## STATE PROJECT OFFICE SAMAGRA SHIKSHA, MIZORAM

Affix Passport Here

## INSTRUCTIONS FOR FILLING APPLICATION FORM

- Only attested copies of certificates and marksheets required should be submitted along with the application.
- Applications received after last date of submission of application fixed will not be entertained. Candidates should check their applications carefully and see that the application are duly signed and complete in all respects, including certificates to be attached.
- Incomplete application will summarily be rejected.
- Last date of submission **19.01.2024** (Friday) **4:00 p.m**.
- Accepted applicants will be displayed at State Project Office and Samagra website (https://samagra.mizoram.gov.in) on **30.01.2024.**

**APPLICATION FORM** 

• Candidates should bring Voters ID/Aadhaar Card and Admit Card at the time of Written Examination.

1.	Post a	applied for:										
2.	Name (in block letter):											
3.	Father's Name:											
4.	Mother's Name:											
5.	Sex (	tick the appropriate box):		Male Female Others								
6.	Perm	anent Address:										
7.	Prese	nt Address (if any):										
8.	3. Telephone/Mobile No. (Preferably two contact numbers):											
9. ]	Date o	f Birth (attach supporting	documents	s): Da	ate I	Month Year						
10.	Natio	nality:										
	_	oyment registration no.: pporting documents)										
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13.	Е	ducational Qualification (a	attach sup	porting do	cuments):							
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	3											
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14. Experience (if	any) (attach s	upporting do	cuments):					
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b)								
c)								
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15. Present Post He	eld (if any):							
16. If reservation/re	elaxation is cl	laimed by Pe	rson with Disa	ability indic	cate which (	please supporting	documents):	
a)								
b)								
17. Indicate enclos	ures: a	a)						
	1	o)						
	C	e)						
	(	d)						
	•	e)						
	1	f)						
			DECLAR	ATION				
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guilty of any falsif			ments.					
Place :								
Date :		<del></del>						
						(Signature of the continuous) (in full)	andidate)	
						(III Turi)		
	Recrui	tment of Te	ADMIT eachers unde		Shiksha J	Mizoram		
				J			Affix	
Post applied for	:						Passport Size Photo	
Name	:							
Father's name	:							
Address	:							
Roll No :								
Note:								
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1. Candidates show	uiu pring Edv	icauonai Qua	amication orig	ginai docur	nents at the	e ume oi interviev	v.	

Initials of Clerk receiving Application Fee .....