Schedule – I (Relating to sub-rule (1) of 15) Application Form

A recent passport size photograph

Nepal Nursing Council Kathmandu

I hereby submit this application for the registration of name in the Registration book of Nepal Nursing Council pursuant to Section 16 of Nepal Nursing Council Act, 1996, (2052) and rule 15 of Nepal Nursing Council Regulation 1996 (2053).

1.	Full Name of the applicant (In block letters)
2.	Father's Name
3.	Spouse's Name (If married)
4.	Date of birth
5.	Permanent Address:
	Country
	Zone/ Province District
	Village Development Committee/ Muncipality
	Ward No Tole Village
	House No Phone No Email/ Fax
6.	Temporary Address:
	Country
	Zone/ Province District
	Village Development Committee/ Muncipality
	Ward No Tole Village
	House No Phone No Email/ Fax
7.	Corresponding Address:
8.	Presently Employed Health Institution (If employed)
	Name
	Addrress
	Phone No
9.	Registration No. Of home country (registered as nursing professional):

10. Details of the educational qualification

S.N.	Academic Degree	Institution	Year	Division	Country	Remarks
1.						
2.						
3.						
4.						
5.						

11. Professional Qualification

S.N.	Academic Degree	Institution	Year	Division	Country	Remarks
1.						
2.						
3.						
4.						
5.						

12. Details about te Training (Professional only)

S.N.	Training	Institution	Duration	Remarks
1.				
2.				
3.				
4.				
5.				

All the facts mentioned above are correct and true	, if proved	to be	false I	shall	bear	the
responsibilites according to law.						

Applicant's Signature
Full Name
Date

Note: The applicant shall have to attach three copies of passport size photographs, citizenship certificates, original and attested duplicate copies (two copies) of the educational degree with the application as mentioned. Applicants are required to enclose name registration certificate of their home country as a nursing professional.