



**NATIONAL HEALTH MISSION**  
Department of Health & Family Welfare, Govt. of U.P



### Applicant Details

### District Preference Details

## Personal Details

Application Sequence No

**NHMMP1155436**

Candidate's Full Name

**KM KASIFA ZAKOOR**

Marital Status

**Unmarried**

Nationality

**Indian**

Father's Name

**ZAKOOR AHMAD**

Mother's Name

**ASIFA**

## Post Applied Details

Program Applied against

**DHS**

Position Applied

**Staff Nurse**

Post Code

**05**

Category

**UR**

Gender

**Female**

Date of Birth (DD-MM-YYYY) same as Matriculation/  
Secondary Certificate

**30/Jul/1998**

Age as on 12.12.2022

**24 Years 4 Months 13 Days**

Are you a domicile of Uttar Pradesh?

**Yes**

Are you Physically Handicapped (PH) (degree of disability 40% or above)?

**No**

Are you an Ex-Serviceman?

**No**

Are you Dependant of Freedom Fighter?

**No**

Examination Center Choice 1

**Bareilly**

Examination Center Choice 2

**Lucknow**

Examination Center Choice 3

**Aligarh**

## Contact Details

Mobile Number

**8979338595**

Email ID

**zakoorkashifa@gmail.com**

## Present Address

Address Line 1

**House No 450 WARD NO 6**

Address Line 2

**GRAM RAMZANPUR**

State

**Uttar Pradesh**

Country

**India**

District

**Budaun**

Pin Code

**243601**

## Permanent Address

Is Permanent Address same as Present Address?

**Yes**

Address Line 1

**House No 450 WARD NO 6**

Address Line 2

**GRAM RAMZANPUR**

State

**Uttar Pradesh**

Country

**India**

District

**Budaun**

Pin Code

**243601**

## Matriculation (10th) Details

Name of the Board/Council

**BOARD OF HIGH SCHOOL AND INTERMEDIATE EDUCATION U.P**

Subject Combination

**HINDI ENGLISH HOME SCIENCE SCIENCE SOCAIL SCIENCE DRAWING**

Institute Name

**N P GIRLS I C BADAUN**

Year Of Passing

**2015**

Percentage of Marks

**72**

## Intermediate (12th) Details

Name of the Board/Council

**BOARD OF HIGH SCHOOL AND INTERMEDIATE EDUCATION U.P**

Subject Combination

**GENERAL HINDI ENGLISH PHYSICS CHEMISTRY BIOLOGY SPORT AND PHY EDU**

Institute Name

**RAJARAM GIRLS I C BADAUN**

Year Of Passing

**2017**

Percentage of Marks

**67.8**

## Essential Qualification Details

Degree/Diploma

**Diploma**

Specialiation

**DIPLOMA IN GENERAL NURSING &  
MIDWIFERY**

Institute Name

**SRI RAM MURTI SMARAK SCHOOL OF NURSING BAREILLY**

Year Of Passing

**2021**

Percentage of Marks

**72.8**

REGISTRATION FROM UP NURSES &amp; MIDWIVES COUNCIL ?

**Yes**

KINDLY ENTER YOUR REGISTRATION NUMBER FROM UP NURSES &amp; MIDWIVES COUNCIL

**104499**

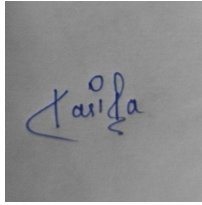
Have you been engaged for Covid Management as outsourced/temporary HR/contractual and worked at Public Health facilities and/or worked for Management of Covid through administration under Department of Medical Health and Medical Education in Uttar Pradesh?

**No**

## Document Upload and Payment



Photo



Signature

## Declaration

I hereby, solemnly declare that information provided by me in the form is true to the best of my knowledge and belief. I understand that my candidature is subject to the conditions laid down in the advertisement brochure. I further declare that I am not involved in any criminal case and/or no such case is pending against me in any court of law. In case of any falsification found in shared details, my candidature may be cancelled for the said position and Legal action may be initiated.

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