



DHI-BEGIN TRAINING PROGRAM

APPLICATION FORM

Passport size
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NOTE: Last date of submission of the application is 27th February 2012 by 5:00 PM. Applications have to be submitted to Ms. Sonam Choden, Office Manager-Thimphu Tech Park, Office of New Edge Technologies, Third floor, City Mall, Chhubachu, Thimphu, contact number 335697/17809270, email: sonam.choden@thimphutechpark.com

In case of any queries regarding the application, please contact: Ms. Lhakyi Tenzing, Associate Analyst, DHI at Tel. No.336257-EXT-194/16921169, email: lhakyitenzing@dhi.bt

1. Personal Information

Mr/Mrs/Miss: _____ Date of birth: _____

CID No: _____

Current Address: _____

Phone No: _____ (Home) _____ (Mobile) _____ (Work)

Email Address: _____

Currently employed: Yes/ No

If Yes, Name of office and Address: _____

Designation: _____ Employed (Number of years): _____

Married: Yes/No Number of Children: _____

2. Educational Attainment

• Name of Secondary School: _____

Year Graduated: _____

• Name of university/college: _____

Degree certificate received: _____

Year Graduated: _____

• Name of Post- graduate University: _____

Year Graduated: _____

• Honours received (if any): _____

3. Primary source of income: _____

(If you have a business idea, please answer question 4 below in a separate sheet, if not, proceed to question 5)

4. Please provide an abstract of your business idea. The abstract should contain the following information:

- Business description
- Location
- Promoters
- Product or services offered
- Target market
- Financial projections
- Management Team

5.

a. Have you had any experience in managing or operating the type of business you are interested in?

Yes, Please describe:

No

b. Is your business already operating?

Yes, why do you want to expand the business?

No

c. How can this programme help you excel in your business?

Please attach additional pages if needed.

6. Why do you want to apply for DHI-BEGIN Training Program?

- Please attach additional pages if needed.

7. Give an example of when you have taken responsibility in managing an activity or a project.

- Please attach additional pages if needed.

8. Describe a situation where despite setbacks, you persevered in order to achieve your goal.

- Please attach additional pages if needed.

9. Give an explanation of a situation where you had to be part of a team and the part you played. What problems did you encounter, and how did you solve those problems?

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- Please attach additional pages if needed.

10. Have you ever received any entrepreneurship training?

- Yes, From another organisation
 Name of the organisation: _____
 Year of training: _____
- No

11. Work Experience

Please list current/ recent employer first.

Employer/Self employed:		Dates employed	
Address:		From:	
Telephone No:		To:	
Job Title:		Manager/ Supervisor (name, title, contact information)	
Type of Business:		Reasons for leaving	

Employer:		Dates employed	
Address:		From:	
Telephone No:		To:	

Job Title:		Manager/ Supervisor (name, title, contact information)	
Type of Business:		Reasons for leaving	

- Please attach additional pages if needed.

12. Special skills and Qualifications

Please list any additional skills/ memberships/ licenses/ certificates you feel support the application:

- Please attach additional pages if needed.

13. How did you find out about this programme?

- Newspaper
- Television
- Friends
- Others, please specify: _____

14. Declaration

By submitting this application, I affirm that the information provided are true and complete to the best of my knowledge. Any false statements, omission of any fact and misrepresentation in my resume, application or any other material, may result in my immediate dismissal from the DHI-BEGIN Training Programme.

I hereby authorize DHI-BEGIN Training Programme to verify the above information.

Signature: _____

Date: _____

15. Following documents required to be submitted along with the application form:

- Entrepreneur self test
- Resume/CV
- Copy of Citizen ID card.
- Copy of academic transcripts, degrees and other certificates.
- Valid Security clearance number
- One passport size photograph
- References (optional)