

## FLORENCE COLLEGE OF NURSING Irba, Ranchi - 835219 (Jharkhand)

Recognised by: Indian Nursing Council (INC), New Delhi

Affiliated to: Ranchi University (R.U.) Jharkhand Nurses' Registration Council, RIMS, Ranchi



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ORENCE COLLEGE OF NURSING	APPLICATION FORM (To be filled by the Candidate)
IRBA RANCHI-PIN-835238	Academic Session: PHOTO
(Write in Block Letters)	
COURSE: A.N.M.	G.N.M. Basic B.Sc. P.B.B.Sc. M.Sc.
1. APPLICANT'S NAME	
2. PRESENT ADDRESS	
	PIN Mobile No.
3. PERMANENT ADDRESS	
	PIN Mobile No.
4. DATE OF BIRTH	
5. GENDER	MALE FEMALE
6. CATEGORY	ST SC BC-I BC-II GEN PH
7. MARITAL STATUS	a) Married b) Unmarried
8. NATIONALITY	
9. FATHER'S NAME	
	Mobile No.
	OCCUPATION
10. MOTHER'S NAME	
, <u>F</u> (,	Mobile No.
	OCCUPATION

## 12. ACADEMIC QUALIFICATION

SL.	Name of Exam Passed	Institution of Study	Board / University	Year of Passing	Subjects	Total marks out of	% Score in your exam
				90)		*	
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- 10th Mark Sheet & Pass Certificate
- 12th Mark Sheet & Pass Certificate
- School Leaving / Transfer Certificate
- Birth Certificate
- ii) Medical Fitness Certificate
- iii) 10 passport size photograph
- iv) Cast Certificate (In case ST/SC/OBC candidates)
- v) Migration Certificate
- vi) Three self addressed stamped envelope.
- vii) Photo copy of Aadhar Card

## Applicable Post Basic B.Sc. & M.Sc. Nursing

- 1. All documents of G.N.M./B.Sc./P.B.B.S.:
- 2. Registration No.:
- 3. Work Experience:

From	. to
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Name of the organization:	Name of the organization:	
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.Place:

5. Research topic in Undergraduate Programme:


## **DECLARATION BY PARENT / GUARDIAN**

liss / Mrs. / Mris my daughter / son / ward & that she will abide
y the rules & regulations of this institution. I understand that in the event of her violating any one or more of these
ules. She will be terminated

I do undertake the full responsibility to make all financial arrangement in remitting her bills at admission & by the 10th of every month thereafter. Failure to do so you discounting my daughter / ward from the classes & cafeteria.

Signature	of the	parent/	guardian
Date :			

Signature of applicant