



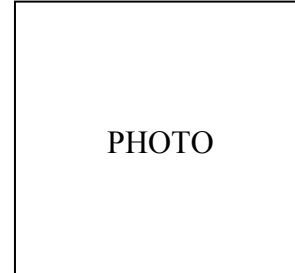
(M.Sc.)

S.D.P.S COLLEGE OF NURSING
Khandwa Road, Opp Bilawali Tank, Indore-7 (M.P.)

Form No.....(official)

Note: Please fill this form and
Send us to college address

(To be filled in by the candidate
in her own handwriting, only girl candidate can apply.)



Course Applied : _____

1.CANDIDATE'S FULL NAME (In Block Letter) :

2 .Father's name & Occupation :

3. Mother's Name & Occupation :

4. ST/ SC/ OBC :

5. Full Permanent Address :

6. Present Address : _____

Contact No. : _____

7. Date & Place of Birth :

8. Give below particulars of all Academic and Technical / Professional Examinations passed and Degree / Diploma obtained.

Academic Qualification	Professional Qualification	Year of Passing	Year of Experience	If any Academic Distinction/ Scholarship	Enclosures

9. Give the names and addresses of two persons as references.

1. _____

2. _____

10. **Note :**
- (1) Applicants may specify additional qualification or experience in one Blank paper and attach the same to this form.
 - (2) Please attach attested copies of the certificates and testimonials. Originals should not be sent.
 - (3) Students are expected to produce original certificates at the time of Interview.

11. Declaration to be signed by the candidate:-

“I hereby declare that the entries in this form are true to the best of my knowledge And belief.”

Place:.....

Date :.....

Signature of Candidate