



13.Particulars of Marks obtained at various examinations.

Examination	Board University	Year of passing	Attempts	Total marks obtained	Out of	Percentage
I Year						
II Year						
III Year						
IV Year						

14.No. of year of experience :    
 Year Months

15.Details of the Work experience Starting from the recent one

S.no	Name and place of the organization	Period		Designation and Nature of duties	Total experience		
		From	To				

16.Registered under which state council

17.State Registration Number:

18.Whether admitted to any other PG course in any subject at any other institute. If yes, Give details: .....

19.Declaration:

- a) I hereby declare that the above information is true and complete to the best of my knowledge. I am aware that, if any information herein is found to be incorrect or incomplete, my application form will be rejected / admission will be cancelled.
- b) If admitted to National Heart Post graduate Nursing institute I shall abide by its Rules And Regulations.

Signature of the candidate

Date:  
Place:

**List of self-attested copies of the following certificates to be submitted:**

1. Higher secondary certificate.
2. Senior secondary certificate.
3. B.Sc Nursing certificates (All 4 year marksheets).  
OR  
P.Bsc Bursing certificates (All 2 year marksheets).
4. Degree certificate.
5. Any other qualification, if any.
6. Experience letter.
7. Nursing council registration.
8. Transcript.
9. Migration Certificate.