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PUSKAR SCHOOL OF NURSING TRAINING

Hanuman Mandir Road (Near South Railway Colony) Krishnapuri, Road No. 1 Chutia,
Ranchi — 834001 Jharkhand, Tel No — 0651-2460123, 07367956505, 09471552675
E-mail - Info@puskargroup.com Website - www.puskargroup.com

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Documents Required

- 1. Student Photograph.
- 2. JCNECEB Result Details
- 3. JCNECEB Counseling Details
- 4. Matric Original Certificate.
- 5. Intermediate original Certificate
- 6. Cast Certificate
- 7. Aadhaar Photo copy

APPLICATION FORM

ANM - Auxiliary Nursing & Midwifery

GNM - General Nursing & Midwifery

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(Que	alified Jharkhand	l Combined Nursi	ng Entra	nc Compet	itive Examin	ation Board	Details)
Sl.No	EXAMINATION CENTER	REGISTRATION No	YEAR OF PASSING	ROLL No	CML RANK	TOTAL MARKS OBTAIN	CAT RANK
1.							
Ple	ease read the In	structions on th	ne rever	se before :	filling & su	bmitting	
1.	Name of Applicant				IEDI		
2.	Male / Female	3. Place of Birt	h	4. D	ate of Birth		
5.	Nationality	6. Mother Ton	gue		7. Religion		
8.	Category (Tick which	never applicable)	ST	sc	OBC Ge	eneral	
9.	Father's Name						
10.	Mother's Name						
11.	Occupation						
12.	Permanent Addres	ss		•••••			
	E-mail		Tel. No.	& WhatsApp	No		
13.	Communication A	Address					
	E-mail		Tel. No.	& WhatsApp	No		
14.	Name and place of th	e last College attende	d			•••••	
15. Medium of Instruction in the previous institution							
16. Qualifying exam completed							
17. l	Percentage % : X	XII		•••••			
18. List of enclosure: → Original Certificate have to submit at the time of admission. (Secondary School (Class 10th) & Higher Secondary School (Class 10th + 2) Admit Card, Marks Sheet, Provisional or Original Certificate and Migration Certificate, Caste Certificate, Aadhaar Card							
Puskar School of Nursing Training offers its programmes, affiliated and recognised by Indian Nursing Council, New Delhi & Jharkhand Nurses Registration Council. For Office Use Only							
Cr. N	Vo	Date		Date	of Admission		
Adm	itted to				Condition		
Signa	ature of the Admissi	on in-charge					

IMPORTANT INSTRUCTIONS

(Please read the instructions carefully before filling up)

- (a) The form should be complete in every aspect.
- (b) The form duly completed in all respects and supported by all documents should be submitted to the Principal of the School only.
- (c) **The form should be accompanied by** Eight sets of each certificate sets of the following Xerox (Photo Copy) have to submit at the time of admission.

 (Secondary School (Class 10th) & Higher Secondary School (Class 10th + 2) 1.Admit Card, 2.Marks Sheet, 3.Provisional or Original Certificate 4.Migration Certificate, 5.Caste Certificate, 6.Aadhaar Card, 7.Passport size photo Colored (10 pc.).

 ***(Xerox and Photo Copy must have to Clear Visible.)

DECLARATION BY APPLICANT

- (a) I declare that the entries made above by me in the form are correct to the best of my knowledge. I am aware that if any of the entries is found to be incorrect, my admission is liable to be cancelled.
- (b) I undertake to abide by the rules and regulations of the School in force from time to time and to submit myself to the disciplinary jurisdiction of the School Management, President/ Chairman and other authorities of the School.

DECLARATION BY PARENTS/GUARDIAN

- I am in harmony with purpose and objects of Puskar School of Nursing Training, Ranchi and its rules and regulations. I desire that my ward receives the full benefits of education at the Puskar School of Nursing Training.
- I have read the rules and regulations of the Puskar School of Nursing Training and I Promise to abide by them. If my ward's conduct at the school is not in consonance with the aims and philosophy of the school has the right to penalize, suspend or even expel my ward from the school at any time.
- Agree to pay all the dues on scheduled times.

Date

the right to refuse any appl	ication without having to assign rea	nt. The management of the school reserves ason for his action. The school reserves the ner provisions of requirements at anytime,
 Date		 Student's Signature
Dute		Student's Signature

Parent's Signature