

To
The Principal
Fernandez School of Nursing
Stork Home - Annexe
Road No. 12, Banjara Hills,
Hyderabad - 500034, Telangana

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For any clarification, please contact: +91 80085 00598

APPLICATION FORM FOR POST BASIC DIPLOMA COURSES

Application No. _____

Name of the course opted (please tick)

- Post Basic Diploma in **Neonatal Nursing**
 Post Basic Diploma in **Nurse Practitioner in Midwifery**

Paste
Passport size
Photograph

NOTE: To be filled by the candidate

1. Name of the Candidate : _____
(in block letters)
2. Mother's Name : _____
3. Date of Birth : _____ Age _____
(as per SSC Certificate)
4. Religion : _____
5. Marital status : Single Married
6. Languages known : _____
7. RN & RM number : _____
8. Name of the Nursing Council : _____
9. Qualifications

S. No.	GNM/B.Sc.	Year of Passing	Percentage of Marks

10. Experience (in chronological order, starting from the most recent one).

S. No.	Name of the Institute	Work experience in labour room/ Neonatal ICU/ Paediatric ward.	Duration		Work experience in teaching	Duration	
			From	To		From	To

11. Total years of experience Clinical _____ Teaching _____

12. What motivated you to apply for Post Basic Diploma Course in Nurse Practitioner Midwifery/Neonatal Nursing.

13. Permanent Address _____

Phone _____ Email _____

14. Local Guardian Address (if any) _____

Phone _____ Email _____

The above information given by me is correct.

Signature of the Candidate _____

Date _____

Please tick, if you have the following:

- SSC
- Intermediate Certificate
- GNM Diploma/B.Sc. Nursing Degree
- RN & RM Certificates
- Memorandum of Marks of GNM/B.Sc. Nursing
- Transfer Certificate
- Bonafide/Study certificate GNM/B.Sc.
- Experience Certificate
- Aadhaar Card (photocopy)