

# Grande International Hospital Ltd.

Dhapasi, Kathmandu.

## Application form for Critical Care Nurse Training Program

### A. Personal Information

1. Full name in of applicant in CAPITAL LETTER: \_\_\_\_\_
2. Nationality: \_\_\_\_\_ Citizenship No. \_\_\_\_\_
3. Date of Birth: \_\_\_\_\_ day \_\_\_\_\_ month \_\_\_\_\_ year
4. Age : \_\_\_\_\_
5. Permanent Address : \_\_\_\_\_
6. Temporary Address: \_\_\_\_\_
7. Telephone number \_\_\_\_\_ (Home) \_\_\_\_\_ ( Mobile)
8. E- mail address \_\_\_\_\_
9. NNC No.: \_\_\_\_\_
10. Academic Qualification: PCL  BSc./BN
11. Work Experience:

Affix applicant  
photo

I hereby confirm that all the information given above is true to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant

Date: \_\_\_\_\_

### Note:

- All the applicants will be called for written examination and interview.
- You are required to bring the following documents (photocopy) at the time of the written examination for the selection process.
  1. Copy of citizenship
  2. Copy of Nepal Nursing Council Registration certificate
  3. Copies of Academic documents of PCL/BN/Bsc. Nursing
  4. Work Experience Certificate
  5. P.P. size photos – 2

**Please apply before 20<sup>th</sup> Feb, 2018. Entrance on 22<sup>nd</sup> Feb 0900; Interview on 22<sup>nd</sup> Feb 13:00. Please duly fill all the information given and send email to: [bina.bhattarai@grandehospital.com](mailto:bina.bhattarai@grandehospital.com) OR [info@grandehospital.com](mailto:info@grandehospital.com)**

**The forms can also fill and dropped at the Reception of Grande International Hospital. For further information please contact 0977-9841314632 or +977- 1- 5159266.**