Application Form for the M.Sc Nursing Course 2025-2026			
			Recent passport Size Photograph
1	Name of Candidate		
2	Father's/Guardian's Name		
3	Date of Birth		
4	Gender		
5	Category		
6	Mobile Number		
7	Email ID		
8	Correspondence Address where admit card will be dispatched		
9	Course Completed (Tick the necessary option)	B.Sc Nursing	Post Basic Nursing
10	Registered with Nursing Council (Tick the necessary option)	Yes	Applied For
	If Yes-	Council	
		Registration Number	
	If Applied for	Council	
11	1 Year Experience (Post B.Sc/Post Basic) (Tick the necessary option)	Yes	No
	If Yes Details of Exeprience to be attached with the application form.		

12	Are you employed in any Government Sector? (Tick the necessary option)	Yes	No
		Details of No Objection Certificate to be attached with the application form.	
13	Are you a NEIGRIHMS Alumni ? (Tick the necessary option)	Yes	No
14	Are you NEIGRIHMS Staff ? (Tick the necessary option)	Yes	No

## Declaration

I hereby declare that I am an Indian National and particulars given above are correct to the best of knowledge and belief. In the event any information furnished is proved to be incorrect/false before or after the admission or Govt. of India cancel my candidature or selection or admission as the case may be, the Institute or the Govt. of India may take action against me as deemed fit. I further undertake to submit all the original documents for verification at the time of Counseling and during the admission process as per rules, failing which my selection/admission against any seat shall be forfeited

Signature of the Candidate