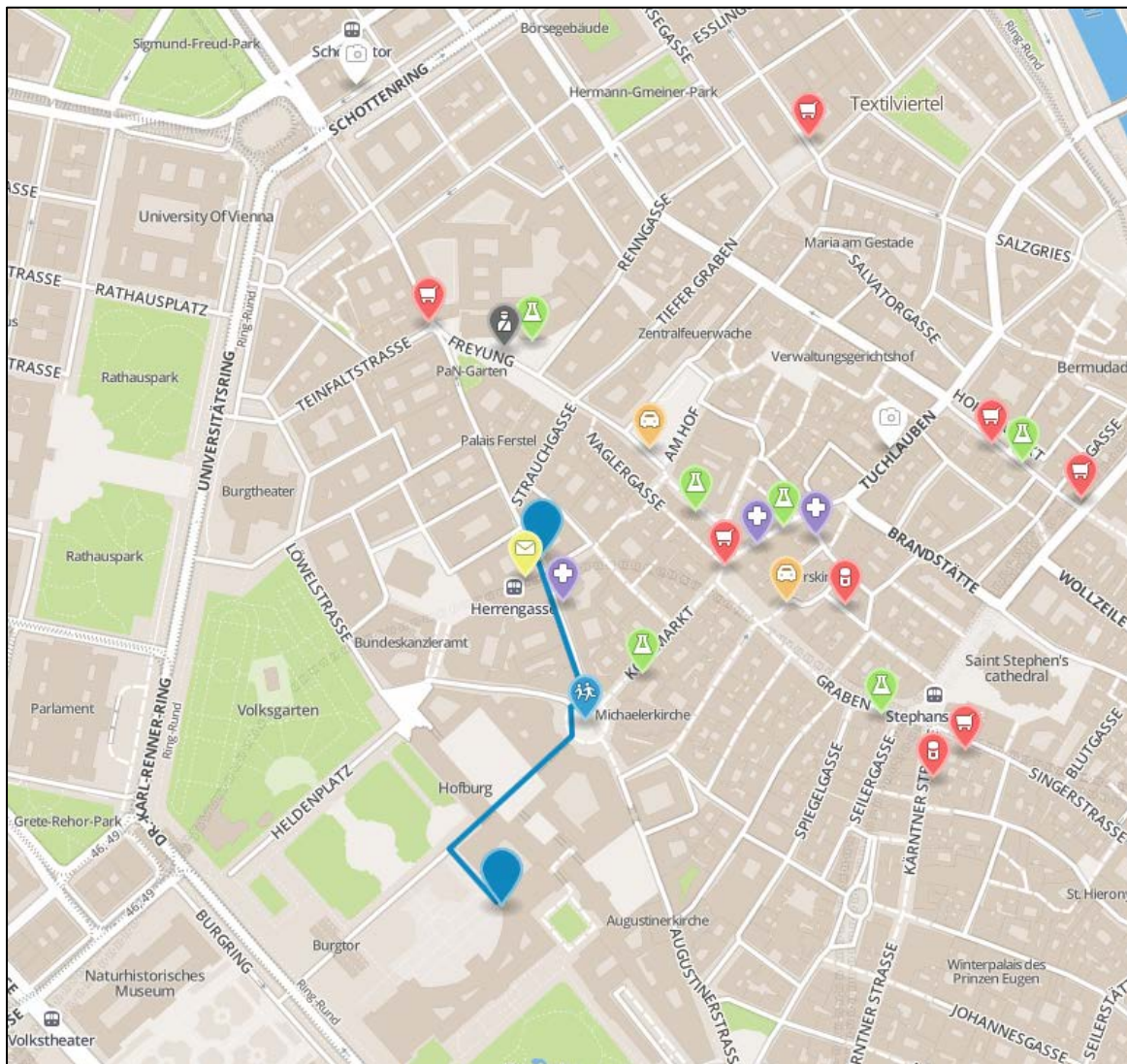
- Introduction to the OSCE;
- OSCE decision-making bodies and the decision-making process;
- OSCE management principles;
- Effective staff management in a multicultural environment;
- Gender issues and human trafficking; and
- Security and well-being.

### PROGRAMME OUTLINE

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>Morning Session</b>  <b>09:00 – approx. 13:00</b>	Administrative In-processing (for Seconded Mission Members)  Welcome  Priorities of CIO	1st Dimension  2nd Dimension  3rd Dimension  Transnational Threats	Project and Programme Management  Introduction to Management Principles & IRMA	Introduction to Decision Making Process  Performance Appraisal  Security  Working with the Media	Time for other required Function Specific Briefings for participants  Various group briefings
	Hosted Lunch/ Meet & Greet	Lunch Break	Lunch Break	Lunch Break	Lunch Break
<b>Afternoon Session</b>  <b>14:30 – approx. 18:00</b>	Introduction to the OSCE & its Activities  Overview of Field Activities  Break into Regional Groups	Addressing the Conflict Cycle  Gender Issues  Working in a Multicultural Environment  OSCE IT Systems & Policies, Doc.In	Staff Regulations. & Rules, Prof. Work Environment, Code of Conduct  Ethics	Function Specific Briefings as required  Such as: IRMA for Programme Managers	Current Challenges  Evaluation/ Feedback  Closing

## Training Location

The GO Programme takes place at the **Hofburg** (see map below). The Hofburg is located on Heldenplatz directly off the Ring. The OSCE entrance can be found in the right-hand corner of Heldenplatz next to the row of flags. After clearing security, please proceed to the fifth floor where you will be directed to the Bibliotheksaal.



- OSCE Secretariat and Hofburg with route
- Pharmacies
- Supermarkets and Drugstores
- Taxi Stands
- Doctors
- Post Office
- Police Station
- Passport Photo Booth (located in the underground subway station and Tuchlauben 19)

Interactive map:

<https://a.tiles.mapbox.com/v3/clasetzky.i3op4h8c/page.html?secure=1#16/48.2103/16.3703>

## Transport from/to the Vienna airport

Airport webpage: <http://www.viennaairport.com/>

Every Staff/Mission Member on duty travel is entitled to EUR 30 Terminal Allowance for the trip from the airport to central Vienna. An additional EUR 30 Terminal Allowance is applicable for the return trip to the airport at the end of the General Orientation Programme. It has to be claimed back by the Staff/Mission Member in the duty station/mission.

Trains from the city centre to the airport leave from the Station Wien-Mitte/Landstrasse which you can easily reach through the subway lines U3 and U4.

### **City Airport Train (CAT):**

Duration: 16 min.

Price: Online purchase 11 Euros single / 17 Euros return  
([http://www.cityairporttrain.com/Infos/Tarifubersicht-\(1\).aspx](http://www.cityairporttrain.com/Infos/Tarifubersicht-(1).aspx))

On Board ticket purchase 13 Euros single / 19 Euros return

#### **Times:**

Wien Mitte to Airport

Monday to Sunday	first train	last train
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Departs Wien Mitte:

6/36 minutes past each hour	05.36	23.06
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Airport to Wien Mitte

Monday to Sunday	first train	last train
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Departs Airport:

6/36 minutes past each hour	06.06	23.36
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### **City Train Nr. S7:**

Duration: approx. 25 min.

Price: 4,10 Euros single / 8,20 Euros return (including travel on Vienna public transport)

#### **Times:**

Wien Mitte to Airport

Monday to Friday	first train	last train
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Departs Wien Mitte:

then approx. every 25 minutes	04.30	23.45
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Airport to Wien Mitte

Monday to Friday	first train	last train
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Departs Airport:

then approx. every 25 minutes	04.53 (Mon-Fri)	
	05.23 (Mon-Sun)	00.17



**AirportDriver**

Can be reserved online - <http://www.airportdriver.at/en/booking-online> or on the phone one day before the trip. Tel: +43-1- 22 8 22. Larger groups can order a minibus.

Duration: approx. 25 min. from city centre

Price: 33 Euros flat rate per car from Vienna city, when ordered online.

**Taxi Company 40 100**

Tel.: +43-1- 40 100 (from a non-Austrian phone)

Duration: approx. 25 min.

Price: 36 Euros flat rate per car from Vienna city (larger groups can order a larger car).

**Useful websites for your stay in Vienna****Entertainment/Concerts/General Info**

<http://www.local-life.com/vienna>

<http://www.aboutvienna.org/>

<http://www.wien.gv.at/>

<http://www.tiscover.com/>

<https://www.virtualvienna.net/>

**Vienna State Opera**

<http://www.wiener-staatsoper.at/>

**Theatres in Vienna**

<http://www.bundestheater.at/Content.Node2/>

**Museums**

<http://www.khm.at/>

<http://www.albertina.at/>

<http://www.kunsthallewien.at/>

<http://www.freud-museum.at/>

<http://www.mak.at/aktuell>

<http://www.weltmuseumwien.at/>

**Night life & dining in Vienna**

<http://www.barbaro.at/>

<http://www.oe4.com/>

<http://www.sunshine.at/>

→Brochure *Wining & Dining* will be available at the GOP



## 2. Administrative In-processing

*(not for mission Members coming from missions)*

### **Necessary documentation**

Please review the following forms and ensure that you have the information required to complete them on the first day of the GO Programme. You are also kindly requested to bring the following documents with you to the course. Please do not print them, you will be provided with all the forms and complete them at the start of the GOP.

Please bring:

- 1) Valid passport
- 2) 6 (recent) passport photographs (two for the GO, four is needed for HR in the mission)
- 3) Valid driver's license
- 4) Proof of Health Insurance Coverage, in case you wish to waive the option to be insured with the OSCE Health Insurance Scheme (Please see point 3 below)

Please review the following forms and prepare the required information in order to complete these forms during the GOP (forms are available in the attached Annex for your information):

- 1) Designation of Beneficiaries Form
- 2) Notification in Case of Emergency/Proof of Health Insurance (Contact details of the person you want to be contacted in case of accident)
- 3) Details relating to your health insurance coverage:  
You will be automatically registered with the OSCE Group Health Insurance Scheme of Cigna International Health Services: ([www.cignahealthbenefits.com](http://www.cignahealthbenefits.com)).

All seconded mission members should have health insurance coverage. You should provide the OSCE with evidence that you already have a world-wide health insurance covering war-risk areas. Otherwise, you will be enrolled in Cigna Health Insurance Scheme. You may enrol your family members too. The monthly premiums (EUR 111.34 for adults and EUR 54.01 per dependent child) shall be deducted from your Board and Lodging Allowance.

Upon initial appointment, seconded fixed-term mission members may also opt to participate in the medical insurance scheme coverage under the more comprehensive "Category 1", in case you agree to pay full premium. The monthly fee for Cigna Category 1 is EUR 233.03 for adults and EUR 115.34 per dependent child. More details are available upon request.

- 4) Cigna Insurance Dependent Enrolment Form  
To be completed only in case you wish to enrol your dependents
- 5) Payment Methods Form  
(Bank details - IBAN, SWIFT/BIC number)
- 6) Inventory of Personal Property Form  
(List of personal items that you are taking to the mission area; in case of loss or damage, only items listed in the form shall be considered for compensation)
- 7) Travel Information Form  
(Please indicate the weight and measurements of your luggage and whether or not you need a temporary accommodation in the mission area upon arrival)

### **3. Additional Information**

#### **OSCE Activities**

You are encouraged to familiarize yourself with recent activities of OSCE field operations and institutions which may be relevant for your future assignment. This information can be found at [www.osce.org](http://www.osce.org)

## Vaccinations

Please bear in mind that it is strongly recommended to obtain certain vaccinations before going on your new assignment. The Institute of Tropical Medicine in Vienna recommends the following vaccinations:

Area	Hepatitis A	Hepatitis B	Diphtheria / Tetanus	Polio	Typhoid	Malaria (oral)
<b>Albania</b>	x	x	x	x	x	
<b>Armenia</b>	x	x	x	x	x	
<b>Azerbaijan</b>	x	x	x	x	x	
<b>Bosnia Herzegovina</b>	x	x	x	x	x	
<b>Croatia</b>	x	x	x	x	x	
<b>Serbia and Montenegro</b>	x	x	x	x		
<b>Georgia</b>	x	x	x	x	x	
<b>Kazakhstan</b>	x	x	x	x	x	
<b>Kosovo</b>	x	x	x	x	x	
<b>Kyrgyz Republic</b>	x	x	x	x	x	
<b>Moldova</b>	x	x	x	x		
<b>Tajikistan</b>	x	x	x	x	x	x*
<b>The former Yugoslav Republic of Macedonia</b>	x	x	x	x	x	
<b>Turkmenistan</b>	x	x	x	x	x	
<b>Ukraine</b>	x	x	x	x	x	
<b>Uzbekistan</b>	x	x	x	x	x	

\* only from June to September in rural areas

Parenteral typhoid vaccine is preferable, as it is a single-shot vaccine. Malaria medication should be purchased prior to deployment so that it is available in case of need. Vaccination against rabies should also be considered, especially by persons who will be working in places where medical support is minimal (dog bites can lead to rabies).

There is a high risk to Tick Borne Encephalitis (TBE) in almost all OSCE Mission areas. Travellers should have a TBE vaccination not more than 3 years before entering the country.

The Institute of Tropical Medicine recommends that all other vaccinations be completed at least three weeks prior to arrival in the mission.

Missions do not have supplies of medicines and in most mission areas it is very difficult to obtain even rudimentary medical supplies. All mission members must bring their own prophylactic and other medication.

#### [4. Contact Details](#)

If you have any questions regarding the duration and content of the **General Orientation Programme**, please contact:

Ms. Lena Moll

E-mail: [lena.moll@osce.org](mailto:lena.moll@osce.org)

Office: +43-1-51436-6239

For details regarding **personnel and employment issues** or **your travel/accommodation arrangements**, please contact the following persons depending on the respective field operation of your deployment:

For **Kyrgyzstan, Project Co-ordinator in Ukraine, Bosnia and Herzegovina, Skopje**, please contact:

Mr. Predrag Velic

E-mail: [predrag.velic@osce.org](mailto:predrag.velic@osce.org)

Office: +43-1-51436-6174

For **Kosovo, Moldova, Serbia and Uzbekistan**, please contact:

Ms. Dominique Le Dantec

E-mail: [dominique.le-dantec@osce.org](mailto:dominique.le-dantec@osce.org)

Office: +43-1-51436-6731

For **Armenia, Tajikistan, Albania, Montenegro**, please contact:

Ms Zaklina Filipovic

E-mail: [zaklina.filipovic@osce.org](mailto:zaklina.filipovic@osce.org)

Office: +43-1-51436-6173

For **Ashgabat** and **Baku**, please contact:

Ms Pavlina Kovaceva

E-mail: [pavlina.kovaceva@osce.org](mailto:pavlina.kovaceva@osce.org)

Office: +43-1-51436-6293

For **Astana** and **Personal Representative of the CiO on the Conflict dealt with by Minsk Conference**, please contact:

Ms Wisam Hammal

E-mail: [wisam.hammal@osce.org](mailto:wisam.hammal@osce.org)

Office: +43-1-51436-625

**JUST FOR YOUR INFORMATION – NO NEED TO PRINT ANY OF THESE FORMS!  
YOU WILL RECEIVE THEM AT THE GO TO FILL IN.**



**Organization for Security and Co-operation in Europe**

**DESIGNATION OF BENEFICIARIES FORM  
for OSCE Staff Members**

(PLEASE USE A BLACK PEN AND WRITE CLEARLY IN CAPITALS. IN RESPECTING YOUR WILL, THE OSCE SHALL, IN NO CASE, BE LIABLE TOWARDS ANY OF YOUR HEIRS WHO MIGHT CONSIDER HIM/HERSELF AS HARMED BY YOUR WILL.)

I, \_\_\_\_\_, date of birth (Day) \_\_\_\_\_ (Mth.) \_\_\_\_\_ (Yr.) \_\_\_\_\_, hereby designate in event of my death the persons listed below (up to 4 beneficiaries) to receive all monies due to me from the OSCE, OSCE Provident Fund with Generali Worldwide Insurance Co. Ltd., Accident/Disability and Life Insurance with Vanbreda International contracted by the OSCE, and instruct the insurers to make payment as follows:

<b>1. Beneficiary</b>	<b>Date of Birth</b>			<b>Street</b>		<b>Share %</b>
<b>Surname</b>	Day	Mth	Yr.	<b>Postcode</b>	<b>City</b>	
<b>Name</b>				<b>Country</b>		
<b>2. Beneficiary</b>	<b>Date of Birth</b>			<b>Street</b>		<b>Share %</b>
<b>Surname</b>	Day	Mth	Yr.	<b>Postcode</b>	<b>City</b>	
<b>Name</b>				<b>Country</b>		
<b>3. Beneficiary</b>	<b>Date of Birth</b>			<b>Street</b>		<b>Share %</b>
<b>Surname</b>	Day	Mth	Yr.	<b>Postcode</b>	<b>City</b>	
<b>Name</b>				<b>Country</b>		
<b>4. Beneficiary</b>	<b>Date of Birth</b>			<b>Street</b>		<b>Share %</b>
<b>Surname</b>	Day	Mth	Yr.	<b>Postcode</b>	<b>City</b>	
<b>Name</b>				<b>Country</b>		

Should a designated beneficiary not survive me, the share of that beneficiary shall be paid in equal parts to the other beneficiaries, unless I determine otherwise.

Should none of the above beneficiaries survive me, all monies shall be distributed to the relevant beneficiaries according to the law applicable to my estate.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OSCE OFFICE USE ONLY:**

Amounts due from OSCE	EURO	
Amounts due from the OSCE Provident Fund	EURO	
Amounts due from Vanbreda International for service incurred death	EURO	
<b>TOTAL</b>	EURO	

Prepared by:..... Approved by:.....

## **Notification in Case of Emergency**

I, \_\_\_\_\_  
(first name) (family name)

request that the following person be contacted in case of accident:

	<i>First Contact Person:</i>	<i>Second Contact Person</i>
<b>Name:</b>		
<b>Relationship:</b>		
<b>Country:</b>		
<b>Daytime tel. No:</b>		
<b>Evening tel. No:</b>		
<b>Mobile No:</b>		
<b>e-mail:</b>		

**Please note:** The information provided will *ONLY* be used in the case of emergency. It is in your best interest to provide enough access numbers to ensure the contact person(s) listed is reachable 24 hours a day.

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## **Proof of Health Insurance Coverage**

**I hereby certify that I already have the following health insurance coverage:**

<b>Insurance provider</b>	<b>Policy Number</b>	<b>Mailing Address</b>	<b>Telephone Number</b>

I acknowledge that in the event of a false or incomplete statement, I will have to bear all medical and/or hospitalisation expenses. I unconditionally waive all claims against the OSCE and its employees for expenses that I may incur due to the existence of inappropriate coverage.

I understand that if I do not provide evidence of coverage, I will automatically be enrolled in the Vanbreda International scheme.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**Organization for Security and Co-operation in Europe**  
**Payment Methods**

Last Name:	First Name:
Duty Station:	Date of birth:

Effective date for the below allotment instruction: \_\_\_\_\_

**Payment Split:** ☐ **NO** (complete section 1 only) ☐ **YES\*\*** (complete both sections 1 and 2)

**1. Primary Allotment** (EURO only - **MANDATORY**):

Indicate a Fixed Amount \_\_\_\_\_ EUR **or** Percentage of Payment: \_\_\_\_\_%

Indicate either ☐ **Bank Transfer** **or** ☐ **Cash Payment** (for mission members or short-term staff only)

**Banking details:**

Name of Account Holder:
Account Number / IBAN:
Account Currency:
Name of the Bank:
Bank's Address, City, Country, Telephone:
Bank Code / BLZ / Sort Code / Routing Code:
SWIFT / BIC:
Correspondent / Intermediary Bank:
Other Details Considered Necessary:

**2. Secondary Allotment** (EURO only \*\*):

Percentage of the remaining Payment: \_\_\_\_\_ %

Indicate either ☐ **Bank Transfer** **or** ☐ **Cash Payment** (for mission members or short-term staff only)

**Banking details:**

Name of Account Holder:
Account Number / IBAN:
Account Currency:
Name of the Bank:
Bank's Address, City, Country, Telephone:
Bank Code / BLZ / Sort Code / Routing Code:
SWIFT / BIC:
Correspondent / Intermediary Bank:
Other Details Considered Necessary:

Date: \_\_\_\_\_

Employee's Signature: \_\_\_\_\_

**To be completed by HR:**

**Employee Number:** \_\_\_\_\_ **Contractual Status:** **Contracted** ☐ **Seconded** ☐ **Seconded under MOU- Seconding Government** ☐

**\*\* (ref. Rule 5.02.4)** In the case that a fixed amount is used for the primary allotment, the balance must be 100% for the secondary allotment.

In the case that a percentage is used for the primary allotment, the secondary allotment must the remainder required to equal 100%. Same procedure applies for seconded mission members paid by their Governments through the OSCE



**Organization for Security and Co-operation in Europe**  
**Cigna Insurance Dependent\* Enrolment Form**

Mission \_\_\_\_\_

Name of Mission Member \_\_\_\_\_  
(family name) (first name)

Seconded ☐ Contracted ☐

**I wish to enrol my dependents in Vanbreda group health insurance scheme. I take note that enrolment in the scheme of my below mentioned dependents is subject to Van Breda's acceptance on the basis of the attached Declaration(s) of State of Health.**

Dependents:

Family name:	First name:	Relation	Date of birth:	Sex: M / F

I hereby attach:

- ☐ Marriage certificate
- ☐ Birth certificate(s) (for children only)
- ☐ School attendance certificate (in case of children older than 18)
- ☐ Declaration(s) of State of Health (for each dependent)

**I am aware of the amount of Vanbreda Insurance premium(s) and hereby authorise the deduction of the corresponding amount from my Board and Lodging Allowance each month, effective from the first day of the month which follows the date of Vanbreda confirmation of registration receipt.**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

\* Dependent – spouse and/or children (unmarried children up to age of 25 provided they are in full time school attendance and have no regular income; for handicapped children the age limit does not apply).

***For Personnel/Admin Office use only (in case of enrolment of dependents while being in the Mission)***  
***I hereby certify that all required documents were submitted to and verified by the Personnel/Administrative Office. Declaration(s) of State of Health is (are) attached.***

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Signature)



## Inventory of Personal Property

This inventory should be submitted to the Personnel/Administrative Officer of your mission within 2 weeks and periodically updated.

Only loss of or damage to items listed in the inventory shall be subject to consideration for compensation.

Name:

Nationality:

Passport No:

Mission:

A Quantity of item or article	B Description of item, including brand name and model number	C Original cost per item/article (indicate currency)	D Total cost of articles (col. A x C)	E Place/Date of purchase or acquisition	F Original Receipt attached (√) or available (*)

I declare that the items listed below are my personal property.

Date:

Signature of the Mission member:

Permanent address

Name: \_\_\_\_\_

Mission: \_\_\_\_\_

## Travel Information

### 1. Luggage details:

*(To inform the Airline in case your ticket to the mission has been purchased by the OSCE)*

- Weight of my entire accompanied baggage is \_\_\_\_\_ kg.  
*(Hand luggage not included)*

- Number of pieces: \_\_\_\_\_

- Measurement of pieces  
*(length, height, width)*

1. \_\_\_\_\_ x \_\_\_\_\_ x \_\_\_\_\_

2. \_\_\_\_\_ x \_\_\_\_\_ x \_\_\_\_\_

3. \_\_\_\_\_ x \_\_\_\_\_ x \_\_\_\_\_

4. \_\_\_\_\_ x \_\_\_\_\_ x \_\_\_\_\_

### 2. Accommodation upon arrival in the Mission :

☐ I need accommodation to be arranged by the Mission

☐ I do not need accommodation to be arranged by the Mission

### 3. Transport arrangement upon arrival in the Mission:

☐ I need a driver to come and pick me up at the airport

☐ I do not need a driver to come and pick me up at the airport

*(If you prefer to have your own arrangement, please indicate where you may be reachable upon arrival)*

.....  
.....  
.....