



**SAARC Development Fund Secretariat  
3<sup>rd</sup> Floor, BDFC Building  
Thimphu : Bhutan**

*Form SDF – 5.1*

**Preliminary Job Application Form**  
(Please use block letters)

**PERSONAL INFORMATION:**

Use Additional Pages if required  
Please write YES or NO in the appropriate box

1. Name : \_\_\_\_\_
2. Mother's Name: \_\_\_\_\_  
Father's Name: \_\_\_\_\_
3. Present Address: \_\_\_\_\_
4. Permanent Address: \_\_\_\_\_
5. Contact Phone No(s) \_\_\_\_\_ e-mail: \_\_\_\_\_
6. Sex: \_\_\_\_ Date of Birth: \_\_\_\_ Day \_\_\_\_ Month \_\_\_\_ Year. Place of Birth: \_\_\_\_  
Blood Group: \_\_\_\_\_
7. Religion: \_\_\_\_\_
8. **Nationality:** please specify \_\_\_\_\_
9. **Marital Status:**  
 Unmarried  Married - Date: \_\_\_\_\_  Divorced - Date: \_\_\_\_\_  
 Separated – Date: \_\_\_\_\_  
Spouse Name: \_\_\_\_\_ Occupation: \_\_\_\_\_ No. of Children: \_\_\_\_\_



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**APPLICATION INFORMATION**

11. Position Applied for: \_\_\_\_\_ Dept: \_\_\_\_\_

Application submission date: \_\_\_\_\_

12. Source:  Newspaper  Internal Office Memo  From Web-site   
Reliable sources

13. If you are selected, how many days do you require to join after getting the final confirmation from SDF? \_\_\_\_\_ Days

14. Do you have any relatives (Close or Distant)\* in SDF? Yes/No:

If Yes, please fill up the following information:

Name: \_\_\_\_\_ Empl #: \_\_\_\_\_ Designation: \_\_\_\_\_

Project/Dept.: \_\_\_\_\_ Office: \_\_\_\_\_

Relation \_\_\_\_\_

\*Parents, spouse, children, brother, sister, in-laws, cousins, uncle, aunts, nieces, and nephews.

**15. ACADEMIC & PROFESSIONAL QUALIFICATION**

**Institutional Education:**

Highest Education Degree Achieved: \_\_\_\_\_

Education	Passing year	Institution /University	Class/Division	Country	Subject

Extra Curricular Activities:

\_\_\_\_\_



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**16. WORK EXPERIENCE:**

Information about the Organization/ Company From Current to Previous	Position you served	Service period		Major Responsibilities
		From	To	
Organization Name:  Name of Supervisor and Designation: Current Salary: Reason for Separation: Full Address with Phone:				
Organization Name:  Name of Supervisor and Designation:  Last Drawn Salary: Reason for Separation: Full Address with Phone:				

**Reference – 1 (non-relative):**

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

Position: \_\_\_\_\_

Full Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

**Reference – 2 (non-relative):**

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

Position: \_\_\_\_\_

Full Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

I certify that the above information is true, complete and correct to the best of my knowledge.

Signature of the Applicant

Date

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