	SURETECH	[COL]	Shikshan Prasarak LEGE OF I Affiliated by INC, MUHS, I	NURSIN	
A	PPLICATION NO.	APPLICAT	ION FORM	MIC YEAR :	
C	OURSES NAME				inste
	M. SC. NURSING Medical Surgical Nursing Child Health Nursing Community Health Nursing Obstetrics & Gynaecological Nursin Mental Health Nursing Full Name		B.SC. (NURSING) GNM RANM		Affix Passport size colour Photograph self attested
	BLOCK LETTER		(Last Name)	(First Name)	(Middle Name)
2)	Name of Father Name of Spouse/Husband	·			and the second
4)	Name of Mother				2.10.1.1.11
5)	Permanent Address	- 113			i datione di
	i gening sin antener and an er- vening distribution and and a si		af an eise se se		N AND THE REAL PL
		State	e :	Pincode	
6)	Mobile No. E-mail	:			
7)	Date of Birth	:			
8)	Nationality	·:		Religion :	
9)	Caste / Category	:			Lang Dars It
10)	Gender	: Mal	le : Female	: Trans	Gender :
11)	Marital Status	:			
12)	Have you had any previous trainin Nursing /Other Courses	g in : Yes	/ No		
	If Yes Specify	:			A SALANDA A
	Mother Tongue	:			
14)	State/Central Council valid Registration No.& Date (Applicable for M.Sc. Nursing)	e :			

QUALIFICATION	NAME OF THE SCHOOL/ COLLEGE/BOARD/UNIVERSITY	MEDIUM OF INSTRUCTION	YEAR OF PASSING	ATTEMPT	% OF MARKS
SSC		CONTRACTOR (al feat		
HSC					Over all %= (Marks)
119E					PCB %= (Marks)
B.Sc.(N)/P.B.B.Sc.(N)					(編44)
NURSING CET					

16) Total Experience :

SR. NO.	DETAILS OF TEACHING VELINICAL EXPERIENCE	FROM	то	TOTAL YEARS
A		EHOM	10	TORAL VEARS

DECLARATION:

I declare that the entries in the application form have been filled up and the entries made are correct as per my documents to the best of my knowledge and belief. I agree that if any statement is proved to be false authority shall have the right to reject my application or / and to take legal action against me for submitting false information or statement. I further declare that there is no allegation of misconduct against me and I have never been convicted for any offence involving moral values.

Date :

Place :

Signature of Applicant

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Attested Xerox Copy of following Certificate :

- 1) Birth Certificate stating "Indian" Nationality/Domicile/Nationality Certificate/Photocopy of Valid Passport.
- 2) Marksheet of SSC & Passing Certificate
- 3) Marksheet of HSC & Passing Certificate / Equivalence Certificate (Other Board/University)
- 4) CET Marksheet
- 5) Cast Certificate
- 6) Cast Validity
- 7) Valid Non-Creamy Layer Certificate
- 8) College Leaving Certificate (LC/TC)
- 9) Attempt Certificate (If applicable)
- 10) Copy of Gazette, Marriage Certificate & Affidavit in case of change in name (If applicable)
- 11) Valid Registration certificate from the Central/State Council (Provisional Registration certificate will not be considered)
- 12) All Year Mark sheet of B.Sc.(N)/P.B.B.Sc.(N) qualifying examination
- 13) Experience Certificate (If applicable)
- 14) Migration Certificate (If applicable)
- 15) Affidavit Gap Certificate (If applicable)
- 16) Medical Fitness Certificate
- 17) Aadhar Card
- 18) Recent Passport Size Photograph 2