APPLICATION FORM FOR THE POST OF GROUP 'D' (P.E) UNDER GENERAL ADMINISTRATION DEPARTMENT, SECRETARIAT ADMINISTRATION WING

Passport size photo 2 copies to be affixed

1.	Name of Service/Post :	Group D (PE)		
2.	Name of Department	GAD, SAW		
3.	Name of Candidate : (in capital letters)	:		
4.	Father's/Mother's Name	:		
5.	Permanent Address	:		
6.	a) Address for correspondence	:		
	b) Phone Number			
7.	Date of Birth (attached self photocopy of Birth Certificate or Aadhar)	<u> </u>		
8.	Sex (Male or Female)	<u>.</u>		<u> </u>
9.	Community i.e SC/ST/OBC (attach self attested photocopy of the supporting document)			
10.	Education and other qualificat as prescribed in the advertiser (attach self attested photocopy the supporting document)	ment 2 y of 3		
11.	Experience, if any (attach self attested photocopy of the supporting document)			
12.	Whether the candidate posses working knowledge of Mizo language at least Middle Schostandard?		0	
13.	Indicate the list of self attested Documents enclosed with the application (i.e Educational Certificate, ST Certificate, Birth Certificate etc)	2 3 h 4		
14.	If Person with Disability (attack self attested photocopy of the supporting document)	h : YES / NO		
best of inform	(Dilna diklo leh fello a a reby declare that the information of my knowledge and belief and nation given by me is proved far all the benefit availed by me sha	n given above ar I nothing has beel alse/not true., I w	nd in the enclosed n concealed therei ill have to face the	documents is true to the n. I understand that if the
				I rintlak,
Date	<u>:</u>	Signature :	()
Place	:	Hming:	()

Note: He hna diltute hi kum 18 aia naupang lo leh form thehluh ni hnuhnung ber a kum 37 aia upa lo an ni tur ani. Scheduled Tribe/Scheduled Caste tan kum 42 thleng nghaihnathiam theih ani. Dilna hi ni 30.09.2024 tlai dar 4:00 p.m ral hma-in Under Secretary, GAD, SAW (E) Mizoram Secretariat Building No.-1 Room No.053 (Basement-I)-ah chauh thehluh tur a ni.