



ओ३म्

ओ३म् भूर्भुवः स्वः तत्त्वसवितुर्वरेण्यं,

भर्गो देवस्य धीमहि, धियो यो नः प्रचोदयात्।



# माता गायत्री देवी नर्सिंग स्कूल

गंज दारानगर, बिजनौर

## Application Form

(Session 20 -20 )



1. Name of the candidate .....  
(in full block letters)
2. (A) Father's Name .....  
(B) Mother's Name .....
3. Date of Birth .....
4. Address for .....  
Correspondence ..... Pin Code.....  
Tel./Mobile No..... E-mail .....
5. Permanent Address ..... Pin Code.....  
Tel./Mobile No..... E-mail .....

Please tick (✓) wherever applicable

- Female  Male  Married  Single  Indian  NRI  Foreigner  
 Female  ST  OBC  General  Minority

6. Details of Examination Passed/Appeared

Examination	School/ College	Board/ University	Year of Passing	Subjects	Percentage of Marks
10th (Secondary)					
12th (Sr. Secondary)					
Qualifying Degree (Graduation or its Equivalent)					
Post-Graduate Degree					
Professional Degree					
Other Qualifications (if any)					

Note : Please attach attested photocopies of the mark-sheets of the qualifying examination(s)

- 7. Work Experience (if any) .....
- (i) Name of the Organization .....
- (ii) Designation .....
- (iii) Duration .....
- 8. Strengths & Weaknesses .....
- 9. Achievements .....
- 10. Career Objective .....
- 11. Extra-Curricular Activities .....
- 12. Hobby .....

**UNDERTAKING**

I solemnly affirm that the information furnished is true and correct in all respects. I have not concealed any information. I realize that if any information furnished herein is found to be incorrect or untrue, I shall be liable to criminal prosecution and also forgo my claim to admission to the school. Further, that my candidature for the examination/admission to the programme is liable to be cancelled at any stage. I agree to abide by the rules and regulations of the college/trust.

Date

Signature of Parent/Guardian

Signature of Candidate