APPLICATION FORM

Mizoram EMRS Society
Advertisement No.:02/2023-2024

Application for the post of Chowkidar

Photo

(to be filled in block letters)

1. Name of Applicant :_____

2. Father's/Mother's Name:

3. Date of Birth: 4.Sex: Male/Female

4. Marital Status :Married/Unmarried   6.Nationality :

7. Category: General/ST/SC /BC-I/BC-II (attach self attested photo copy of the Scheduled Tribe / Caste Certificate issued in case of Reserved Categories

8. Permanent Address:

_____

_____

Address for Communication (if differs from above)

_____

_____

9. Aadhaar Number: _____ 10.Mobile Number: _____

11. Educational Qualification /Professional Qualification(Attach self attested photocopy of all the certificates):

Sl. No.	Examination passed (starting from HSLC onwards)	Board/University/Institute	Year of Passing	Marks Percentage

12. Experience details (Attach self attested photo copy of all the certificates):

Sl. No.	Name & Address of Employer	Post & Nature of duties	Period of Service (Mention with Date, Month, Year)		Total period of service (Years, Months and Days)
			From	To	

13. Other information (if any):

14. List of attachments (please specify):

1.	2.
3.	4.
5.	6.
7.	8.
9.	10.

I, _____ hereby declare that the information mentioned above are true to the best of my knowledge. I also fully understand that if at any stage, any attempt to will fully conceal or misrepresentation off acts on my part is found, my candidature will liable to be summarily rejected or my employment may be cancelled.

Place:

Date:

Name & Signature of Candidate