

**Entires relating to name and address  
shall be written in BLOCK LETTERS**

1. Applicant's full Name .....
2. Father's Name .....
3. Husband's Name (if married) .....
4. State : Single/married .....
5. Date and place of birth.....  
(Attach coy of metric certificate)
6. Nationality .....
7. Postal address of permanent residence .....

Paste one Pasport size black & white photo duly attested by the Principal Tutor of her Training School.

8. (i) I took my training as a **NURSE/HEALTH VISITOR** in the .....  
.....(Name of the Hospital/School and place) for a period of .....  
.....years. I joined on .....20.....and completed training on .....20.....and passed examination held on .....20.....
- (ii) I took my training of a **MIDWIFE/AUXILIARY NURSE and MIDWIFE** in the (Name of Hospital/School and place).....for a period of ..... I joined on .....20.....and completed training on .....20.....and passed examination held in .....20.....

9. Name and address of the Principal Tutor and a Tutor whose certificate is appended to for moral charactor.

- 1)
- 2)

10. Passed the Punjab Nurses Registration Council.....  
qualifying examination for Nurse/Midwife/Auxiliary Nurse Midwife held in the month of .....20.....under Roll No.....

11. I hereby declare that I know of no circumstances reflecting my character or professional conduct which could rednder me ineligible for acceptance on the Register.

Signature of the Applicant

We certify that we are personally acquainted with .....  
D/o, W/o .....and a resident of .....  
.....We believe her to be a woman of good moral character. Her age as stated by her is .....She is at present employed as ..... Practising as .....  
She passed ..... Examination in .....

Signature of certifying authorities (i) Principal Tutor .....  
(ii) Tutor .....

Address .....  
Dated .....