



**APPLICATION FORM FOR THE POST OF CASUAL TEACHER
(PRIMARY SCHOOL) UNDER SCHOOL EDUCATION DEPARTMENT**

2 Passport size
photo to be
affixed

- 1) Name of Applicant (in capital letters) : _____
- 2) Father's/Mother's name : _____
- 3) Name of post applied : _____
- 4) Preference of option (*see Post code in the Annexure-I of Advertisement*)

<u>Option</u>	<u>Post Code</u>			
a) 1 st	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>			
b) 2 nd	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>			
c) 3 rd	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>			
d) 4 th	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>			

- 5) Permanent Address : _____

- 6) (a) Address for correspondence : _____
(*Other than Sl No 5*) _____

- (b) Phone number : _____
- 7) Date of birth (*attach attested Copy of HSLC/HSSLC*) : _____
- 8) Sex (Male or Female) : _____
- 9) Community i.e SC/ST/OBC : _____
(*attach attested supporting document*)

- 10) Educational and other qualifications : _____
as prescribed in the advertisement. _____
(*attach attested supporting document-* _____
HSLC and above) _____
- 11) Whether the candidate possessed : YES/NO
working knowledge of Mizo language
at least Middle School standard?
- 12) Whether the candidate is person with : YES/NO
disability ? (*If yes, attach*
attested supporting document)
- 13) Indicate the list of attested : 1. _____
document enclosed with the 2. _____
application (*i.e. Educational Certificate,* 3. _____
ST Certificate, Birth Certificate etc.) 4. _____
5. _____

DECLARATION

I hereby declare that the information given above and in the enclosed documents is true to the best of my knowledge and belief and nothing has been concealed therein. I understand that if the information given by me is proved false/not true, I will have to face the punishment as per the law. Also, all the benefits availed by me shall be summarily withdrawn.

Place : Signature : _____

Date : Name in Full : _____