

**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 : 1. _____
qualifications as prescribed in the 2. _____
advertisement (attach self attested 3. _____
photocopy of the supporting document) 4. _____
- 11) Experience, if any (attach : _____
self attested: photocopy
of the supporting document) _____

12) Whether the candidate : YES/NO
 possessed working knowledge
 of Mizo language at least
 Middle School standard?

13) Indicate the list of self attested : 1. _____
 documents enclosed with the 2. _____
 application (ie. Educational 3. _____
 Certificate, ST Certificate. 4. _____
 Birth Certificate, etc.) 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 Also, all the benefits availed by me shall be summarily withdrawn.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 character so far as known to me is good and I am not aware of any circumstances which show that he would be unsuitable for any appointment to any post if successful in the examination

Date

Signature : _____
 Designation : _____
 (Office Seal)