

JAKH INSTITUTE OF NURSING

Recognized By HPNRC Shimla And

Indian Nursing Council Delhi

Application form for GNM

Application No:-

Date:-

Name of Student:-

Father's Name:-

Mother Name:-

Sex:-

Date of Birth:-

Place of Birth:-

Nationality:-

Religion:-

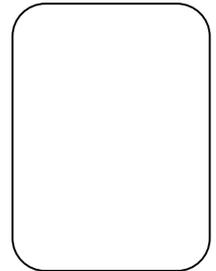
Father Occupation:-

Annual Income:-

Category SC/ST/OBC:-

Contact No. And Email Id:-

Permanent Address and Correspondence Address:-



Academic qualification-

Class	Subject	Board	Marks Obtain	Total Marks	%Age	Stream
10th						
12th						

Guardian Signature

Applicant Signature

Principal Signature