



# SUMANDEEP VIDYAPEETH

Piparia, Ta: Waghodia Dist: Vadodara

Ref No: SV/EXAM/N/7672/08/2019

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

## FORMAT FOR FURNISHING DETAILS OF TEACHERS FOR EMPANELING AS EXAMINERS IN NURSING FACULTY

Name of the Examiner : \_\_\_\_\_

Name of the College: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone No. \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Subject in which Examiner ship is Applied \_\_\_\_\_

Application for Examiner ship in BSC (N)  MSC (N)  PBBSC(N)

Name & Designation	Date of Birth & Age	Res. Add. & Telephone No. with code & Mobile No. E-mail and Fax No	Month & Year of Passing BSC/MS		Teaching Experience			PG Guide Yes or No ? If yes since how long	No of Years of PG Teacher/ Guide Exp.	Signature of the Teacher
			BSC	MSC	Before MSC	After MSC	Total			

Does your college runs PG Courses Yes  No

If yes since how long \_\_\_\_\_

The information furnished above is true and as per the Statutory norms \_\_\_\_\_ faculty is eligible for examiner ship in UG/PG of Nursing faculty

Signature of the applicant & Date

Signature of the Head of the Department with Seal

Signature of the Head of the Institution with seal