

No. A. 12032/2/2024-NAM
GOVERNMENT OF MIZORAM
DIRECTORATE OF AYUSH

Dated Aizawl, the 29th Sept, 2025

ADVERTISEMENT

Application is invited from qualified candidates by Mizoram State Ayush Society, Directorate of Ayush for engagement of 2 (two) Medical Officers, Ayush (H&WC) and 2 (two) Group D staff on co-terminus basis under National Ayush Mission (NAM) as under:

Sl.No	Name of Post	No. of Post	Remuneration per month	Qualification	Age Limit
1.	Medical Officer, Ayush (H&WC)	2 (two) nos.	Rs 25,000/-as fixed remuneration and Rs 15,000 as Performance Linked Payment	BHMS/BAMS degree from recognized University.	A candidate must not be less than 18 years and not more than 35 years of age on the last date of application as per Notification No.A.12011/1/2019-P&AR (GSW)dt. 03.06.2019. Upper age limit relaxation will be 40 years for candidates belonging to SC/ST.
2.	Group D	2 (two) nos.	Rs.10,500/-per month.	Class VIII passed from a recognized institution.	

The application form can be downloaded from the Department's website or can be obtained from the Directorate of Ayush Office with payment of Rs.20/-. Application fees amounting to Rs 150/- for SC/ST/OBC Candidates and Rs 200/-for General category candidates should be deposited while submitting the application form at the Directorate of Ayush office during Office hours on or before 20th October, 2025. Differently-abled persons will be exempted from payment of application fees.

Sd/-Dr.LALTHLEGLIANI

Director,

Directorate of Ayush,

Aizawl: Mizoram.

Memo No. A. 12032/2/2024-NAM : Dated Aizawl the 29th Sept, 2025

Copy to:

1. PS to Minister, Health & Family Welfare Department.
2. PS to Secretary, Health & Family Welfare Department.
3. The Director, Labour, Employment, Skill Development and Entrepreneurship Deptt. for information and necessary action.
4. The Director, I&PR with a request to publish in 2(two) leading local news paper for two consecutive days.
5. Web Manager, DHS/DHME.
6. Office File.

[Signature]
25.9.25
Director,

Directorate of Ayush
Aizawl: Mizoram.

APPLICATION FORM FOR ENGAGEMENT OF GROUP-D UNDER UNDER NATIONAL AYUSH MISSION, MIZORAM STATE AYUSH SOCIETY, DIRECTORATE OF AYUSH

2(two) copies of
Passport size photo
to be affixed

- 1) Name of Post : Group D under National Ayush Mission
- 2) Name of Department : Directorate of Ayush
- 3) Name of candidate : _____
(in capital letters only)
- 4) Father's/Mother's name : _____
- 5) Permanent address : _____

- 6) (a) Address for correspondence : _____

(b) Phone number : _____
- 7) Date of birth : _____
(attach self attested photocopy of
Birth Certificate or HSLC or
Aadhaar)
- 8) Sex (Male or Female) : _____
- 9) Community i.e., SC/ST/OBC : _____
(attach self attested photocopy of
the supporting document)
- 10) Educational and other : 1. _____
qualifications as prescribed in the 2. _____
advertisement (attach self attested 3. _____
photocopy of the supporting 4. _____
document)
- 11) Experience, if any (attach self- : _____
attested photocopy of the _____
supporting documents) _____
- 12) Whether the candidate possessed : YES/NO
working knowledge of Mizo
language at least Middle School
standard?

13) Indicate the list of self attested documents enclosed with the application (i.e., Educational Certificate, ST Certificate, Birth Certificate, etc.)

- : 1. _____
2. _____
3. _____
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 : _____

Date : _____

(Signature of the candidate)

**APPLICATION FORM FOR ENGAGEMENT OF MEDICAL OFFICER, AYUSH (HWC)
UNDER NATIONAL AYUSH MISSION, MIZORAM STATE AYUSH SOCIETY,
DIRECTORATE OF AYUSH**

2(two) copies of
Passport size photo
to be affixed

- 1) Name of Post : Medical Officer, Ayush (HWC) under National
Ayush Mission
- 2) Name of Department : Directorate of Ayush
- 3) Name of candidate : _____
(in capital letters only)
- 4) Father's/Mother's name : _____
- 5) Permanent address : _____

- 6) (a) Address for correspondence : _____

- (b) Phone number : _____
- 7) Date of birth : _____
*(attach self attested photocopy of
Birth Certificate or HSLC or
Aadhaar)*
- 8) Sex (Male or Female) : _____
- 9) Community i.e., SC/ST/OBC : _____
*(attach self attested photocopy of
the supporting document)*
- 10) Educational and other : 1. _____
qualifications as prescribed in the : 2. _____
advertisement *(attach self attested : 3. _____
photocopy of the supporting : 4. _____
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- 12) Whether the candidate possessed : YES/NO
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Place : _____

Date : _____

(Signature of the candidate)