



# MOTHER CARE INSTITUTE OF NURSING

(Recognised by Indian Nursing Council, New Delhi, Gujarat Nursing Council, Ahmedabad and Permitted by Government of Gujarat.)

LUNAVADA ROAD , Ta: MALPUR, Dist: ARVALLI. – 383345. (Gujarat)

Phone: 02773-2274040. E-mail: [mothercaremalpur@gmail.com](mailto:mothercaremalpur@gmail.com)

## CHECKLIST

**Please tick (√) appropriate box of the documents you have submitted with this application.  
(attach only the attested Xerox copies in the sequence given below)**

1. School Leaving Certificate or other document showing place of birth. ( )
2. S.S.C.E. / Equivalent Examination Mark sheet. ( )
3. S.S.C.E. / Equivalent Examination Passing Certificate. ( )
4. H.S.C.E./ Equivalent Examination Mark sheet. ( )
5. H.S.C.E./ Equivalent Examination Attempt Certificate. ( )
6. Transcript from abroad student. ( )
7. Equivalence Certificate from abroad student. ( )
8. Provisional Eligibility Certificate from Gujarat University (if applicable). ( )
9. Migration Certificate (If applicable) ( )
10. Passport ( Scan Copies of All Pages ) ( )
11. Undertaking Letter from Parent/ Guardian/Dependent ( )
12. Documents for Proof of Origin (Citizenship Card/P.R.Card etc.) ( )
- 13 Cast Certificate (If applicable) ( )
- 14 Self-addressed Envelop with RPAD postage stamp ( )
15. Any other (Please specify the document):
  - (a) \_\_\_\_\_ ( )
  - (b) \_\_\_\_\_ ( )
  - (c) \_\_\_\_\_ ( )

Date:

\_\_\_\_\_  
(Signature of Candidate)