

## DWS SEMSO APPLICATION FORM

Name of Deceased:

D.o.B:

CID No.:

Thram No:

House No:

Village

Gewog

Dzongkhag:

The above deceased is my....., who expired on..... and I shall  
be grateful if I am granted the DWS semso to conduct the last rites

Name:

Designation

CID No.

Date:

**(Signature of Applicant)**

Recommended by:

**(Dungpa/Sector Head/Unit Head)**

***To be filled up by the verifying authority***

This is to inform that late.....is the father/mother/father in law/mother in  
law/son/daughter of Mr/Mrs ....., who is the wife/husband of Mr/Mrs.....

.....  
Verified by: *(Please tick if verified and found correct)*

**(Dz. Civil Registration and Census Officer)**

Approved for an advance payment of Nu. 10,000.00 (ten thousand) only. *(Please tick if approved)*

**(Dzongda)**

**Note: All necessary documents are required to be attached as stated in the DWS By Law.**