

**www.hpnc.orgOFFICE: - 0177-2814320.**

**HIMACHAL PRADESH NURSES REGISTRATION COUNCIL, PRIYADARSHINI APARTMENT BOTH VILLA LODGE, NEAR GOVT. DENTAL COLLEGE BUILDING, IGMC, SANJAULI ROAD, SHIMLA-1.**

**APPLICATION FORM FOR THE REGISTRATION OF, P.B.B.SC NURSING / M.SC NURSING.**

To,

The Registrar,

H.P. Nurses Registration Council,

IGMC, Shimla-171001,



Madam,

It is requested that my name be registered under Act. HPNRC 15 of 1978 with the H.P. Nurses Registration Council as a P.B.B.Sc Nursing/ M.SC Nursing duly completed necessary documents along with account payees through **Chalan SlipSr.** **No.**.....ForRs.....is enclosed as registration fee, deposited on dated.....

Yours Faithfully,

Signature.....

Name of the applicant.....

Address.....

.....

Cont no. of the candidate.....

**NOTE: - Candidate should be Present personally at the time of Registration from 10 A.M. to 3 P.M. Positively along with all original required documents only twice in a week i.e. TUESDAY&FRIDAY . Documents submission timing 10:00 am to 12:00 O'clock.**

P.T.O.

**FILL UP THE DETAIL:-**

1. Applicant's Full Name (In Block Letters).....
2. Father's Name.....
3. Marital Status.....Single/ Married/ Widow.....
4. Name of Husband (If Married).....
5. Date of Birth/ Place of Birth.....
6. Nationality.....
7. Postal Address of Permanent Residence.....  
.....
8. I took training of P.Hd./P.B.B.Sc Nursing. / M.SC Nursing name of Hospital/Institutions/School.....  
.....  
For a period of.....year.....Months.....  
From.....to.....and qualified the examination in the year.....

I hereby declare that (i) the information given above is true and (ii) I know of no circumstances reflecting my character of professional conduct which could

Date: - .....

Place: - .....

Signature of the Applicant

Certified that the information given above is true to the best of my knowledge. Ms./Mr. ....Daughter/Wife/Son.....underwent the training of.....At..... from.....to.....And duly qualified/successfully completed her training for final examination held in the month of .....Her Roll Number for the final examination was.....

Countersigned

C.M.O./S.M.O./M.S.  
Govt. Nursing School with Seal

Principal of Training  
Institute/Nursing School with Stamp

Director/Chairman/Vice-Principal  
Private Nursing School with Stamp

Date:-

Place:-

**NOTE: - Countersigned by the above mentioned authorities are mandatory for registration, Otherwise Registration no. as additional qualification will not be issued.**

[www.hpncr.org](http://www.hpncr.org)

Office:-0177-2814320

**REGISTRAR, H.P. NURSES REGISTRATION COUNCIL, PRIYADARSHINI APARTMENT BOTH VILLA LODGE, NEAR GOVT. DENTAL COLLEGE BUILDING, IGM, SANJAULI ROAD, SHIMLA-1.**

**The candidate must be attached the following documents (Photocopy) with the Application duly attested by the Gazetted officer/Self Attested for the Registration of P.B.B.Sc N & M.Sc N.**

**List of Documents requires for the registration of P.B.B.Sc N/M.Sc N. of Direct candidates.**

- Application form of HPNRC filled by the candidate and verified by the Training Institute Authority.
- Matriculation Certificate and 10+2 Certificates.
- Detail Marks Card of GNM and P.B.B.Sc Nursing / M.Sc Nursing.
- 3copies of Pass Port Size Photograph.
- BonafideHimachali as D/O for Unmarried Candidate.
- BonafideHimachali as W/O for Married Candidates
- No Objection Certificate from the Registrar of the Council/College.
- No Objection Certificate for the registration of Additional Qualification from the University.
- Verification Certificate from University.
- Registration certificate of Previous Council/State Council.
- Rs. 500/- as registration fees through chalan slip will be deposit only in SBI, Near HPNRC office.
- Character certificate from Training Institute.
- Relieving Certificate from Training Institute.
- CourseCompletionCertificatefrom Training Institute.
- Degree (Provisional/Final) from the University.
- Recognition letter of Indian Nursing Council for the training session.
- Aadhaar Card
- All Original Certificates for Verification.

**List of Documents requires for the registration of additional Qualification of In-Services Candidates.**

- Application form of HPNRC filled by the candidate and verified by the Training Institute Authority.
- Matriculation Certificate (for Age proof)
- Detail Marks Card of GNM and P.B.B.Sc Nursing / M.Sc Nursing.
- 3copies of Pass Port Size Photograph.
- Registration certificate of State Nursing Council, (R.N. & R.M.)
- Rs. 500/- as registration fees through chalan slip will be deposit only in SBI, Near HPNRC office.
- Character certificate from Training Institute/Department.
- Relieving Certificate from Training Institute.
- Course Completion Certificate from Training Institute.
- Degree (Provisional/Final) from the University.
- Aadhaar Card
- NOC from the Govt.
- Relieving Certificate from the department.

- Appointment Letter / Service Certificate.
- All Original Certificates for Verification.

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