

## में अर क्रिय दें में श्रुर्भ में में स्वाप्त क्रिय हो।

श्रुव्याय्यान्द्रम् अस्यार्थः चत्रेः श्रुव्यः सैयाया



FACULTY OF NURSING AND PUBLIC HEALTH THIMPHU: BHUTAN



## **Admission Form for the Year 2023**

**PHOTO** 

Course: (Please tick)	B.Sc Nursing & Midwifery	Diploma in GNM		BSc C Couns	Clinical seling		Dip. in Community Health/Medical Technology			BScNM/BPH/ Certificate (Inservice)
PERSONAL INFORMATION										
Name	ame		Date of Birth				Gender			
CITE .			2.5.1.							
CID				Mobil				Email		
Village				Geog.		Dzongkh		khag		
House N	0.		Thran	n No.						
Father's			Moth					BOB		
Name	Name		Name			Accou		Accou	nt	
ACADEMIC INFORMATION										
Year of enrolment in FNPH					Last school attended:					
Year of completion in FNPH										
GUARDIAN'S INFORMATION										
Name of the Guardi an:								Contact mobile no.		
Relation	ship with G $$ $$ $$ $$ $$ $$	with G uardian:				G.				
Signature:										
Current Address										
I hereby declare that the information provided is true.										
Signatur stamp &			Date:							

## Note:

All new students should fill up this form and submit at the time of admission Submit original marksheet of class X and XII, and a copy of Citizenship ID card along with this form

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