



EMMANUEL HOSPITAL ASSOCIATION
SCHOOL OF NURSING, DUNCAN HOSPITAL RAXAUL
 (Recognized by The Indian Nursing Council)

Application No:

Roll No.

Category:	Sponsored <input type="checkbox"/>	School of Nursing, Duncan Hospital Raxaul Dist. East Champaran Bihar 845305
	General <input type="checkbox"/>	

APPLICATION FOR ADMISSION TO GNM TRAINING 2020

INSTRUCTIONS TO THE CANDIDATE

1. Read all the instructions before filling the application
2. Please make sure you are eligible to apply before sending application.
3. This form should be filled legibly with applicant's own handwriting.
4. Insert NIL, if there is no answer to question/ Tick wherever applicable
5. Xerox copies of Mark Certificates and other testimonials duly attested should be attached (originals should be produced at the time of interview) **please refer prospectus**
6. Incomplete application forms will be summarily rejected
7. PLEASE QUOTE APPLICATION NUMBER IN ALL COMMUNICATIONS
8. Last date for submission of filled Application form – 31.07.2020

Affix
Recent
passport size
Coloured
photograph

GENERAL INFORMATION

1. Name (in CAPITAL letters as entered in 10th Certificate)

2. Address for Communication

Pin Code Phone Mobile

Email Fax

3. Permanent Address

4. Date of Birth Age

5. Marital Status Sex

6. Height Weight

Nationality Domicile State

7. Information about Parents

DETAILS	FATHER/ GUARDIAN	MOTHER
Name		
Occupation		
Designation		
Annual Income	Rs.	Rs.

If married, number of children Their ages

8. Applicant's Educational Qualification

9. Subjects taken in High School and Intermediate (+2) studies:

High School year

Intermediate (+2) year.....

Subjects	Marks %

Subjects	Marks %

10. Extracurricular activities: - (SPORTS, NCC, SCOUTS, NSS, MUSIC, ANY OTHER)

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.....

11. Have you done any other nurses training before? If so, give details

.....
.....

12. Name of the person who meets the financial requirements for your training

(If you are sponsored, a letter from the sponsoring body should be sent along with this application)

13. OTHER DETAILS: -

a. Mother Tongue:

b. Other Language(s) Known speak):

Read..... (write) :

c. Religion:

If, Christian, Denomination

d. Name & Address of your Pastor / Elder

14. Have you had any major illness in the past?.....

If yes, give details

.....

15. After completion of your training you will be posted in any one of the EHA hospitals to complete your service commitment of two years ,Do you agree to this?

.....

16. Why do you want to become a Nurse? (Write briefly)

.....
.....

17. Reasons for applying to this Nursing School:

.....
.....

18. Choose the (examination) Pre-Nursing Test centre

19. Applicants should write the Pre-Nursing Test (PNT) on August 18, 2020 in any one of the following centre.

The name of the centers are as follows:

1. School of Nursing, Duncan Hospital, Raxaul, Bihar Ph.6255-224145, 220653
2. School of Nursing, TSS Hospital Patna Bihar Ph. 612-2311065, 7463946353
3. School of Nursing Christian Hospital Chhatarpur, Madhya Pradesh Ph. 07682-249317
4. School of Nursing, SDA Hospital, Ranchi, Jharkhand, Ph-0651-6456385
5. School of Nursing, Dhamtari Christian Hospital, Dhamtari, Chhattisgarh, ph 07722-240573
6. School of Nursing, Christian Hospital, Sanyogitaganj, Indore. M.P-0731-2700196
7. School of Nursing, Christian hospital, Berharpur, Dist. Ganjam, Orissa Ph: 0680-2216950
8. Mid India Board of Education, NCCI Campus Nagpur Maharashtra Ph.712-2543040

The **results of the PNT** will be notified after **2- 3 weeks by post, mail or Phone.**

The selected students will be called for an interview in the School of Nursing, Duncan Hospital Raxaul on first or second week of September 2020.

20. Candidates may apply and write Pre -Nursing Test even if they do not yet have their +2 Results (12th passed provisional certificate must be produced during interview)
21. PNT Registration fee for Rs.400 and Rs.250 for prospectus should be sent along with the application form by Demand Draft made in favor of **THE DUNCAN HOSPITAL RAXAUL,**
Payable at RAXAUL/ **CASH PAYMENT**
22. Kindly fill the Hall ticket with affixed recent passport size colored photograph and bring it to the Entrance examination centre. (Please send us your email ID in the email ID given schooldhr@gmail.com we will send your Hall ticket)

(PLEASE DO NOT SEND HALL TICKET WITH YOUR APPLICATION)

I hereby solemnly and sincerely affirm that I have read and fully understood the procedures for applying General nursing and midwifery training course of three years.

Signature of Student

Signature of Parent/Guardian

Date:

Date:

FOR OFFICE USE ONLY

Form issued on Received back on

Application Complete – Yes / No Selected for Interview – Yes / No

Certificates and Testimonials verified – Yes/ No Medical fitness Remarks

Result of Interview – Selected / Not Selected / Waiting List