APPLICATION FORM FOR ENGAGEMENT OF 2 (TWO) DRIVERS (PROVISIONAL EMPLOYEE) UNDER THE OFFICE OF THE DEPUTY COMMISSIONER, KHAWZAWL

Passport size photo to be affixed

1) Name of Service/Post	:	
2) Name of Department	: <u></u>	
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	: <u></u>	
(c) Phone Number (optional in case of emergency)	:	
7) Date of birth (attached self attested photo copy of Birth Certificate or HSLC or Adhaar)		
8) Sex (Male or Female)	:	
9) Community i.e. SC/ST/OBC (attached self attested photocopy of the supporting document)		
10) Educational and driving licence as prescribed in the advertisement (attached self attested photocopy of the supporting document)		

	3			
	4			
11) Experience, If any(attached self attested photocopy of the supporting document)				
12) Whether the candidate possesses working knowledge of Mizo language at least Middle School Standard?	: YES/NO			
13) Employment Registration Number	:			
14) Indicate the list of self attested Documents enclosed with the Application (i.e. Educational Certificate, ST Certificate, Driving licence, Birth Certificate, Employment Registration, etc.)	2. 3. 4. 5.			
DECLARATION				
to the best of my knowledge and belief and i	ation given above and in the enclosed documents is true nothing has been concealed therein. I understand that if the true, I will have to face the punishment as per the law. Also, arily withdrawn.			
Place:	(Signature of the candidate)			

in a

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

Certified that	Mr./Mrs./Miss	holds a
as known to me is go	nt post under the Central/State Governmod and I am not aware of any circumstater or any appointment to any post if succes	ances which show that he
Date:		
	Signature:	
	Designation:	
	(Office Seal)	