

**COMMON APPLICATION FORM FOR RECRUITMENT TO SERVICES/POSTS UNDER
THE GOVERNMENT OF MIZORAM OUTSIDE THE PURVIEW OF MIZORAM PUBLIC
SERVICE COMMISSION**

Passport size
photo to be
affixed

1. Name of Service/Post : _____
2. Name of Department : _____
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 qualifications as prescribed in the advertisement *(attach self attested photocopy of the supporting document)* :
1. _____
2. _____
3. _____
4. _____

11. Experience, if any (*attach self attested photocopy of the supporting document*) : _____

12. Whether the candidate possessed working knowledge of Mizo language at least Middle School standard? : YES/NO
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 Also, all the benefits availed by me shall be summarily withdrawn.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)

CERTIFICATE BY HEAD OF DEPARTMENT (*For use of Government Servants only*)

Certified that Mr/Mrs/Miss _____ holds a temporary/permanent post under the Central/State Government. His/Her character so far as known to me is good and I am not aware of any circumstances which show that he/she would be unsuitable for any appointment to any post if successful in the examination.

Date :

Signature : _____
 Designation : _____
 (Office Seal)