

# West Bengal Nursing Council

FINAL EXAMINATION IN DIPLOMA IN SPECIALIZATION OF CARDIO-THORACIC NURSING

## APPLICATION

To  
The Registrar,  
West Bengal Nursing Council

Sir / Madam.

I request permission to present myself at the ensuing Final Examination in Diploma in Specialization of Cardio-Thoracic Nursing.

The Examination fee of Rs..... and Marksheet fee of Rs..... is forwarded herewith.

## CERTIFICATE

I certify that.....has been a pupil nurse in this institution for a period of .....months', viz. from the.....to the.....and that he / she has attended at least 75 percent of lectures and has got..... hours of Clinical Experience. In my opinion he / she is fit to appear in the Final Examination.

The.....200.....

( Signature of the Head of the Institution )  
with office seal

### Particulars to be filled in by the Candidate

1. Date of Admission.....
2. Student Registration Number .....
- (a) If passed any nursing / midwifery examination from any State Nursing Council, previously .....
- (b) If yes, registration number given on the Certificate/s.....

( Signature of the applicant in full )

### Particulars to be filled in by the Head of the Institution

1. Candidate's Name in full :.....
2. Candidate's Date of Birth :.....
3. Date of admission into the institution :.....
4. (a) If appeared in the examination previously :.....
- (b) The year of appearing :.....
5. Subject (s) in which passed :.....
6. Subject (s) in which appearing :.....

### FOR OFFICE USE ONLY

Received Rs.....(Rupees.....only)

Vide R / No.....dated.....

CASHIER  
WEST BENGAL NURSING COUNCIL