****Moimuna Nursing Institute

Passport Size

Photograph

**Application From for Admission**

**Session:** .........................

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Govt.** **Admission Test Position** |  |  | **Test Center** |  |  | **Score** |  | **Roll No** |  |

Diploma In Nursing Science & Midwifery Course -3 Years

**1. Personal Information:**

Name (English in Block Letter) : ..................................................................................................

bvg (evsjv) : ...................................................................................................

Date of Birth : ......................................... Place of Birth : ...............................................................

Blood Group : .................................. Sex (Tick) : Male Female

Mobile : ........................................... Religion :.........................................

National ID No:........................................... Height (incm) : .........................................

Father’s Name : ...........................................................................................................................

(evsjv) : ...........................................................................................................................

Mother’s Name :............................................................................................................................

(evsjv) : ............................................................................................................................

Father’s Occupation :................................................. Annual Income:......................................

Mother’s Occupation : ................................................ Annual Income: ......................................

**2. Permanent Address:**

Vill : ..................................................... Post: ....................................Postal Code: ...........................

PS/Upazilla: .............................................. District:.........................................................................

**3. Mailing Address:**

Vill: ............................................................ Post: ....................................Postal Code: ...........................

PS/Upazilla:.............................................. District:.........................................................................

**4. Emergency Contact:**

Name & Address: .....................................................................................................................................

Relationship:........................................................................................Mobile:.......................................

**5. Educational Qualification:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of the Examination** | **Roll** | **Board** | **GPA** | **Year of the Passing** |
| S.S. C/ Equivalent |  |  |  |  |
| H.S.C/ Equivalent |  |  |  |  |
| Name of institution (HSC) |  | | | |
| Name of institution (SSC) |  | | | |

6. The following documents are required to be attached with the application in original.

a) S.S.C/Equivalent Certificate & Marks Sheet.

b) H.S.C/Equivalent Certificate or Testimonial & Marks Sheet.

c) Citizenship Certificate.

d) Colour Photo pp size 4 copies, stamp size 4 copies.

e) National ID Card.

f) Birth certificate.

**Declaration:**

We do, hereby declare that we shall abide by the rules & regulations, Payment system, discipline of the college and law & order during the period of study in the college. To the best of our knowledge and believe the documents/information’s stated above are valid and true.

**N.B: Fees once paid are non refundable**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Signature of Guardian**  Date:........................... |  | **Signature of local Guardian**  Date:............................ |  | **Signature of Student**  Date:................................... |  |

**For official use only**

**Attached documents are checked & received**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sl. No** | **Name of the document** | **Original/Provisional/ Photocopy** | **Deposited/Non Deposited** | **Remarks** |
| 1 | S.S. C/ Equivalent Certificate |  |  |  |
| 2 | H.S.C/ Equivalent  Certificate/Testimonial |  |  |  |
| 3 | Citizenship Certificate/  Birth Certificate | Original |  |  |
| 4 | National ID Card |  |  |  |
| 5 | Photograph | PP size 4 copies, Stamp  size 4 copies. |  |  |

|  |  |  |
| --- | --- | --- |
| **Received by**  Date: ......./......./........... | **Checked & Compare by**  Date: ......./......./........... | **Principal**  Date: ......./......./........... |