

GOA NURSING COUNCIL
INSTITUTE OF NURSING EDUCATION CAMPUS
BAMBOLIM GOA - 403 202

APPLICATION FOR RECORDING RENEWAL OF REGISTRATION

To,
The Registrar,
Goa Nursing Council,

Madam/Sir,

As the period of validity of my Goa Nursing Council (GNC) registration will end on I request you to renew the same under section 18 (1) of the Goa Nursing Council, Act 2012. The details are indicated below:

NAME IN FULL (MAIDEN):-.....

NAME IN FULL (MARRIED):-

PERMANENT ADDRESS: -

TEMPORARY/CURRENT ADDRESS: -

PHONE NO: - EMAIL ID: -

NATIONALITY: - PLACE OF BIRTH:-.....

DATE OF BIRTH: -

GNC Registration No. and Date when obtained:-.....

I am registered with the Goa Nursing Council and with the Indian Nursing Council NRTS details of which are as given below:—

NAME IN FULL (as per GNC registration certificate)

(1) I forward herewith original certificates along with self-attested photocopy of the :—

(a) Goa Nursing Council Registration Certificate.

(2) Demand Draft of Rs. 500/- Drawn in favour of, Goa Nursing Council, Bambolim Goa as renewal of registration fee is enclosed.

(3) I have carefully read the instructions sent with this form and I certify that the particulars furnished above are true to the best of my knowledge and belief.

Place:

Yours faithfully,

Date:

(Signature of the Applicant)

INSTRUCTIONS

- (1) All particulars in the application shall be filled by the applicant.
- (2) All particulars should be in neat legible hand in CAPITAL letters.
- (3) The registration fee is to be paid by Demand Draft.
- (4) All copies of self attested certificates and other evidence, if any, to be enclosed.

_____ Specimen of Applicant's Signature as is on the Registration Certificate

Hours of Payment: 9.30 a.m. to 1 p.m. & 2 p.m. to 4 p.m. on all working days from Monday to Friday. Registration fee of Rs. 500/- By Demand Draft in favour of the Goa Nursing Council, Bambolim Goa.

Enclosed: - Copy of GNC Registration Certificate.