# BHUTAN TRUST FUND FOR ENVIRONMENTAL CONSERVATION

# JOB APPLICATION FORM

**VACANCY APPLIED FOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **PERSONAL DETAILS**
2. **Name**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. **Sex**: Male [ ] / Female [ ]
4. **Date of Birth**: date/ month/year\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. **Citizenship ID No**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. **Email address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. **Contact Telephone No**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. **Permanent Address**:

Village: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Block/Gewog:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thram No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dzongkhag: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

House No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **EDUCATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of School/ College | Place | Degree obtained | Year attended | |
| From  (**dd/mm/yy**) | To  (**dd/mm/yy**) |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

1. **WORK EXPERIENCE** (please list your current/recent employer first)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of  Company/Office | Place | Designation | Year | |
| From  (**dd/mm/yy**) | To  (**dd/mm/yy**) |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

1. **REFEREES** (at least two professional – non-family related)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| CURRENT EMPLOYER | | | | |
|  | **Name & Designation** | **Organization** | **Contact No.** | **Email** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| LAST EMPLOYER | | | | |
|  | **Name & Designation** | **Organization** | **Contact No.** | **Email** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |

I hereby confirm that the above facts provided in the application are true to my knowledge and belief. I also declare that I am mentally sound and physically fit.

Affix Legal Stamp

(Mandatory)

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

**\*\***Non-submission of any of the **Mandatory Documents**, as specified in **ToR**, may lead to the **rejection** of the application without citing any reason. **\*\***