

COLLEGE OF ZORIG CHUSUM, TRASHIYANGTSE
Registration Form for New Admission

I. Personal information of the candidate:		<div style="border: 1px solid black; padding: 5px;"> Affix Recent Passport Photograph </div>										
Name of Candidate:	Gender: M <input type="checkbox"/> F <input type="checkbox"/>											
Citizenship ID Card No:	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>											
Date of Birth: Day: <input style="width: 20px; height: 20px;" type="text"/>	Month: <input style="width: 20px; height: 20px;" type="text"/>		Year: <input style="width: 20px; height: 20px;" type="text"/>									
Permanent Home Address												
Gewog.....Village.....												
Drungkhag.....Dzongkhag.....												
Contact Mobile#.....	Email ID.....											
Father's Name:		Mother's Name.....										

II. Contact address (present):

Name of Parent/Guardian: Relationship:

Agency/Company: Address:

Tel #: Mobile #: Email add:

III. Details of Academic Qualification

Name of School	Class	Index Number	Year of passing	Remarks

IV. Details of marks (Class ()) :

English	Dzongkha	History, Civics & Geography	Mathematics	Science	Economics/Computer Science/IT	SUPW (Grade)	Total

V. Select your interest of Trade:

- | | | | |
|-------------------|--------------------------|-------------------|--------------------------|
| 1. Shagzo (NC II) | <input type="checkbox"/> | | |
| 2. Lhadri (NC II) | <input type="checkbox"/> | 4. Troezo (NC II) | <input type="checkbox"/> |
| 3. Patra (NC II) | <input type="checkbox"/> | 5. Tsemzo (NC II) | <input type="checkbox"/> |

VI. Photocopy of documents required to be attached with this form:

1. Citizenship card
2. Mark Sheet (class X)/XII
3. School Leaving Certificate
4. Printed or online Valid Security Clearance Certificate
5. Medical Certificate

I hereby certify that the above information I have provided is correct to the best of my knowledge. I understand that my application for selection to a programme is liable to be rejected in the event the information I provided above is incomplete or incorrect. I also understand that my selection will be based only on my class X results. I undertake to produce the original documents as mentioned above to be produced at the time of the selection interview.

Date:

Signature of the applicant

FOR OFFICIAL USE ONLY

1. Admission No:
2. Selection:
3. Date/Month/Year:

Principal