

BIO-DATA OF INDIVIDUAL FOR SECURITY CLEARANCE

1. Name : _____		<input type="checkbox"/>
2. Age : _____ 3. Sex: Male/Female		<input type="checkbox"/>
4. Citizenship ID Card No. : _____		<input type="checkbox"/>
5. Applicant's House No. : New _____ Old _____		<input type="checkbox"/>
6. Applicant's Thram No. : New _____ Old _____		<input type="checkbox"/>
7. Village : _____		<input type="checkbox"/>
8. Geog : _____		<input type="checkbox"/>
9. Dzongkhag : _____		<input type="checkbox"/>
10. Marital Status : Married/Unmarried		<input type="checkbox"/>
11. Father's Name: _____ 12. ID/Card No. _____		<input type="checkbox"/>
13. Father's House No. : New _____ Old _____		<input type="checkbox"/>
14. Father's Thram No. : New _____ Old _____		<input type="checkbox"/>
15. Mother's Name : _____ 16. ID/Card No. _____		<input type="checkbox"/>
17. Mother's House No. : New _____ Old _____		<input type="checkbox"/>
18. Mother's Thram No. : New _____ Old _____		<input type="checkbox"/>
19. Agency: _____		

FOR OFFICIAL USE (Census Division) Signature of applicant

FOR OFFICIAL USE (law and order division) **Verifying Authority**

P.T.O **Verifying Authority**

BIO-DATA OF INDIVIDUALS FOR SECURITY CLEARANCE CETIFICATE

1. Name	:	_____	<input type="checkbox"/>
2. Age :	_____	3. Sex: Male/Female	<input type="checkbox"/>
4. Citizenship ID Card No.	:	_____	<input type="checkbox"/>
5. Applicant's House No.	:	New _____ Old _____	<input type="checkbox"/>
6. Applicant's Thram No.	:	New _____ Old _____	<input type="checkbox"/>
7. Village	:	_____	<input type="checkbox"/>
8. Geog	:	_____	<input type="checkbox"/>
9. Dzongkhag	:	_____	<input type="checkbox"/>
10. Marital Status	:	Married/Unmarried	<input type="checkbox"/>
11. Father's Name:	_____	12. ID/Card No. _____	<input type="checkbox"/>
13. Father's House No.	:	New _____ Old _____	<input type="checkbox"/>
14. Father's Thram No.	:	New _____ Old _____	<input type="checkbox"/>
15. Mother's Name:	_____	16. ID/Card No. _____	<input type="checkbox"/>
17. Mother's House No.	:	New _____ Old _____	<input type="checkbox"/>
18. Mother's Thram No.	:	New _____ Old _____	<input type="checkbox"/>
19. Agency:	_____		

Signature of applicant

FOR OFFICIAL USE (Crime Branch, RBP HQ)

Verifying Authority

P.T.O

(If the parent of the applicant is late, write at least 3 to 4 names of family members in the same census)

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

Signature of applicant

Verifying Authority