



# Chhattisgarh Nurses Registration Council Raipur Chhattisgarh

(Old Nurses Hostel, D.K.S Parisar, Raipur, Chhattisgarh)  
(website:- [www.cgnrc.org](http://www.cgnrc.org), Email id – [snrc.cg@gmail.com](mailto:snrc.cg@gmail.com), phone:- 0771-2227600)



## APPLICATION FOR LICENSE VERIFICATION

(For Individual Applicant)

1. Name of Applicant:-.....
2. Father/Husband Name:-.....
3. Date of Birth:-.....
4. Live CGNRC Registration No:-.....

Attested Photo

**COURSE:** - A.N.M. ☐ G.N.M. ☐ B.Sc ☐ Pb.B.Sc. ☐ D.P.N. ☐  
M.Sc. ☐ PhD ☐

5. Name of Training Institute:-.....
6. Period of Training From.....to.....
7. Contact No. & Name of Principal/ Institute where studied:-.....  
.....
8. Address of Institute:-.....  
.....
9. Email Id of Institute:-.....
10. Online Payment Details (Attach 2 Copies):-.....
11. Provide name of council/state, if registration is transferred to another state on reciprocal basis:-.....
12. Name of International Organization/Agency/Ministry for Verification:- .....  
.....
13. Address of Organization/Agency/Ministry:-.....  
.....
14. Contact no. of International Organization/Agency/Ministry if available .....  
.....

**P.T.O.**

15. Email ID of International Organization/Agency/Ministry:-.....

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16. Type of Verification:-

License Verification ☐

Good standing Certificate ☐

17. If there is any specific Performa, please attach the form.....

18. Experience Details (kindly attach the copies)

<u>S.N.</u>	<u>ORGANIZATION</u>	<u>POST</u>	<u>PERIOD</u>
1			
2			
3			
4			
5			
6			

**MANDATORY TO ATTACH THE DOCUMENTS MENTIONED BELOW:-**

1. Medical Fitness Certificate Copy. (6 month validity from the date of issue)
2. Police Verification / Clearance Certificate.(6 month validity from the date of issue)
3. CGNRC Registration Certificate. (Front and Back side copy).
4. If Transferred, Attach the Live Registration Certificate of the registered council.
5. Course Completion / Transcript Copy.
6. All Nursing Mark Sheets Copies.
7. 10<sup>th</sup> & 12<sup>th</sup> Mark Sheets Copies.
8. Aadhar Card Copy / Passport (Front and Back side copy)
9. The sum of **Rs.5900=00** (including 18% GST) fees paid via online payment mode at [www.cgnrc.org](http://www.cgnrc.org). (Attach 2 copies of the Receipt)

**Declaration by the Applicant:-**

I, hereby declare that the above mentioned documents which I am submitting with this application form is correct & are true to my knowledge.

**Signature of Applicant/Proxy**

**Name:** - .....

**Relation (if proxy):-**.....

**Contact No:-**..... **Email ID:-**.....