



14. Has any experience in Midwifery : .....  
Or Nursing ? If so how long .....

Read

Write

Speak

- |          |       |       |
|----------|-------|-------|
| a) ..... | ..... | ..... |
| b) ..... | ..... | ..... |
| c) ..... | ..... | ..... |
| d) ..... | ..... | ..... |

16. Are you related to any staff of student of Mother Vannini Hospital, Kadakatla, Tadepalligudem, if so, please give the name and relationship.

1. ....  
.....  
2. ....  
.....

17. Reference :

#### DECLARATION OF THE CANDIDATE

I hereby state that I have completed this form myself and all the information given in this application form is true to the best of my knowledge. I have read and understood the prospectus and give an undertaking to abide by all the rules and regulations of the institution I also agree to follow the discipline of the college and promise not to indulge in any form of the discipline considered as such by the Institution.

Dated :

Signature of Parent/Guardian :

Signature of Candidate

Relationship :

Name & Address :

#### **IMPORTANT INSTRUCTIONS**

1. The application should be filled up in block letters in your own handwriting.
2. The application should be enclosed with the following attested copies of documents (Do not enclose originals) :

- a) Copy of S.S.C. & P.U.C. or its Equivalent Certificate
- b) Copies of other Educational Qualifications if any
- c) Copy of Transfer Certificate & Migration Certificate.
- d) Character Certificate from the Head of the Institution and parish priest.
- e) 2 recent passport size photographs.
- f) Medical fitness Certificate from a Registered Medical Practitioner.
- g) Copy of Certificate is SC/ST/ Backward Class.
- i) Self- addressed stamped envelopes (2) (Rs. 5/- Postal Stamp)
- j) Covering letter in the Candidate's own handwriting.
- k) Community Certificate in English

3. Incomplete Applications and Applications without attested copies mentioned above will not be considered.

4. Last date of submission: