



འབྲུག་གི་ཚོང་པ་ལྷན་ཁག་གི་ལྷན་ཚོགས་ལྷན་ཁག།
Bhutan Chamber of Commerce & Industry

HUMAN RESOURCE DEVELOPMENT SECTION

BCCI-TRAINING APPLICATION FORM (Ex-Country) - I

1. Details of the Candidate:

- a) Name :
- b) Contact Address & Number :
- c) Gender :
- d) Designation :
- e) Name & Address of Employing agency :
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- f) Qualification :
- g) Citizenship ID card number :
- h) Permanent Address :
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- i) Date of joining service/business :
- j) Present Job Description :
1.
2.
3.
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- k) BCCI Registered Membership # :

2. Details of Training/Programme applying for:

- a) Title/Field of Training/Programme :
- b) Funding Agency :
- c) Duration : From to
- d) Name of the Institute and Location :

I hereby certify that the above information is correct and true to the best of my knowledge. I understand that I am liable to be subjected to disciplinary actions by appropriate authorities incase the above information is incomplete and incorrect.

Signature of the Candidate

3. Recommendation of the Organization/Agency/Company:

a) Give reasons for nominating the particular candidate

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b) Description of the use of this training to the organization/Agency/Company

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I hereby certify that the above nominee is a regular employee of this Organization/Agency/Company. The nomination has been done in the most transparent way for the best interest of this Organization/Agency/Company. I also certify that the nominee is the most suitable person in terms of qualification and the relevance of this training to the present responsibilities of the nominee. The nominee fulfills all criteria laid down in the training Rules and Regulations and does not abrogate any clause of the Rules and Regulations and the Law of the Kingdom.

Place :

Date :

Signature
Name & Seal of
the Head of the Organization

Attachments:

- Security Clearance certificate for Training (Original)
 - Audit Clearance
 - ID card copy
 - No Objection Certificate and Nomination letter from the respective agencies
 - Valid copy of the trade/business license
 - Academic certificates (Class X and above)
 - As required by the funding agency and Institution *
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(For BCCI HRD Purpose only)

Date of receipt of the form:

Received by: Signature:

Note: Mark (X) against missing attachments.