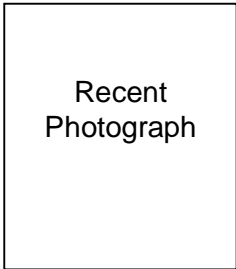


SAINIK SCHOOL BHUBANESWAR

APPLICATION FOR THE POST OF NURSING ASSISTANT

1. Name of Applicant (in CAPITAL Letter) :
2. Father's/Husband's Name:
3. (a) Date of Birth:

D	D	M	M	Y	Y
- (b) Age as on **08 Jun 2019** : YearsMonths Days
4. Sex: 5. Marital Status:
6. Nationality: 7. Religion:
8. Category (GEN / SC / ST / OBC / Ex-Serviceman) :
9. Aadhar No.
10. Present Address :
-
-
-
- Mob No:
- Email Id:
11. Permanent Address :
-
-
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12. Educational Qualification:

Class	Medium of Instruction	Subject studied		Month & Year of Completion	Name of School/ College	University	% in Main Subject	Division
		Main	Ancillary					
10 th								
12 th								
Graduation								
Post Graduation								
Nursing Diploma								
Nursing Degree								
Any Other								

13. Experience / Present Occupation:

Ser	Name of Institution and Address	Appointment (s) Held	Period of Service			Organization	Nature of Appointment (Temp/Adhoc/Permanent)	Salary Drawn (all Incl) per month (`)
			From (MM/YY)	To (MM/YY)	Total (MM/YY)			

14. Proficiency in Computer:

15. Proficiency in Co-curricular Activities:-

Ser	Games/ Co-curricular	Level played				Remarks
		School/Zonal/Regional	College	University	State	

16. Details of in-service training attended (if any):

17. NCC: (a) Certificate obtained- A/B/C

(b) Camps attended:

18. Hobbies:

19. Application fee (Demand Draft only) **in favour of Principal, Sainik School Bhubaneswar** payable at Bhubaneswar.

Note: Candidate should write their Name, Post applied on the reverse side of Demand Draft

DD No and Date:

Amount: ` 400/- (` 200/- for SC/ST)

Drawn on:

20. Any other relevant information:

DECLARATION

I hereby solemnly declare that the above information is correct to the best of my knowledge and nothing has been concealed and distorted. If at any time, I am found to have concealed any material information; my appointment shall be liable to be summarily rejected.

Place:

Signature of Candidate

Date :