



འབྲུག་གཞུག་རིལ་ཚོགས་ཚེའི་བཀོད་ཚོགས།
BHUTAN CRICKET COUNCIL BOARD

Member of Bhutan Olympic Committee, International Cricket Council & Asian Cricket Council

EMPLOYMENT APPLICATION FORM

1. Full Name: Nationality: Citizenship ID No.		Gender: M/F Date of Birth:/...../.....	
2. Permanent Address: House No. Gewog:		Thram No. Dzongkhag:	Village:
3. Present Address:			
4. Post Applied for:			
5. Contact No.		6. Email ID:	

Please attach the following:

1. Resume;
2. Copy of Citizenship ID;





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3. Security Clearance Certificate;
4. Copies of all relevant academic transcript;
5. Medical Fitness Certificate;
6. No Objection Certificate from the employer, if applicable.
7. Self Declaration Form SEA

Declarations:

Please read carefully and sign the statements below:

i. The information I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume, or any other material, or during interview, can justify the refusal of employment, or if employed, the termination of employment.

ii. Any offer of employment I may receive from BCCB is contingent upon my successful completion of the company’s pre-employment screening process, including BCCB receiving references it considers satisfactory.

iii. All of my present and former employers and those individuals I have listed as references may be requested to furnish information of my employment record, including a statement of the reason for the termination of my employment, work performance, abilities and other qualities pertinent to my qualifications for employment.

iv. I hereby affirm that I have not been convicted of any criminal offenses concerning sexual exploitation and abuse. Furthermore, I am committed to adhering to the Protection from Sexual Exploitation and Abuse (PSEA) Policy of Bhutan Cricket.

By the applicant:

Signature: Date: [SEP]

By Human Resource Officer

Signature: Date: [SEP]





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Self Declaration Form on Sexual Exploitation and Abuse

Name and surname:	
ID card or passport number:	
Date of birth:	
Place of birth:	
Nationality:	
Place of residence:	
Phone number:	
Email address:	

1. Have you ever been the subject of a police investigation or court proceedings, in this country or abroad, as a result of charges of sexual abuse or sexual misconduct against minors or adults that do not appear on your criminal record?	YES/NO <i>If yes, please provide additional information below.</i>
2. Have you ever been subject to sanctions (disciplinary, administrative or criminal) arising from an investigation in relation to sexual exploitation and abuse or sexual misconduct, or left employment pending investigation and refused to cooperate in such an investigation?	YES/NO <i>If yes, please provide additional information below.</i>
3. Have you ever been identified by a government department or judicial or other competent authority in this country or abroad as a risk or potential risk to children or vulnerable adults?	YES/NO <i>If yes, please provide additional information below.</i>





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4. Have you ever been or are you currently subject to disciplinary proceedings?	YES/NO <i>If yes, please provide additional information below.</i>
5. Have you left a previous job pending an investigation and refused to cooperate with such an investigation?	YES/NO <i>If yes, please provide additional information below.</i>

<i>Confirmation of statement (please check the boxes below)</i>	
<p>I agree that the information provided here will be processed for recruitment purposes and in confidentiality. I understand that a job offer may be withdrawn or termination may result if I fail to disclose timely information and if such information is subsequently communicated to the organization.</p> <p style="text-align: center;">Yes <input type="checkbox"/> No <input type="checkbox"/></p>	
<p>I agree to notify the organization within 24 hours if I am subsequently investigated by any agency or organization regarding concerns about my behavior toward children, youth or vulnerable adults.</p> <p style="text-align: center;">Yes <input type="checkbox"/> No <input type="checkbox"/></p>	





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<p>I hereby authorize any person, organization, or educational/training institution I mentioned as a reference in my application to disclose in good faith and in confidence any information in their possession about my qualifications or suitability for the job.</p> <p>I assume no liability to any employer, person or educational/training institution for information provided about me necessary and inherent to the employment process.</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>I understand that the information included in this form and submitted by third parties may be provided by the organization to other persons or organizations in cases where it is deemed necessary to protect other children or vulnerable adults.</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>

Signature:	
Name and surname in capital letters:	

