	Official Use:- Reg. NoDt	5 Passport Size <u>Uniform</u> <u>Photo</u> duly Attested by the Principal
1	Name in full (Capital) Ku./Smt./Shri	
	D/O. W/O. S/OSingle/Married/Window/Separated	
2	Date of BirthPhone/Mob. No	
3	Permanent Address in full	
4	Present Address in full	
5	Education Qualification A.N.M. G.N.M. B.Sc P.B. B.Sc D.P.N. M.Sc	
6 7	ReligionCaste & Category Name of Training Institution	
8 9	Period of Training From DDMMYYYYTo DDMMYYYY completion of course. Name of Examination Council/University from which qualified	
10	Registration required as PhD/ M.Sc./D.P.N./PB.B.Sc./B.Sc./G.N.M./Sr.Midwife/A.N.M./Health visite	
11	Date of remitting fee by <u>SBI Collect reference No. DU</u> DateDate.	
12	Aadhar Card Number of Applicant.	
Decla	ration of the Applicant :-	
	I hereby declare that information given above is true to the best of my knowledge and that there are no in sional conduct against me that could render me ineligible for registration as Registered Nurse / Registered NHV with Chhattisgarh Nurses Registration Council, Raipur.	

Place	Signature of Applicant
Date	Name of Applicant

Certificate of Attestation

	I certify that I personally acquainted with Ku./Smt./Shri
	D/o. W/o. S/o whose photograph is attested & affixed on this form. He/She
	undertook the program of nursing studies from the institution.
	He/She passed the / PhD/ M.Sc./D.P.N./B.Sc./A.N.M./G.N.M./ Sr. Midwife/ LHV/Health visitors/ Dai(b)
	Examination in the year and as per records, he/she bears a good moral character.
Place	Name of Principal
Date	Signature

Seal

Only For Reciprocal Registration / Other State Registration Certificate

Particulars regarding Registration with the Chhattisgarh Nurses Registration Council, Raipur for applying from any other Nursing Council to be filled mandatorily :-

(a) Name of the Nursing Registration Council with which registered already

- (b) Registration No. RN/RM
- (c) Date of Registration
- (d) Registration required as PhD/ M.Sc./D.P.N./PB.B.Sc./B.Sc./G.N.M./Sr. Midwife/A.N.M./Health visitors/ Dai

I hereby declare that information given above is true to the best of my knowledge and that there are no instances of adverse professional conduct against me that could render me ineligible for registration as Registered nurse / Registered midwife / MPHW (F) / LHV with Chhattisgarh Nurses Registration Council

Place

Signature of Applicant

Date

Name of Applicant

Annexure:- (DOCUMENTS TO BE SUBMITTED MANDATORY WITH THE APPLICATION FOR REGISTRATION)

- (a) M.Sc. Nursing (1st & 2nd year mark sheet, Provisional degree certificate, Course completion certificate, Domicile certificate, 10th &12th mark sheet copies- All documents Attested)
- (b) B.Sc. Nursing (1st to 4th year mark sheet, Provisional degree certificate, Course completion certificate, Domicile certificate, 10th &12th mark sheet copies- All documents Attested)
- (c) Post Basic B.Sc. Nursing (1st to 2nd year mark sheet, Provisional degree certificate, Course completion certificate, Domicile certificate, 10th &12th mark sheet copies- All documents Attested)
- (d) Diploma in General Nursing (1st to 3rd + internship mark sheet if required, Course completion certificate, Domicile certificate, 10th &12th mark sheet copies- All documents Attested)
- (e) Qualification Certificate of auxiliary nurse-Midwife (revise) (1st & 2nd year mark sheet, domicile certificate, 10th &12th mark sheet copies- All documents Attested)
- (f) Affidavit of Declaration in Rs.50 /- Stamp Paper for Other State Registered Applicants (Reciprocal Registration)
- **Note:-** 1. The form must be forwarded by the Principal of training centre after verification of the training period under his/her signature (As per Performa in the front page.) The period of training must be completed as per Indian Nursing Council norms in each case otherwise form will be cancelled.
 - 2. Each application form must be accompanied by 5 passport size photographs in uniform of the applicant duly attested by Principal, the photo should pasted on the form.
 - 3. The fee amount is directly paid to the online payment mode, for more details visit our website <u>www.cgnrc.org</u>

REGISTRATION FEES INCLUDING	<u> 331 (18%)</u>
l. Ph.D	→ Rs. 5900
. M.Sc. Nursing	→ Rs. 5900
3. Post Basic B.Sc. —	→ Rs. 3540
I. B.Sc. Nursing	→ Rs. 2360
5. Diploma in Psychiatric Nursing —	→ Rs. 1770
6. General Nursing & Midwifery (including Diploma Certificate)	 Rs. 1770
7. Auxiliary Nurses - Midwifery	Rs. 1180

	For Office Use Only		
Application Checked by			
Registration fee paid Vide receipt No	D	ate///	
Registration Number Allotted			
Date			
Place			
		Signature of Registrar	