



དཔལ་འབར་གློག་ཆས་སྐྱེ་ཚད་འཛིན།
Pyelbar Lokchey Private Limited

Bap Tshelimaphey, Building No. 3, Tshalu Lam 10, Thim-Throm, Thimphu Bhutan
Branch Office- Building No 15, Dzongchu Lam, Lungthenphu Lap, Thim Throm, Thimphu Bhutan
“Committed to provide quality services”

PLPL JOB APPLICATION FORM

Vacancy applied for:

PERSONAL DETAILS

Name: _____ Date of Birth: _____ CID No: _____

Address

Village: _____ Gewog: _____ Dzongkhag: _____

Telephone: _____ (home) _____ . (Mobile) _____ . (Work)

Email: _____ Preferred contact: _____

Are you currently employed? Yes No

Are you available to commence employment immediately: _____
If not, what is your current notice period: _____

EDUCATION

Name of school/college	Place	Degree Obtained/Class attended	Year		% Mark Obtained
			From	To	



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EMPLOYMENT EXPERIENCE

Please list your current/ recent employer first

Name of Company/Office	Place	Designation	Year		Salary(Optional)
			From	To	

DECLARATION

Please read carefully and sign the statement below:

I understand and agree that:

- The information I have provided on this application is true and complete to the best of my knowledge. Any misinterpretation or omission of any fact in my application, resume, or any other materials, or during interviews, can justify the refusal of employment, or if employed, the termination of employment.
- Any offer of employment I may receive from PLNL is contingent upon my successful completion of the company’s pre-employment screening process, including PLNL receiving references if considered satisfactory.
- All of my present and former employers and those individuals I have listed 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 qualification for employment.
- I agree to PLNL keeping this application on file for the purpose of considering my current application and in the event that future vacancies arise for which I may be suitable.

Signature: _____

Date: _____