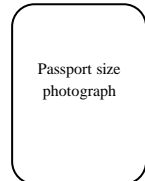


## ANNEXURE II: Application Form for Establishment of ECPF

**IMPORTANT NOTE:** False statement made knowingly and willfully in this application is punishable and shall be prosecuted in the Court of Law

### 1. Personal information:

Applicant's name:	<input type="text"/>
Gender:	Male ( <input type="checkbox"/> ) Female ( <input type="checkbox"/> )
Date of Birth:	<input type="text"/>
CID No.	<input type="text"/>
Contact No.	<input type="text"/>
Email ID:	<input type="text"/>



### 2. Residential Address

Office No:	<input type="text"/>	Residence No:	<input type="text"/>
Village:	<input type="text"/>	Gewog/Thromde:	<input type="text"/>
Dzongkhag:	<input type="text"/>		

### 3. Permanent Address

Village:	<input type="text"/>	Gewog:	<input type="text"/>
Dungkhag:	<input type="text"/>	Dzongkhag:	<input type="text"/>

### 4. Educational detail of proponent:

Name of the Course/Degree:	<input type="text"/>
Name of the Institute:	<input type="text"/>
Name of the University:	<input type="text"/>

### 5. Proposed location of ECPF:

### 6. ECPF type (please select one):

Independent:  FDI:  Collaboration:

### 7. Declaration

I hereby declare that the information furnished herewith is true to the best of my knowledge. In the event of detection of false or misleading information, I confer herewith the absolute authority to DAHE to take any action deemed appropriate. I also undertake to uphold the laws of the Kingdom of Bhutan and observe all accepted norms, codes and ethics of business.

I hereby confirm and acknowledge that I have received information on the procedure for establishment of ECPF from the QAAD officials.



Dated signature of the applicant

I hereby confirm that the information furnished by the aforementioned person is true to the best of my knowledge. In the event DAHE finds declaration of false information, I, as the guarantor hereby undertake to be liable in place of the person for any administrative actions and legal actions in the Court of Law in accordance with the laws of the Country.



Dated signature of the guarantor

Name of Guarantor: \_\_\_\_\_

CID No: \_\_\_\_\_ (*attach copy*).

Relation with the applicant: \_\_\_\_\_

Occupation: \_\_\_\_\_ Agency (*if applicable*):

Permanent Address:

Village: \_\_\_\_\_ Gewog: \_\_\_\_\_ Dzongkhag: \_\_\_\_\_

Email address: \_\_\_\_\_ Contact No.: \_\_\_\_\_

***For official use only:***

**Checklist of documents received from proponent (TICK):**

1. CV
2. CID copy


- 3. Family tree
- 4. Security clearance
- 5. CID copy of the Guarantor
- 6. CV and relevant certificates of the counsellor
- 7. Proposal (*Annexure III*)
- 8. Application (**Annexure IV**)


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- 1. Received along with application on: \_\_\_\_/\_\_\_\_/20\_\_\_\_
- 2. Received by: \_\_\_\_\_
- 3. Presentation made to the Committee on: \_\_\_\_/\_\_\_\_/20\_\_\_\_.
- 4. Decision of the Committee: \_\_\_\_\_.
- 5. Communicated the decision on: \_\_\_\_/\_\_\_\_/20\_\_\_\_
- 6. Invited for site visit on: /\_\_\_\_/20\_\_\_\_
- 7. Visited the site on:\_\_\_\_/\_\_\_\_/20\_\_\_\_by: \_\_\_\_\_
- 8. Paid registration fee on: /\_\_\_\_/20\_\_\_\_vide Receipt No.\_\_\_\_\_
- 9. Written to ROEA on: /\_\_\_\_/20\_\_\_\_
- 10. Submitted a copy of business license on: /\_\_\_\_/20\_\_\_\_
- 11. Signed the MoU and Undertaking on:\_\_\_\_/\_\_\_\_/20\_\_\_\_