APPLICATION FOR SEMSO

1.	Name of ESWS Member/Beneficiary
2.	Employee ID No
3.	School
4.	Dzongkhag
5.	Saving A/c No/Bank Name/Place
6.	Semso availed for (tick the relevant one in case of Parents)
	Death of Spouse
	Name
	Death of child
	Name
	Death of Parent
	Name(Mention Father/Mother)
	Citizenship I.D No.
	Death of member
	NameCitizenship I.D No
7.	Email ID:
8.	Contact No:
9.	Documents enclosed:
	Documents enclosed:
	Gup's Death Verification Certificate with the Birth and Death Register No., verified by the Dzongkhag Administration
	Death Certificate with seal from the Hospital in the prescribed Form issued by the
	Hospital I hereby declare that all the information provided here is true and accurate.
	Date:
	Signature of Applicant
Verif	ication by Principal
I here	by declare that information provided by the applicant is true to the best of my knowledge.
Name	::
Date	:Signature :
Verif	ication by Chief DEO/Dy.Chief TEO/Sr.DEO (Schools)/Concerned Head (Institutes/HQ/Others)
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I here	by declare that information provided by the applicant is true to the best of my knowledge.
The a	application has been duly noted in the Dzongkhag/Thromde ESWS file.
Name	e:
Date	:Signature :