

## OFFICE OF THE PRINCIPAL GOVT. AM T SCHOOL, JAM M U

### ADMISSION NOTICE

Applications are invited on prescribed Performa from Permanent Residents of all districts of Jammu Division for undergoing below mentioned courses for the session 2015-16 at Divisional Level in AMT School, Govt. Medical College Complex, Bakshi Nagar, Jammu. The eligible candidates should submit their applications complete in all respects on or before 19.09.2015 along with attested photo copies of the following certificates and Bank Drafts of Rs. 100/= (Rupees one hundred only) from Jammu and Kashmir Bank in favor of the Principal, AMT School, Jammu mentioning the name and course on the back side of Bank Draft.

1. Date of Birth certificates (Matriculation Diploma)
2. Marks certificate of 10+2 (PCB) with biology pass.
3. State Subject Certificate (under process certificate will be rejected)
4. Category Certificate if any
5. Un-Married Certificate from any gazette officer who are applying for General Nursing & Midwifery.

S.NO.	NAME OF THE TRAINING COURSE	AGE AS ON 01.01.2015	QUALIFICATION	DURATION OF COURSE
A	1. General Nursing & Midwifery (GNM) (for female candidates only)	17 years minimum to 35 years maximum	10+2 with (PCB) Biology pass	3 years & 6 months
B	<b>PARA MEDICAL COURSES</b>			
	1. Laboratory Assistant	-do-	-do-	2 years
	2. Pharmacist (Medical Asstt.)	-do-	-do-	-do-
	3.X-Ray Assistant	-do-	-do-	-do-
	4.Ophthalmic Assistant	-do-	-do-	-do-
	5.Dental Assistant	-do-	-do-	-do-
	6.Sanitary Inspector	-do-	-do-	-do-

Sd/-

**PRINCIPAL**  
**GOVT. AM T SCHOOL,**  
**JAM M U**

**Note:**

1. Incomplete forms will be rejected.
2. Selection will be made on Academic Merit i.e.(10+2) qualifying examination.
3. The selection result of selected candidates will be published in the local daily news papers.
4. The candidates shall submit separate application for separate training courses if applying for more than one with preferences.

## APPLICATION PROFORM A

1/ NAME OF THE COURSE\_\_\_\_\_

2/ NAME OF THE APPLICANT\_\_\_\_\_

PHOTOGRAPH

3/ FATHER'S NAME\_\_\_\_\_

4/ DATE OF BIRTH\_\_\_\_\_

5/ PERM ANENT ADDRESS\_\_\_\_\_

TEHSIL\_\_\_\_\_DISTRICT\_\_\_\_\_

6/ POSTAL/ TELEGRAPHIC ADDRESS\_\_\_\_\_

TEHSIL\_\_\_\_\_DISTRICT\_\_\_\_\_PIN CODE\_\_\_\_\_

7/ TELEPHONE NO.\_\_\_\_\_MOBILE NO.\_\_\_\_\_

8/ M ENTION CATEGORY\_\_\_\_\_

9/ DETAIL OF EDUCATION QUALIFICATION

EXAMINATION PASSED 10+2	EXAMINING BODY/ NAME OF THE INSTITUTION	YEAR/ SESSION OF PASSING	MARKS OBTAINED
_____	_____	_____	_____

10+2 pass  
With Biology

SIGNATURE OF THE CANDIDATE