APPLICATION FORM FOR RECRUITMENT TO THE POST OF AERO MODELLING INSTRUCTOR (GROUP 'C') UNDER SPORTS & YOUTH SERVICES DEPARTMENT, GOVERNMENT OF MIZORAM.

Passport size 2 copies

1)	Name of Post	:		
2)	Name of Department	:		
3)	Name of candidate (<i>in capital letters only</i>)	:		
4)	Father's/Mother's name	:		
5)	Permanent address	:		
6) ((a) Address for correspondence	:		
(b) Phone Number/Mobile No.	:		
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)			
-	Educational and other qualifications as prescribed in the advertisement (attach self attested photocopy of the supporting document)		1. 2. 3. 4.	
11)	Experience, if any (attach self attested photocopy of the supporting documer			
12)	Whether the candidate possessed working knowledge of Mizo language at least Middle School standard?	:		Yes/No

13) Whether the candidate possessed	:	Yes/No				
Diploma in computer Application/						
Certificate in Computer Application	ı from					
Institution recognised by Mizoram	State					
Council of Technical Education (MS	CTE)					
(attach self attested photocopy of						
the supporting document)						
14) Whether the candidate possessed N	ICC's :	Yes/No				
Certificate (Air Wing) (attached self attested						
photocopy of the Supporting docum	ient).					
OR						
Whether the candidate possessed C	Certificate :	Yes/No				
showing he/she is ex-servicemen of Indian						
Airforce (attached self attested photocopy of						
the Supporting document).						
15) Indicate the list of self attested	: 1					
documents enclosed with the	2					
application (i.e. Education	3					
Certificate, ST Certificate,	4					
Birth Certificate, etc.)	5					
	6					

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 had been concealed therein. I understand that if the information given by me is proved fake/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 Also, all the benefits availed by me shall be summarily withdrawn.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 Servant only)

Certified that Mr/Mrs/Miss	holds
a temporary/permanent post under the Central/State Government. His/her characte	er so far
as known to me is good and I am not aware of any circumstances which show that he w	vould be
unsuitable for any appointment to any post if successful in the examination.	

Date :

Signature : _____

Designation : _____

(Office Seal):