

# JHARKHAND NURSES REGISTRATION COUNCIL, RANCHI

## SUMMARY SHEET

CERTIFICATE OF TRAINING AND RECOMMENDATION FOR CANDIDATES APPEARING AT THE

1 <sup>st</sup> Year GNM	2 <sup>nd</sup> Year GNM	3 <sup>rd</sup> Year GNM	Auxiliary Nurse Midwifery 1 <sup>st</sup> Year	Auxiliary Nurse Midwifery 2 <sup>nd</sup> Year
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We forward herewith Application of forms of the under mentioned candidates for appearing in ensuing examination to be held in the month of .....year..... and certify that the particulars given in their examination Applications are complete and true.

Sl. No	Name of Candidate	Date of Admission	Leave Total Availed	Total Training Period Exclusive of leave up to Written Examination			Subject(s) of Examination	Date Of Reliving	Remarks	Academic Certificate Verified & Found Correct Matric & Inter
				Year	Month	Days				

The above mentioned candidates have attend the minimum number of lecture/clinical and demonstrations in the subject of examination and have attended Classes/Clinical/Rural Training as laid down in the syllabus and in the rules. The character and general conduct of each is satisfactory and they all have our permission to appear for the ensuing examination.

SIGNATURE OF PRINCIPAL/ TUTOR INCHARGE

NURSING SUPRINTENDENT

DIRECTOR / SUPRINTENDENT

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