

SANJAY GANDHI POST-GRADUATE INSTITUTE OF MEDICAL SCIENCES,
RAEBARELI ROAD, LUCKNOW-226014 (U.P.)

Tel : +91-522- 2494000, 2495000, 2496000, 2494008

Website : www.sgpgims.org.in



Candidate Personal Details



Candidate Photo

Application Status

PaymentSuccess

Application Number

SG250027525

Post Applied for:

Nursing Officer

CANDIDATE First Name

ANAM

CANDIDATE Last Name

ABEDEEN

Father Name

NAZRUL ABEDEEN

Mother Name

JAHAN ARA

Date of Birth

01/Jan/2003

Age as on 1.1.2025

2 Year 0Month 0Day

2 s s s

Mobile Number:

8920574449

Email Address:

abedeenanana@gmail.com

Gender:

Female

Marital Status

Unmarried

Domicile State

OTHERS

Other Domicile State:

Bihar

Applied Category

Unreserved

Social Category

OBC(Non Creamy layer)

Sub Category

None

Nationality

Indian

Are you Regular U.P. Govt Employee ?

No

Correspondence Address

Address Line 1

C/O CHAND SIR, MASJID GALI

Address Line 2

ANSAR NAGAR

Address Line 3

NAWADA

Country

India

State

Bihar

City/District

Nawada

Pincode/Postal Code

805110

Is Permanent Address Same as Correspondence address?

Yes

Permanent Address

Address Line 1

C/O CHAND SIR, MASJID GALI

Address Line 2

ANSAR NAGAR

Address Line 3

NAWADA

Country

India

State

Bihar

City/District

Nawada

Pincode/Postal Code

805110

10th or Equivalent Examination

Name of the Board/School

CENTRAL BOARD OF SECONDARY EDUCATION

Year of Passing

2018

Result Type

Percentage

Marks Obtained

422

Total Marks

500

Percentage of Marks

84.40

12th or Equivalent Details

Name of the Board/School

BIHAR SECONDARY BOARD EXAMINATION

Major Subjects

PHYSICS CHEMISTRY
BIOLOGY HINDI ENGLISH

Year of Passing

2020

Result Type

Percentage

Marks Obtained

428

Total Marks

500

Percentage of Marks

85.60

Essential Qualification

Do you have Diploma or Graduation?

Graduation

Graduation Or Equivalent Examination

Name of Institute

ALL INDIA INSTITUTE OF MEDICAL SCIENCES DELHI

Name of Course

B.Sc. (Hons) Nursing/
B.Sc Nursing

Year of Passing

2024

Result Type

Percentage

Marks Obtained

1903

Total Marks

2800

Percentage of Marks

67.96

Post Specific Question

Do You have experience in minimum 50 bedded Hospital

No

Do You have registered as Nurse & Midwife in State / India Nursing Council in State / India Nursing Council?

Yes

Issuance Date of Nurse & Midwife Registration

07/08/2024

Name of State / Indian Nursing Council

DELHI NURSING COUNCIL

Payment Details

Amount

1180

Payment Mode

online

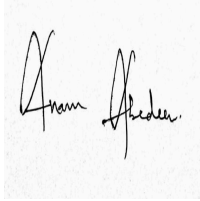
Payment Status

Payment Success

Payment Transaction No.

CPAFHPJSU9

Documents Upload



Signature

Document	View / Download
To view your copy of scanned High School Certificate:	Click here.
To view your copy of scanned Intermediate Certificate:	Click here.
To view your copy of scanned Graduation Certificate:	Click here.
To view your scanned copy of your Registration Certificate for Nurse & Midwife issued by State / India Nursing Council:	Click here.

Declaration

I solemnly affirm that the information furnished above is true and correct. I have not concealed any information. I realize that if any information furnished herein is found to be incorrect or untrue, I shall be liable to civil / criminal prosecution and also forgo my claim to the candidature in the Institute. Further, that my candidature for Examination / selection and admission to the course is liable to be cancelled. I agree to abide by the Rules and Regulations governing this Examination and as contained in the Prospectus.