

# BHUTAN HEALTH JOURNAL AWARDS, 2019.

## APPLICANT INFORMATION

*(Please fill in the name exactly as it is in applicant's CID card)*

<b>Personal Information – Applicant 1</b>	
Title: Prof/Dr/Mr/Mrs	
Family Name	
First Name (s) (as in CID card)	
Organization	
Office Address Postal Code City, Country	
Mobile/Telephone number	
Home Address , Postal Code City; Country	
Email address	
CID number	
Date and place of birth	
Present job title	
<b>Personal Information – Applicant 2 (If applicable)</b>	
Title: Prof/Dr/Mr/Mrs	
Family Name	
First Name (s) (as in CID card)	
Organization	
Office Address, Postal Code City ; Country	
Mobile/Telephone	
Home Address, Postal Code	

City; Country	
Email address	
CID number	
Date and place of birth	
Present job title	

**PROJECT TITLE:**

**EXECUTIVE SUMMARY** of the work/project/initiative for the category in not more than 300 words. Please furnish details to **5.2 Specific Criteria** clause in announcement notice.

**Attach the following to this application form**

The participants' typewritten detailed *Curriculum Vitae*

- A scanned or copy of participants' CID card
- Recommendation letter from head of institution.

Send the application package by the deadline (**6<sup>th</sup> Oct 2019**) to [bhjawards@gmail.com](mailto:bhjawards@gmail.com)

Contact Person: Dr. Karma Tenzin (Email: [karmatenzin@kgumsb.edu.bt](mailto:karmatenzin@kgumsb.edu.bt) or call +975 02 328997/ 328999 for more information)

Failure to provide all of the information requested may result in the rejection of your application.