

**OFFICE OF THE  
MANIPUR STATE KALA AKADEMI**  
(An Autonomous Body under the Department of Art & Culture)  
Khuman Lampak Sports Complex, Imphal

**NOTIFICATION**  
Imphal, the 27<sup>th</sup> May, 2026.

No.C-3/172/2019-MSKA(Pt.III): In continuation of this office Notification of even number dated 26/02/2024, Manipur State Kala Akademi, Imphal hereby invite applications in the prescribed format from willing and eligible candidates for recruitment of the following category of posts in the Manipur State Kala Akademi, Imphal on contractual basis through concerned Employment Exchange in Manipur.

**2. Number of Posts:**

| Sl. No. | Name of posts          | Consolidated Remuneration | No. of Posts | UR  | ST  | SC  | OBC (M) | OBC (MP) |
|---------|------------------------|---------------------------|--------------|-----|-----|-----|---------|----------|
| (1)     | (2)                    | (3)                       | (4)          | (5) | (6) | (7) | (8)     | (9)      |
| 1.      | Exhibition Officer     | Rs.17,700/- p.m.          | 1            | 1   | -   | -   | -       | -        |
| 2.      | Production Assistant   | Rs.14,600/- p.m.          | 1            | 1   | -   | -   | -       | -        |
| 3.      | Driver (Light Vehicle) | Rs.9,950/- p.m.           | 1            | 1   | -   | -   | -       | -        |

\* Number of the posts may increase or decrease according to the vacant posts available in the Akademi.

**3. Age Limit as on 26/02/2024:**

- i. Minimum: 21 years in case of Driver (Light Vehicle)
- ii. Upper age limit shall be 38 years for all categories of posts.

**4. Eligibility conditions:**

- i. The candidate shall be a citizen of India
- ii. The candidate shall be a permanent resident of Manipur

|    |                        |  |
|----|------------------------|--|
| a. | Exhibition Officer     | <b><u>Essential Qualification:</u></b><br>Degree in Fine Arts from a recognized Institute/University<br><b>or</b><br>Diploma in Fine Arts from a recognized Institute/University with Graduate from a recognized University or its equivalent. |
| b. | Production Assistant   | <b><u>Essential Qualification:</u></b><br>i. Graduate of a recognized University or its equivalent<br>Certificate/Diploma in archive keeping from National Archives of India<br>ii. Knowledge of Manipuri and conversant with Manipuri script. |
| c. | Driver (Light Vehicle) | <b><u>Essential Qualification:</u></b><br>i. Matriculate/HSLC/Equivalent from a recognized Board/ Institution<br>ii. Driving experience for 3 years possessing requisite driving license.  |



5. The willing and eligible candidates for the posts of Exhibition Officer, Production Assistant and Driver (Light Vehicle) shall get their names sponsored by the concerned Employment Exchange Office on or before 17<sup>th</sup> June, 2026. Thereafter, the intending and eligible candidate should collect the prescribed format of application from the office of the Akademi during office hours on all working days or download the form from the MSKA website i.e. [mska.mn.gov.in](http://mska.mn.gov.in) Completed application forms along with the required self-attested documents should be submitted to the Secretary, Manipur State Kala Akademi, Khuman Lampak, Sports Complex, Imphal on or before **26<sup>th</sup> June, 2026 by 4:30 p.m.**
6. **Applicable Fees:** Candidates are requested to pay the applicable fee in cash at the time of the collection of application forms (Rs.500/- for UR & OBC candidates and Rs.300/- for SC/ST/PWD).
7. Date of issue of Admit Card, scheme and schedule of examination, centre details, etc. will be notified later.



(Sunanda Thokchom)  
Secretary,  
Manipur State Kala Akademi

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Copy to:

1. Secretary to the Hon'ble Governor of Manipur.
2. P.S. to the Hon'ble Minister (Art & Culture), Manipur.
3. Staff Officer to Chief Secretary, Government of Manipur.
4. P.S. to the Commissioner (Art & Culture), Government of Manipur.
5. Director, Art & Culture, Manipur.
6. Additional Director of Employment, Directorate of Employment Exchange Complex, Lamphelpat, Imphal-West – with request to take up necessary steps to sponsor the eligible candidates of all the concerned District Employment Exchange Officer of all Districts of Manipur.
7. News Editor, AIR, Imphal/Doordarshan Kendra, Imphal/ISTV/Impact TV with a request to broadcast the Notification as a **news item**.
8. Editor, The People's Chronicle, Sangai Express (Manipuri edition), with a request to publish the above notification as paid news items for 2 (two) consecutive days and to send the Bill in duplicate to the undersigned for early payment.
9. Notice Board.
10. Guard File.

**APPLICATION FOR THE POST OF EXHIBITION OFFICER OF MSKA**

- All fields are mandatory and details to be filled in carefully
- Candidates are to submit the Application Form along with a fee (non-refundable).

1. Name in full (in block letters):.....

2. Father's/Husband's Name:.....

3. Date of Birth:..... 4. Age on 26-02-2024:.....

5. Place of Birth:..... 6. Nationality: .....

7. Gender:..... 8. Contact No.: .....

9. Present Address: .....

10. Permanent Address: .....

Please affix  
recent passport  
size  
photograph  
duly attested

**11. Educational Qualifications:**

| Sl. No. | Name of Examination | Year of Passing | Class/ Division | Name of School/College/University/Institute. |
|---------|---------------------|-----------------|-----------------|--|
|         |                     |                 |                 |  |
|         |                     |                 |                 |  |
|         |                     |                 |                 |  |
|         |                     |                 |                 |  |

**12. Professional Qualifications:**

| Sl. No. | Name of Examination | Year of Passing | Class/ Division | Name of School/College/University/Institute. |
|---------|---------------------|-----------------|-----------------|--|
|         |                     |                 |                 |  |
|         |                     |                 |                 |  |
|         |                     |                 |                 |  |

13. Experience/Proficiency, if any (to be enclosed in a separate sheet).

14. Any other information the candidate may like to add: (to be enclosed in a separate sheet).

**15. Declaration:**

I do hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand and agree that in the event of any information being found false or incorrect/incomplete or ineligibility being detected at any time before or after interview/selection, my candidature is liable to be rejected. I shall be bounded by the decision of the appointing authority of Manipur State Kala Akademi.

Date:

Place:

(Signature of candidate)

MANIPUR STATE KALA AKADEMI  
KHUMAN LAMPAK SPORTS COMPLEX, IMPHAL

Affix recent  
passport size  
photograph  
with self  
attestation

Roll No:.....  
(To be filled in by official)

**ADMIT CARD**  
(for Office)

Name of Post: **Exhibition Officer.**

Name of Applicant (in Capital Letter):.....

Father's/Husband's Name:.....

Full Address:.....

.....District:.....

P.O:.....P.S:.....

Contact No:....., Whether General/ST/SC/OBC/PWD:.....

Employment Exchange Serial No. &date:.....

(Signature of candidate)

(Signature of issuing Authority)

.....&.....

MANIPUR STATE KALA AKADEMI  
KHUMAN LAMPAK SPORTS COMPLEX, IMPHAL

Affix recent  
passport size  
photograph  
with self  
attestation

Roll No:.....  
(To be filled in by official)

**ADMIT CARD**  
(for Candidate)

Name of Post: **Exhibition Officer.**

Name of Applicant (in Capital Letter):.....

Father's/Husband's Name:.....

Full Address:.....

.....District:.....

P.O:.....P.S:.....

Contact No:....., Whether General/ST/SC/OBC/PWD:.....

Employment Exchange Serial No. &date:.....

(Signature of candidate)

(Signature of issuing Authority)

**APPLICATION FOR THE POST OF PRODUCTION ASSISTANT OF MSKA**

- All fields are mandatory and details to be filled in carefully
- Candidates are to submit the Application Form along with a fee (non-refundable).

1. Name in full (in block letters):.....  
.....

2. Father's/Husband's Name:.....

3. Date of Birth:..... 4. Age on 26-02-2024:.....

5. Place of Birth:..... 6. Nationality: .....

7. Gender:..... 8. Contact No.: .....

9. Present Address: .....

.....

10. Permanent Address: .....

.....

Please affix  
recent passport  
size  
photograph  
duly attested

**11. Educational Qualifications:**

| Sl. No. | Name of Examination | Year of Passing | Class/ Division | Name of School/College/University/Institute. |
|---------|---------------------|-----------------|-----------------|--|
|         |                     |                 |                 |  |
|         |                     |                 |                 |  |
|         |                     |                 |                 |  |
|         |                     |                 |                 |  |

**12. Professional Qualifications:**

| Sl. No. | Name of Examination | Year of Passing | Class/ Division | Name of School/College/University/Institute. |
|---------|---------------------|-----------------|-----------------|--|
|         |                     |                 |                 |  |
|         |                     |                 |                 |  |
|         |                     |                 |                 |  |

13. Experience/Proficiency, if any (to be enclosed in a separate sheet).
14. Any other information the candidate may like to add: (to be enclosed in a separate sheet).

**15. Declaration:**

I do hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand and agree that in the event of any information being found false or incorrect/incomplete or ineligibility being detected at any time before or after interview/selection, my candidature is liable to be rejected. I shall be bounded by the decision of the appointing authority of Manipur State Kala Akademi.

Date:  
Place:

(Signature of candidate)

MANIPUR STATE KALA AKADEMI  
KHUMAN LAMPAK SPORTS COMPLEX, IMPHAL

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with self  
attestation

Roll No:.....  
(To be filled in by official)

**ADMIT CARD**  
(for Office)

Name of Post: **Production Assistant.**

Name of Applicant (in Capital Letter):.....

Father's/Husband's Name:.....

Full Address:.....

.....District:.....

P.O:.....P.S:.....

Contact No:....., Whether General/ST/SC/OBC/PWD:.....

Employment Exchange Serial No. &date:.....

(Signature of candidate)

(Signature of issuing Authority)

.....✂.....

MANIPUR STATE KALA AKADEMI  
KHUMAN LAMPAK SPORTS COMPLEX, IMPHAL

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passport size  
photograph  
with self  
attestation

Roll No:.....  
(To be filled in by official)

**ADMIT CARD**  
(for Candidate)

Name of Post: **Production Assistant.**

Name of Applicant (in Capital Letter):.....

Father's/Husband's Name:.....

Full Address:.....

.....District:.....

P.O:.....P.S:.....

Contact No:....., Whether General/ST/SC/OBC/PWD:.....

Employment Exchange Serial No. &date:.....

(Signature of candidate)

(Signature of issuing Authority)

**APPLICATION FOR THE POST OF DRIVER (LIGHT VEHICLE) OF MSKA**

- All fields are mandatory and details to be filled in carefully
- Candidates are to submit the Application Form along with a fee (non-refundable).

1. Name in full (in block letters):.....  
.....
2. Father's/Husband's Name:.....
3. Date of Birth:..... 4. Age on 26-02-2024:.....
5. Place of Birth:..... 6. Nationality: .....
7. Gender:..... 8. Contact No.: .....
9. Present Address: .....
- .....
10. Permanent Address: .....
- .....

Please affix  
recent passport  
size  
photograph  
duly attested

**11. Educational Qualifications:**

| Sl. No. | Name of Examination | Year of Passing | Class/ Division | Name of School/College/University/Institute. |
|---------|---------------------|-----------------|-----------------|--|
|         |                     |                 |                 |  |
|         |                     |                 |                 |  |
|         |                     |                 |                 |  |
|         |                     |                 |                 |  |

**12. Professional Qualifications:**

| Sl. No. | Name of Examination | Year of Passing | Class/ Division | Name of School/College/University/Institute. |
|---------|---------------------|-----------------|-----------------|--|
|         |                     |                 |                 |  |
|         |                     |                 |                 |  |
|         |                     |                 |                 |  |

13. Experience/Proficiency, if any (to be enclosed in a separate sheet).
14. Any other information the candidate may like to add: (to be enclosed in a separate sheet).

**15. Declaration:**

I do hereby declare that all the statements made in this application are true, complete and correct to the best of my knowledge and belief. I understand and agree that in the event of any information being found false or incorrect/incomplete or ineligibility being detected at any time before or after interview/selection, my candidature is liable to be rejected. I shall be bounded by the decision of the appointing authority of Manipur State Kala Akademi.

Date:

Place:

(Signature of candidate)

MANIPUR STATE KALA AKADEMI  
KHUMAN LAMPAK SPORTS COMPLEX, IMPHAL

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passport size  
photograph  
with self  
attestation

Roll No:.....  
(To be filled in by official)

**ADMIT CARD**  
(for Office)

Name of Post: **Driver (Light Vehicle).**

Name of Applicant (in Capital Letter):.....

Father's/Husband's Name:.....

Full Address:.....

..... District:.....

P.O:..... P.S:.....

Contact No:....., Whether General/ST/SC/OBC/PWD:.....

Employment Exchange Serial No. &date:.....

(Signature of candidate)

(Signature of issuing Authority)

.....><.....

MANIPUR STATE KALA AKADEMI  
KHUMAN LAMPAK SPORTS COMPLEX, IMPHAL

Affix recent  
passport size  
photograph  
with self  
attestation

Roll No:.....  
(To be filled in by official)

**ADMIT CARD**  
(for Candidate)

Name of Post: **Driver (Light Vehicle).**

Name of Applicant (in Capital Letter):.....

Father's/Husband's Name:.....

Full Address:.....

..... District:.....

P.O:..... P.S:.....

Contact No:....., Whether General/ST/SC/OBC/PWD:.....

Employment Exchange Serial No. &date:.....

(Signature of candidate)

(Signature of issuing Authority)