



ELECTION COMMISSION OF BHUTAN
OLAKHA, THIMPHU
POST BOX: 2008
(Ensuring free, fair & Democratic Elections & Referendums)

(Volunteers for Voter Information, Communication and Education V-VOICE)

Registration Form for V-VOICE

Please write in BLOCK LETTERS.

1. PERSONAL DETAILS:

Name: _____

Designation: _____

Ministry/Agency/Organization: _____

CID Number: _____

2. CONTACT DETAILS

Mobile Number: _____

Phone Number: _____

Fax Number: _____

E-mail Address: _____

Postal Address: _____

3. Membership of Parties, Board, Committees, Association etc.(if applicable)

Name of Organization: _____

Position: _____

From (DD/MM/YY): _____/_____/_____

To (DD/MM/YY): _____/_____/_____

4. AFFIRMATION

I hereby submit the aforementioned authentic information for registration as member of the Volunteers for Voter Information, Communication and Education (V-VOICE), Election Commission of Bhutan

Signature of Applicant

_____/_____/_____
Date: DD/MM/YY

Thank you for completing this application form.