No. A.34012/45/2009-DHME/ESST GOVERNMENT OF MIZORAM DIRECTORATE OF HOSPITAL & MEDICAL EDUCATION MIZORAM NEW CAPITAL COMPLEX: AIZAWL

Dated Aizawl, the 10th May, 2024.

ADVERTISEMENT No.2 of 2024

Directorate of Hospital & Medical Education (DHME) hnuaiah Group D (Provisional Employee) Pali (4) Pukpui, Oxygen Plant (Filling Station), Lungleia thawk tur lak a ni dawn a. He hna dil theite chu a hnuai a mi ang hi a ni:

1. Hna hming : Group D (Provisional Employee).

2. Hnaruak zat : 4 (Pali)

3. Hlawhbi : Level 1 in the pay matrix (₹ 11990)

4. Kum bithliah : Kum 18 atanga 37 inkar; (SC/ST-tan kum 5

ngaihhnathiam theih a ni ang).

5. Thiamna ngaite : 1. Class VIII and above from recognized Institution.

2. Working knowledge of Mizo language at least Middle

School standard.

6. Application Fee : ₹200 (ST/SC tan ₹ 150)

Dilna Form hi Health & Family Welfare Department website <u>health.mizoram.gov.in</u> ah download theih a ni.

Dilna Form hi June Ni 14, 2024 thleng DHME, MINECO, Aizawl ah thehluh theih a ni. Dilna thehluh rual hian Application Fee pek nghal tur a ni.

Sd/-Dr. LALTHLENGLIANI
Director,
Hospital & Medical Education

Memo No. A.34012/45/2009-DHME/ESST: Dated Aizawl, the 10th May, 2024 Copy to:-

1) PS to Minister, Health & Family Welfare Department for information.

2 Principal Secretary, Health & Family Welfare Department for information 3) Principal Director, Health & Family Welfare Department for information.

4) Director, LESDE. He is requested to inform willing candidates as per the Register maintained by Offices of District Employment Officers

Website In-Charge, H&FW Department for uploading in the Department's website.

6) Notice Board.

7) Guard File.

Director,

Hospital & Medical Education

APPLICATION FORM FOR RECRUITMENT TO THE POST OF GROUP D UNDER DIRECTORATE OF HOSPITAL & MEDICAL EDUCATION (H & FW DEPARTMENT)

Passport size photo to be affixed

| 1) Name of Service / Post : | | |
|--|--------------|----|
| 2) Name of Department : | _ | |
| 3) Name of Candidate : (in capital letters only) | - | |
| 4) Father's / Mother's Name : | _ | |
| 5) Permanent address : | <u> </u> | |
| | - | |
| | _ | |
| 6) (a) Address for correspondence | | |
| | | |
| | | |
| | | |
| (b) Phone Number | | |
| 7) Date of birth (attach self-attested: | | |
| photo copy of Birth Certificate) | | |
| 8) Sex (Male / Female) | - | |
| 9) Community i.e. SC/ST/OBC (attach: self attested photocopy of the supporting document) | | |
| 10) Educational and other qualifications as: prescribed in the advertisement (attach self-attested photocopy of the supporting document) | | |
| | | J. |

| 11) Experience, if any (attach self-attested photocopy of the supporting document) | | |
|--|---------------------------|-------------------------------------|
| 12) Whether the candidate possessed working knowledge of Mizo Language at least Middle School Standard? | | : YES/NO |
| 13) Indicate the list of self-attested document | s : | 1. |
| enclosed with the application (i.e Educational Certificate, ST Certificate, Birth Certificate, Disability Certificate, Aadhaar, Voter's I.D.) | | 2 |
| | | |
| | | 3. |
| | | 4 |
| | | 5 |
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| | | |
| DECL | ARATION | |
| that if the information given by me is proved as per the law. Also, all the benefits availed b Place : Date : | | |
| | | (Signature of the Candidate) |
| CERTIFICATE BY I (For use of Gove | | |
| Certified that Mr/Mrs/Miss | | |
| holds a temporary/permanent post under the C | Central/State | Government. His character so far as |
| known to me is good and I am not aware of | any circumst | ances which show that he would be |
| unsuitable for any appointment to any post if | successful in | the examination. |
| | | |
| Date: | G: | |
| | Signature | |
| | | |
| | Designation (Office Seal) | |