

**COMMON APPLICATION FORM FOR RECRUITMENT TO THE POST OF REARER
(PROVISIONAL EMPLOYEES) UNDER SERICULTURE DEPARTMENT GOVERNMENT
OF MIZORAM**

2 Passport size
photo to be
affixed

- 1) Name of 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 : _____
(Attached self attested
Photocopy of Birth
Certificate of HSLC or
Aadhaar)
- 8) Sex (Male or Female) : _____
- 9) Community i.e. SC/ST/OBC : _____
(Attached self attested photocopy
of the supporting document)

- 10) Education and other qualification : 1. _____
As prescribed in the advertisement 2. _____
(Attach self attested photocopy of 3. _____
The supporting document) 4. _____
5. _____
- 11) Experience, if any : _____
(Attached self attested photocopy
of supporting document) _____
- 12) Whether the candidate possessed : YES/NO
working knowledge of Mizo
language at least Middle School
standard ?
- 13) Indicate the list of self attested : 1. _____
Documents enclosed with the 2. _____
Application (i.e. 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 Also, all the benefits availed by me shall be summarily withdrawn.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 : _____
(Seal)