



N	U	R	2	0	2	4			
---	---	---	---	---	---	---	--	--	--

• All the details to be filled in BLOCK letters only. Use Black / Blue ball pen only. Please tick in box provided.

[illegible][illegible][illegible]

Email

No

--	--

--	--

--	--	--	--

--	--	--	--	--	--	--

**Paste (do not staple)
recent passport size
color photograph**

Signature of the candidate

1. I hereby declare that I have gone through the syllabus prescribed relevant rules. Head of passing which are applicable for the examination for which I am appearing and I accept the same without any challenge.
2. I shall be responsible if my application form is rejected for any errors, wrong or incomplete entries made by me in the examination form.
3. I hereby declare that I shall not claim any concession on religious ground.
4. I am not defying the criterial of the admission order.

--	--	--	--	--	--	--	--

Signature of the candidate

Dean (Examination)
AIIMS Patna

NO DUES FORM

(B.Sc. (Hons.) Nursing Final Professional Annual Examination, December 2024)

Name of the student:.....

Batch:..... Roll No:

<i>Dept./Section</i>	<i>Dues/No dues</i>	<i>Signature of HoD/Incharge (With Seal)</i>	<i>Remark if any.</i>
Hostel (Chief Warden) Girls			
Hostel-Mess/Canteen (A.O)			
Hostel A.C (Accountant) FA			
College of Nursing			

Dean (Examination)