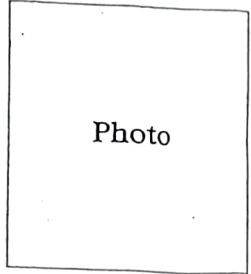




Rs. 100/-
SL No:



Application Form of Renewal Registration

1. Name of the Candidate _____ Dated.....
2. Husband/Father Name _____
3. NUID number _____
4. Valid from _____
5. Valid to _____
6. Registered Nurse No. & Dated _____
7. Type of Residential proof; Govt. Id/ Voter's Card/ Passport/Adhar Card/Pan Card _____
8. Service/Working Certificate/ Appointment Letter _____
9. Residential address of the applicant: Permanent _____

10. Residential address of the applicant: Temporary _____

11. Continuing nursing education: 30 hrs _____
12. Copy of seminars attendance certificates _____
13. Bank Draft No.Dated.....Rs.....

ADDRESS WHERE NUID CARD HAS TO BE SENT

Certificates: change of Name: Gazettee notification/marriage certificate

Change of address: residential electricity bill

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Signature of the Candidate