APPLICATION FORM FOR RECRUITMENT EXAMINATION UNDER THE MIZORAM BUILDING & OTHER CONSTRUCTION WORKERS WELFARE BOARD (DEPARTMENT OF LABOUR, EMPLOYMENT, SKILL DEVELOPMENT & ENTREPRENEURSHIP)

Recent passport size photo to be pasted

1.	Name of Service / Post	:	
2.	Name of Candidate (in capital letter only)	:	
3.	Father's / Mother's name	:	
4.	Permanent Address	:	
5.	(a) Address for correspondence	:	
	(b) Phone Number	:	
6.	Date of Birth (attach a self-attested photocopy of the supporting document)	:	
7.	Gender	:	🗌 Male 🛛 🗌 Female
8.	Category (attach self-attested photocopy of the supporting document)	:	□ ST □ SC □ OBC
9.	Educational and other qualifications as prescribed in the advertisement (attach a self-attested photocopy of the supporting document)	:	1 2 3 4
10.	Experience, if any (attach a self-attested photocopy of the supporting document)	:	
11.	Whether the candidate possessed working knowledge of the Mizo language at least Middle School standard?	:	□ YES □ NO
12.	Indicate the list of self-attested documents enclosed with the application (i.e., Educational Certificate, Birth Certificate, etc.)	:	

13.	Whether or not a candidate is a person with : benchmarked disability as defined under section 2(r) of RPwD Act, 2016?	T YES	□ NO
14.	If the answer at SI.no. (13) is YES, whether or not : the candidate wanted to avail the services of scribe for writing the examination?	T YES	□ NO
15.	If the answer at Sl.no. (14) is YES, whether or not : the candidate will bring his/her own scribe OR utilize the services of a scribe provided by the Board?		

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 proven 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 Also, all the benefits availed by me shall be summarily withdrawn.

Date :

Place:

(Signature of the candidate)

CERTIFICATE BY HEAD OF DEPARTMENT

(For use of Government Servants only)

	Certified	that	Mr/Mrs/Miss	holds	а
tempo	rary/permai	nent po	st under the Cent	ral/State Government. His character so far as known to	me
is goo	d and I am	not aw	are of any circum	nstances which show that he would be unsuitable for	any
appoir	ntment to an	iy post i	if successful in the	examination.	

Date:

Signature:	
Designation: (Office Seal)	