

# HARYANA NURSES AND NURSE-MIDWIVES COUNCIL

Plot No. 09, DHL Square, 4<sup>th</sup> floor, Sector-22, HSIIDC, IT Park, Panchkula

## REGISTRATION FORM

PASTE ONE  
PASSPORT SIZE  
PHOTO DULY  
ATTESTED BY THE  
PRINCIPAL TUTOR  
OF HER/HIS  
TRAINING SCHOOL /  
COLLEGE

(For Office Use Only)

Regn. No. \_\_\_\_\_

Dated \_\_\_\_\_

(Name and Address shall be written in **BLOCK LETTERS**)

1. Applicant's Full Name \_\_\_\_\_
2. Father's Name \_\_\_\_\_
3. Date of Birth (Attach attested copy of metric certificate) \_\_\_\_\_
4. Nationality \_\_\_\_\_
5. Postal Address of permanent residence \_\_\_\_\_  
\_\_\_\_\_
6. Mobile No. \_\_\_\_\_ Email ID: \_\_\_\_\_
7. My name be registered as a \_\_\_\_\_ under the Haryana Nurses and Nurse Midwives Act, 2017.
8. I took my training as a A.N.M. / G.N.M. / Post Basic B.Sc. Nursing / B.Sc. Nursing / M.Sc. Nursing / N.P.C.C. / Ph.D. Nursing name of School/College \_\_\_\_\_ for a period of \_\_\_\_\_ years. I joined in \_\_\_\_\_ and completed in \_\_\_\_\_.
9. I passed the Council/University \_\_\_\_\_ Nurses Registration Council qualifying examination in the month of \_\_\_\_\_ under Roll No. \_\_\_\_\_.
10. The Registration fee of Rs. \_\_\_\_\_ is sent by Bank Draft No. \_\_\_\_\_ dated \_\_\_\_\_ in the favour of the Registrar, Haryana Nurses and Nurse-Midwives Council.
11. I hereby declare that I know of no circumstances reflecting on my character or professional conduct which would render me ineligible for acceptance on the register.

Dated \_\_\_\_\_

Signature of applicant

### **THIS FORM MUST BE ATTESTED BY THE CONCERNED NURSING TRAINING SCHOOL/COLLEGE**

I certify that I am personally acquainted with \_\_\_\_\_

S/o / D/o \_\_\_\_\_ . He / She passed \_\_\_\_\_

examination held in \_\_\_\_\_.

Signature of certifying authorities:-

1) Principal Tutor \_\_\_\_\_

2) Tutor \_\_\_\_\_

Address of School/College \_\_\_\_\_

Dated \_\_\_\_\_

School /College Seal \_\_\_\_\_

**P.T.O.**

## IMPORTANT NOTICE

**(i) Registration fee with 18% GST is as under:-**

	<b>(Fee + GST = Total)</b>
(1) A.N.M.	1500+270 = 1770/-
(2) G.N.M.	1500+270 = 1770/-
(3) Post Basic Nursing	2000+360 = 2360/-
(4) B.Sc. Nursing	2000+360 = 2360/-
(5) M.Sc. Nursing	2000+ 360 = 2360/-
(6) N.P.C.C.	2000+360 = 2360/-
(7) Ph.D. Nursing	2000+360 = 2360/-

- (ii) Registration fee is not refundable whether the registration form is accepted or rejected.**
- (iii) A candidate trained in another State or Country must submit the original Registration Certificate of that State or Country concerned before his/her name can be accepted for registration along with two Photostat self attested copies.**
- (iv) A candidate must attach the Photostat self-attested copies of all mark sheets of A.N.M. / G.N.M. / Post Basic B.Sc. Nursing / B.Sc. Nursing / M.Sc. Nursing / N.P.C.C. / Ph.D. Nursing.**
- (v) A candidate must attach the Photostat self attested copy of degree/provisional degree for Post Basic B.Sc. Nursing / B.Sc. Nursing / M.Sc. Nursing / N.P.C.C. / Ph.D. Nursing registration.**
- (vi) A candidate must attach the Photostat self attested copy of Aadhar Card.**
- (vii) Two passport size photograph of the candidate must be attached with the registration form (one photograph attested & one photograph without attested.) Passport size photo requirement as follow:-**
- ◆ Photo against white background.
  - ◆ Straight face.
  - ◆ No Cap, No Mask, No Duppatta on head, No fashion goggles.
  - ◆ Regular spectacles are worn by the candidates are acceptable.