

्रा पर्वेग.कैज.हेप.बीट.जब.पहूप.क्री

ROYAL INSURANCE CORPORATION OF BHUTAN LTD.



"Your partner for growth and security"

		RICB JOB A	PPLICATIO	N FORM		
1 Domaon	nal Information:			<u> </u>		
					D1 A441-	
i)	Full Name:	•••••		•••••	Please Attach Recent Photo	
ii)	Gender: M	F				
iii)	Village:		. Gewog:			
	Dzongkhag:		•••••	•••••		
iv)	Date of Birth	: Day M	Ionth	Year		
v)	CID No:	CID No:				
vi)	Post applied for	Post applied for:				
vii)	Contact No:	Contact No:				
	Email id:					
viii)	Social Media User ID (e.g.facebook/twitter/instagram/linkedIn/etc.)					
2. Acade:	mic Qualificatio	n (Please start v	with the last	institute atten	ded):	
					Marks	
Name of the Institute		Qualification	Subjects	Year of Completion	obtained	
					(Aggregate)	



ॐा। यर्चेब.भैज.केष.सीटाजस.यह्रथ.क्री

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3. Trainings Attended (If any)

Name of the Institute	Country	Field of study	Duration	Completion

4. Employment History (Please strike off if not applicable):

	Position Held	Period		Appt.	Place	Reason for
Organization		From	То	status	Served	change
Present Employ	y ment (Please	strike off	if not app	olicable)		
	·		 T	, T		<u> </u>
Past Employme	e nt (please str	ike off if n	 .ot applica	l able)		
	1	 	1		<u> </u>	T

5. Kindly attach the following documents:

S1. No	Check list	Tick
1	RICB Job Application Form	
2	Two numbers of recent passport size photographs	
3	Detailed Resume	
4	Copy of all Academic Mark sheet (Degree, Class XII & X) and course completion certificates	

CONSCIENTIFIC

न्नी यर्चेब.मैज.केष.सीटात्रस.पहूष.क्री

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5	Copy of School Leaving Certificates & Character Certificates	
6	Copy of valid Citizenship Identity Card	
7	Security Clearance Certificate (online screenshot)	
8	Copy of Medical Fitness Certificate	
9	No Objection Certificate from Employer, if presently employed	
10	Copy of RAA audit clearance (for in-service or previously employed applicant only)	

Please note that your application form and copies of relevant documents once submitted shall not be returned.

DECLARATION: I hereby declare that the information given herein is true and complete to the best of my knowledge. In the event of any detection of false or misleading information, I understand that the employer shall withdraw/terminate my application or service or take any legal action. I also undertake to abide by all Rules and Regulation of the Corporation.

I hereby also confirm that I hat terminated by any of my previous	-	y court of law nor
terminated by any of my previous	, organizations.	
Date:	Signature of the Applicant	Legal Stamp
	or office use only	

For office use only	_
Application received on	