

Form #. _____

**College of Nursing
Pakistan Institute of Medical Sciences
G-8/3, Islamabad**



Application form for Admission in :- _____

Year:- _____

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This form should be completed in full , bold letters and submitted through proper channel to the Principal, College of Nursing, PIMS G-8/3, Islamabad. The application should enclose attested photo copies of Matriculation, Nursing, Midwifery and other professional certificates and two testimonials of professional ability.

Space for
Photograph

Full Name _____ Name of Father/Husband _____

Mailing Address _____

Date & Place of Birth _____ Domicile _____

Religion _____ Nationality _____ National Identity Card # _____

Marital Status:- Single Married Widow Divorced

Name of Father / Husband / Guardian _____

Address _____

Person to be notified in emergency _____

Relationship , Address and Telephone # _____

EDUCATION QUALIFICATION

Name of School / College	Place	Year	Qualification Obtained with Grade
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PROFESSIONAL QUALIFICATION

Name of School	Place	Year	Qualification Obtained with Grade
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

REGISTRATION

	PNC Registration #.	Date of Registration
General Nursing, Midwifery & others.	_____	_____

PROFESSIONAL EXPERIENCE {list of all Posts held since Registration with PNC }

Post Held	Name of Institute & City	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____

REFEREE

Name of two referees, one of them should be a Nursing Superintendent, or Principal of your School.

1. _____ 2. _____
- _____

UNDERTAKING

I hereby certify that the above information is based on truth.

Date:- _____

Signature of applicant