



Office of the West Bengal Nursing Council  
 "Purta Bhawan", Room No. 302, 3<sup>rd</sup> floor,  
 D.F. Block, Sector – I, Salt Lake City,  
 Kolkata – 700 091. ☎ (033) 2321 2059.  
 Email: wbnc\_22302059@ymail.com  
 Website: www.wbnc.in



No. 2532/488/NC

Date: 2/8/2023.

*From: Registrar, West Bengal Nursing Council.*

**NOTICE REGARDING STUDENT REGISTRATION OF SHORT TERM  
 COURSE (CVT / NEURO / PSYCHIATRIC / ONCOLOGY) JANUARY – 2023**

To

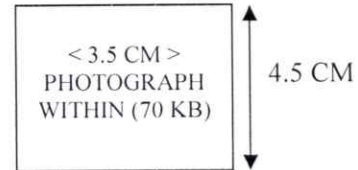
The PNO / Sr. Sister Tutor / Sister Tutor-in-Charge / Principal / Vice –Principal / Secretary  
 Nurses' Training Centre

The authorities of all recognized Nursing Institutions (Government and Non-Government) under West Bengal Nursing Council conducting **SHORT TERM COURSES** (i.e. **Cardio Vascular Thoracic Ng. / Psychiatric Ng. / Neuro Science Ng. / Neonatal Ng. / Oncology Ng.**) is hereby informed that the **ADMISSION OF STUDENTS** is **JANUARY** each year as per decision of the council.

The **LAST DATE OF ADMISSION** of students for the Short Term Course will be considered up to **31<sup>st</sup> January in each year**. The Student Registration forms with the list of **NOC from Parent Council** with all requisite documents must be **submitted within 11<sup>th</sup> August, 2023 in the mentioned date. The Student Registration Form can only be submitted on 04/08/2023, 09/08/2023 & 11/08/2023 on and from 12 P.M.** It may be extended up to another one week which will purely on the basis of consideration by the Council or otherwise Student Registration Forms & Admission will be treated as Cancelled for the particular academic session.

**STUDENT REGISTRATION FORMS ALONG WITH THE FOLLOWING ITEMS MUST BE SUBMITTED: -**

- Application form for student registration is hereby attached with this notice. Kindly take Print out and fill up the application form properly.
- ONE COLOUR **PASSPORT SIZE PHOTOGRAPH (3.5 C.M. X 4.5 C.M.)** WITH NAME OF CANDIDATE INDIVIDUAL WILL BE ATTACHED (NOT PASTED) WITH THE STUDENT REGISTRATION FORM/S DULY ATTESTED BY THE HEAD OF THE NURSING SCHOOLS IN THE BACKSIDE OF EACH PHOTOGRAPH.
- In a CD, scan copy of Photographs & Signature in the JPEG Format (**10 KB to 70 KB**) of all newly admitted students with their name must be submitted.



- **MADHYAMIK ADMIT CARD**
- **ORIGINAL COPY OF NOC FROM PARENT COUNCIL (EXCEPT WBNC REGD. CANDIDATE)**
- **CURRENT VALIDITY LETTER FOR 2022-2023 OF INC AND WBNC WITH COMPLIANCE REPORT.**
- **LIST OF NEWLY ADMITTED STUDENT MENTIONING:**  
 (A) NAME OF STUDENTS (B) FATHER'S / MOTHER'S NAME (C) DATE OF BIRTH (D) DATE OF JOINING (E) SIGNATURE OF STUDENT/S IN THE OFFICIAL LETTER PAD.
- The fees for the Student Registration is **Rs. 130/- per candidate** can be paid through **ONLINESBI COLLECT ANND ALSO IN DEMAND DRAFT, In favor of "West Bengal Nursing Council"**



*Batabyal*  
 REGISTRAR

WEST BENGAL NURSING COUNCIL

No. 38

Rs. 30/-

# WEST BENGAL NURSING COUNCIL

FORM OF APPLICATION FOR REGISTRATION AS STUDENT  
FOR DIPLOMA IN CARDIO-THORACIC NURSING / PSYCHIATRIC NURSING /  
NEONATAL NURSING / NEURO SCIENCE / CRITICAL CARE NURSING / ONCOLOGY NURSING

(To be filled by the Candidate only)

1. Name of the student (in full)  
(Block Lettrs)

2. Date of birth/Place of birth

Date	Month	Year	Birth / Place

3. Home Address (Permanent)  
with Pin Code

4. Father's / Husband's Name

5. Student Registration No.  
(Registered Nurse / Registered  
Midwife if Registered under W.B.N.C.)

6. Qualifying Registration No.

7. Nationality

8. Name of the Institution where  
admitted

9. Date of Admission

10. Educational Qualification

Signature of the applicant in full

I hereby certify that the above particulars are true to my knowledge.

Date .....20

Signature of the head of the institution  
(Office Seal)

N.B. One Xerox Copy of Admit Card of School Final / Madhyamik / H.S. Examinations and one Xerox Copy of Nursing Diploma & Registration certificate of your council should be attached with this form.

FOR OFFICE USE

Received Rs. ....vide R/No. ....Date.....

Cashier