



SAARC Development Fund Secretariat
3rd Floor BDBL Building
Norzin Lam
Thimpu 11001
Bhutan

Application Form

Position applied for:

1. Name (As per Certificates)

2. Present Address

3. Mailing Address (If different from the present address)

4. Permanent Address

5. Email Id:Cell No. _____

6. (a) Place of Birth

(b) Date of Birth

Day Month Year

7. a) Citizenship at Birth (b) Citizenship of any country other than the country of birth

8. Gender (Please check one):

Male

Female

9. Do you have any dependents? Yes No

In case, answer is “Yes”, please provide the following information:

Name	Date of Birth	Relationship

10. Have you ever taken up legal residence status in any country other than that of your nationality?

Yes No

In case, answer is “Yes”, which country:

11. Have you ever taken any legal steps towards changing your present nationality?

Yes No

If answer is “Yes”, please provide details:

12. Academic Qualifications (Please furnish details):

Name and Place of Institution	Degree/Diploma	Year	Major Subject(s)	Remarks/Grade

13. State your professional competence in the related field and further provide related achievements to illustrate the competencies.

14. Language Proficiency (Please check appropriate columns)

Language	Read			Write			Speak		
	Excellent	Good	Fair	Excellent	Good	Fair	Excellent	Good	Fair

15. Professional Experience

A. Experience related to the Job Description

Name & address of the organization	Position	Period	Nature of work

B. Experience in International/Multilateral/Regional Organisation (if any)

Name & address of the organization	Position	Period	Nature of work

16. Member of professional institution(s), if any

17. Author of publications in the relevant field (Please attach or quote reference(s) of Journal(s), Book(s), etc.)

18. Employment Record (Starting with your present or most recent position. List every employment position during the last fifteen years and any significant experience not included in that period which, you believe, may be helpful in evaluating your record. Use a separate block for each position. Use additional sheets of paper, if required.):

A. Exact title of position	Period	
	From	To

Name of Supervisor	Number and kind of employees supervised by you	Duty Station

Name and Address of Employer

Description of your work

Reason(s) for leaving, if applicable.

B. Exact title of position	Period	
	From	To

Name of Supervisor	Number and kind of employees supervised by you	Duty Station

Name and Address of Employer

Description of your work

Reason(s) for leaving, if applicable.

C. Exact title of position	Period	
	From	To

Name of Supervisor	Number and kind of employees supervised by you	Duty Station

Name and Address of Employer

Description of your work

Reason(s) for leaving, if applicable.

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19. Do you have you any objection to our making inquiries with your present employer?

Yes

No

20. References (List three persons not related to you and who are familiar with your character and qualifications.)

Full Name	Postal & email addresses	Occupation

21. Legal Convictions (include all convictions other than those for minor violations of road traffic rules and regulations).

Charge	Date	Where tried	Conviction

22. Please state information regarding any residence or prolonged travel abroad, providing dates, areas, purposes, etc.

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I certify that the statements made by me in this Application form are true, complete and correct to the best of my knowledge and belief. I understand that any false statement or any required information withheld in this document may provide grounds for the withdrawal of any offer of appointment or dismissal, even if an appointment has already been made and accepted.

Date: _____ <i>dd</i> <i>month</i> <i>yyyy</i>	Signature: _____
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INSTRUCTIONS: Please fill up this Application Form completely and clearly either handwritten or typed and send scan copies through email to the Officer-In-Charge of SDF, recruitment@sdfsec.org along with your CV, proof of education and work experience.

If required, additional pages may be used. Be sure to post your signature and date on this Form.

