



ANM, SCHOOL OF NURSING IMPUR CHRISTIAN HOSPITAL: IMPUR

P.O. Impur - 798615
Mokokchung : Nagaland

ANM APPLICATION FORM 2025

Do not staple or
Pin.
Paste the photo
here.

Please fill this form in BLOCK LETTERS only. (USE BLACK INK ONLY)

1. Name of Candidate (as in School Record)

2. Father's Name

3. Mother's Name

4. Postal Address:
+ Email Address

5. Phone (STD Code):

6. Mobile:

7. Date of Birth (DD/MM/YY)

8. GENDER

M / F

9. MARITAL STATUS

Married/Single

9. RELIGION

10. Age as on August 2025

10. State of Domicile

11. Category :

Gen/SC/ST

12. Nationality

11. Father's/Guardian's occupation: _____

12. Academic Qualification:

Qualification	Board/University	Year of Passing	Percentage
High School (HSLC)			
Higher Secondary (HSSLC)			
Other Qualification			

I do solemnly affirm and declare that the information in this form is correct to the best of my knowledge and belief.

Place :

Date :

Signature

Documents to be included along with the Form.

- | | |
|-------------------|---|
| Birth Certificate | HSLC Admit Card, Marksheet, Pass Certificate |
| ST Certificate | HSSLC Admit Card, Marksheet, Pass Certificate Indigenous |
| Certificate | Permanent residential certificate - (Not from the colony) |
| 4 passport photo | |

❖ **ST, Indigenous and PRC should be in the latest updated format.**

NB:

- Last date of submission: 12th September 2025.
- Forms should be submitted only in the School office during office hours: Mon-Fri 9:00 am to 12:00N.
- Written Exam will be informed personally on the mentioned Phone number of the candidate.
- Attach the receipt of Prospectus to the form during submission/ pay Rs.200 during submission. No forms will be entertained without payment.
- Any Form with incomplete documents will be immediately rejected during submission.

For any query contact: TUTOR Yasanaro - 7085254374

