

PROFORMA- SHIMLA NURSING COLLEGE- SHIMLA - HP

APPLICATION FORM FOR 3 YEAR GNM TRAINING COURSE FOR THE ACADEMIC SESSION 20__-__.

- 1. **Name of the applicant** (in capital letters).....
- 2. **Father's Name**..... **Mother's Name**.....
- 3. **Date of Birth** (as per matriculation certificate)..... (Attested copy to be attached)
- 4. **Age as on 31.12.**__ Years.....Months..... Days.....
- 5. **State of Bonafide/ Domicile:** **Adhar Card No.**
- 6. **Address for Correspondence**.....
.....
- 7. **Permanent Address**
.....
- 8. **Whatsapp Mobile Number and email id for contact:** **Parent's Mobile No.**.....
Email id
- 9. **Percentage of marks in 10+2 examination :** (Attested copy to be attached)
Name of Board:
Roll No.:
Year of Passing:
Subjects:

Total Marks	Marks Obtained	(% age)
- 10. **10+2 Passed in (Tick) Group:** (1) Medical (2) Non Medical (3) Commerce (4) Arts (5) Others
- 11. (i) **Category (General/SC/ST/OBC)** (Photocopy to be attached).....
(ii) Sub- Category (EWS, IRDP, Ex- Serviceman/ Ward of Ex-Serviceman, Physically handicapped, Children/ Grant Children of Freedom Fighter Certificate (issued by the competent authority -Photocopy to be attached)
- 12. **Character and Bonafide Certificate** issued by the Tehsildar / Executive Magistrate (Photocopy to be attached)
- 13. **Online Fee Submission** (Through SBI Collect) attach the fee deposit receipt with application form.
- 14. **Marital status**.....

Affix here latest original passport size self-attested photograph

DECLARATION:

I, the above named applicant do hereby certify that the above information is true to the best of my knowledge and no part of it is false and nothing has been concealed there from. It is further declared that for any kinds of wrong information etc. my candidature will be liable to be rejected straightway.

Date:

Signature of Applicant

Place: