

**GOVERNMENT OF MIZORAM  
OFFICE OF THE MEDICAL OFFICER  
PRIMARY HEALTH CENTRE : BUKPUI**

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**APPLICATION FORM**

Name of post applying for: Laboratory technician cum data entry operator

**PERSONAL INFORMATION**

Name: _____	Attach Passport Size Photo here
Father's Name: _____	
Gender: _____	
Address: _____	
Date of Birth: _____	
Mobile No: _____	
Email address: _____	

**EDUCATIONAL QUALIFICATION**

Qualification	Institute/University	Course duration in years	Year of Passing	% of marks obtained

## EXPERIENCE DETAILS

Name of Organization	Designation	Job responsibilities	Year of Service

### DECLARATION:

I hereby declare that all statements made in this application are true, complete and correct to the best of knowledge and belief. I understand that in the event of any information being found untrue or incorrect at any stage of my not satisfying any of the eligibility criteria stipulated, my candidature is liable to be cancelled.

**Signature:**

**Date:**

### DOCUMENTS REQUIRED:

1. Qualification Certificate and Mark sheet
2. Experience Certificate
3. Birth Certificate
4. Others Relevant Documents.