



NHS STANDARD APPLICATION FORM

Please fill in the application form below. Please remember to check it carefully, as once the form has been submitted it cannot be changed. Please note that questions marked with an asterisk * are mandatory and therefore must be answered.

APPLICATION FOR EMPLOYMENT

Details entered in this part of the form will be held by the recruiting employer. Access to this information will be withheld from the shortlisting panel. Please do not type/write using only capital letters, as this could lead to your application being automatically rejected. Please use the appropriate mixture of capital and lowercase letters in standard written text.

Personal Details

Title	Mrs
*Surname/Family Name	Koorkamattam
*First Name	Soumia
Middle Name	Manu
Name in which you are registered with a professional body (if applicable)	Soumia Rappai
Address	Koorkamattam , Pulinkara P O, Kuttichira , Thrissur, Kerala , India .
*Postcode/ Zip code	680724
*Country	India
Skype ID (please check that full details are included)	SOUMIA MANU
Home Telephone (include country code)	
Mobile Telephone (include country code)	91 7025500673
Work Telephone (include country code)	
Preferred telephone number	<input type="checkbox"/> Home <input checked="" type="checkbox"/> Mobile <input type="checkbox"/> Work
Email Address	soumiamanu@yahoo.com



GLOBAL HEALTH EXCHANGE

Learn globally Act locally

*Are you a United Kingdom (UK), European Community (EC) or European Economic Area (EEA) National?

Yes No

If you have answered 'no' above, you must answer these questions:

Please select the category that relates to your current immigration status:

I am intending to apply for a Work Permit/Tier 2 visa ✓

Dependant / Spouse visa

Other, please specify below

Please supply details of any visa currently held: NA ✓

Visa No: NA

Start Date: NA

Expiry Date: NA

Details of any Restriction: NA

Does your visa have a condition restricting employment or occupation in the UK?

Yes No

APPLICATION FOR EMPLOYMENT

Details entered in this part of the form will be held by the recruiting employer and will be made available to the short-listing panel.

Education & Professional Qualifications

All relevant qualifications. Please also indicate subjects currently being studied. All qualifications disclosed will be subject to a satisfactory check.			
Subject/Qualification	Place of Study	Grade/result	Year obtained
General Nursing And Midwifery	Amala Institute Of Medical Science	79%	2005

Training Courses Attended

Training courses that you have attended or details of courses that you are currently undertaking, together with the date completed or to be completed.			
Course Title	Training Provider	Duration	Year obtained
Basic Life Support Health Care Provider			28 OCT 2008
BLS Provider	Saudi Heart Association		04 SEP 2013
Team leader/charge nursing programmes	Nursing education department		24 JUN 2013

Membership of Professional Bodies or/and Registration Councils

Please provide details regarding any relevant professional registrations or memberships. This information will be subject to a satisfactory check.

<p>* Please indicate your UK Professional Registration status/home country registration details/country where practising details</p> <p><input type="checkbox"/> I do not have the relevant UK professional registration status</p> <p><input type="checkbox"/> I have current UK professional registration</p> <p><input type="checkbox"/> UK professional registration required and applied for</p> <p><input type="checkbox"/> UK professional registration required but not yet applied for</p> <p><input checked="" type="checkbox"/> I have professional registration in my home country</p> <p><input type="checkbox"/> I have professional registration in the country where I am currently practising</p>
--

If professional registration is not required then go to **Employment History**.

<p>Please provide details of registration indicating which country you hold registration in. If you have more than one registration please provide the details below.</p> <p>If you have answered 'I have current UK professional registration relevant for this post' or 'I have current UK professional registration and licence to practise for this post', then please enter the relevant details below.</p> <table border="1"> <thead> <tr> <th>Professional Body</th> <th>Membership or Registration type</th> <th>Membership/Registration Number</th> <th>Expiry/Renewal Date</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Professional Body	Membership or Registration type	Membership/Registration Number	Expiry/Renewal Date								
Professional Body	Membership or Registration type	Membership/Registration Number	Expiry/Renewal Date									

If you are applying for a post that requires professional registration you are required to provide the following information:

<p>Are you currently the subject of a fitness to practise investigation or proceedings by a licensing or regulatory body in the UK or in any other country?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>If applicable, please provide details of any investigations or proceedings you may be subject to.</p>	
<div style="border: 1px solid black; height: 50px;"></div>	

Have you been removed from the register or have conditions been made on your registration by a fitness to practise committee or the licensing or regulatory body in the UK or in any other country?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If applicable, please provide details of any conditions you may have.	

Employment History

Please record below the details of your full employment history beginning with your current or most recent first. If required, please provide additional information regarding your employment history within the 'Supporting Information' section.

Start of continuous NHS service (if applicable) (MM/YYYY)	
Months since most recent employment ended (if applicable)	

Current/most recent employer

Employer Name	Dr. Bakhsh Hospital Group		
Address	Jeddah, Kingdom Of Saudi Arabia		
Type of Business	Hospital	Telephone	
Job Title	Medical War - Senior Staff Nurse		
Start Date (MM/YYYY)	09/2008	End Date (MM/YYYY)	09/2014
Grade		Salary	
Reporting to (job title)		Period of notice	
Reason for leaving (if applicable)			
<p>Left the job to deal with some unexpected medical issues in family that came up. And needed to act as a caregiver to my sick Mom.</p>			

Brief description of your duties and responsibilities
<ul style="list-style-type: none"> -Attending emergencies. -Acting as a group leader and giving assignment to junior staff nurses, supervising and teaching student nurses. -Monitoring patients in cardiac monitors. -Assisting Endotracheal intubation. -Attending ventilator patients. -Handling narcotic drugs. -Checking and maintaining ward stocks. -Take part in patient consent, death formalities etc.

Previous Employer 1

Employer Name	Amala Cancer Hospital And Research Centre		
Address	Thrissur, India		
Type of Business	Hospital	Telephone	
Job Title	ICU- Staff nurse		
Start Date (MM/YYYY)	04/2005	End Date (MM/YYYY)	04/2007
Grade		Salary	
Reporting to (job title)		Period of notice	
Reason for leaving (if applicable)			
For better career prospects, professional growth and work opportunities			

Brief description of your duties and responsibilities
<ul style="list-style-type: none"> -Admission and discharge of patients. -Recording vital signs, temperature, pulse and BP. -Ventolin inhalation, O2 administration and checking O2 saturation - IV cannulation, administration of medication. -Attending doctors rounds carrying out orders. -Attending procedures such as taking ECGS, inserting urinary catheter, nasogastric tubes, drainage, giving death care, maintaining cleanliness.

Previous Employer 2

Employer Name			
Address			
Type of Business		Telephone	
Job Title			
Start Date (MM/YYYY)		End Date (MM/YYYY)	
Grade		Salary	
Reporting to (job title)		Period of notice	
Reason for leaving (if applicable)			
Brief description of your duties and responsibilities			

Previous Employer 3

Employer Name			
Address			
Type of Business		Telephone	
Job Title			
Start Date (MM/YYYY)		End Date (MM/YYYY)	
Grade		Salary	
Reporting to (job title)		Period of notice	

Reason for leaving (if applicable)
Brief description of your duties and responsibilities

Previous Employer 4

Employer Name			
Address			
Type of Business		Telephone	
Job Title			
Start Date (MM/YYYY)		End Date (MM/YYYY)	
Grade		Salary	
Reporting to (job title)		Period of notice	
Reason for leaving (if applicable)			
Brief description of your duties and responsibilities			

Previous Employer 5

Employer Name			
Address			
Type of Business		Telephone	
Job Title			
Start Date (MM/YYYY)		End Date (MM/YYYY)	
Grade		Salary	
Reporting to (job title)		Period of notice	
Reason for leaving (if applicable)			
Brief description of your duties and responsibilities			

Previous Employer 6

Employer Name			
Address			
Type of Business		Telephone	
Job Title			
Start Date (MM/YYYY)		End Date (MM/YYYY)	
Grade		Salary	

Reporting to (job title)		Period of notice	
Reason for leaving (if applicable)			
Brief description of your duties and responsibilities			

Please add additional employers/information on a separate sheet.

Employment Gaps

<p>If you have any gaps within your employment history, please state the reasons for the gaps below.</p>
<p>After completing my nursing diploma , i worked for 2 years as a ICU staff nurse for Amala Cancer Hospital And Research Center. And left the job for better career prospets, professional growth and work opportunities. Then joined Dr.Bakhash Hospital Group as Medical War-Senior staff nurse for 6 years, and i left the job to deal with some unexpected medical issues in family that came up. And neded to act as a caregiver to my sick Mom. And following three and half year break to raise three children. I am now searching for a challenging position in a well reputed firm to full fill my ambition to work as a nurse.</p>

References

Please provide the names and full contact details of the people who have agreed to supply references. References must include at least two positions with separate employers and, as a minimum, cover a period of three years employment and/or training history, where this is possible.

Referees will be required to comment on your competence, personal qualities and suitability for the post. This may be your line/department manager, or someone in a position of responsibility for any work experience or placement undertaken. If you are a student or trainee this should include a teacher/tutor at your education institution.

If you have not been in employment for a considerable amount of time but have had previous employment, then you should seek one reference from your last known employer and a personal reference from a person of standing within your community such as a doctor, solicitor or MP. Where it is genuinely not possible to obtain references from any of the sources outlined above, you must provide contact details of two personal acquaintances who would be willing to give a reference. Personal acquaintances must not be related to you, or have any financial arrangement with you.

Please note that all reference requests will be followed up and verified by the recruiting employer.

Referees may be approached prior to interview, unless you indicate otherwise below.

Referee 1

* Type of Reference	<input checked="" type="checkbox"/> Employer <input type="checkbox"/> Educational <input type="checkbox"/> Personal		
Title	Ms		
* Surname/Family name	JOHN	* First Name	MANJU
* Relationship	CO-WORKER		
Employer Name			
Referee Job Title			
* Address	DR. BAKHSH HOSPITAL, AL-SHARAFIYAH, JEDDAH		
* Postcode/ Zip Code	6940 PO BOX		
Telephone		* Country	KSA
Email		Fax	
* Can the referee be contacted prior to interview?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Referee 2

* Type of Reference	<input checked="" type="checkbox"/> Employer <input type="checkbox"/> Educational <input type="checkbox"/> Personal		
Title	Mrs		
* Surname/Family name	SHIBU	* First Name	LITTY
* Relationship	CO-WORKER		
Employer name			
Referee Job Title			
* Address	AMALA CANCER HOSPITAL TRICHUR		
* Post Code/ Zip Code	680555		
Telephone		* Country	INDIA
Email		Fax	
* Can the referee be contacted prior to interview?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

If you have applied to us within the last 3 months, are you happy for us to use the references from your earlier application?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	---

Supporting Information

In this section please give your reasons for applying to work in the NHS and supply any additional information which demonstrates your abilities. This can include relevant skills, knowledge, experience, voluntary activities, training etc.

Experience can also include for example details about research experience, publications or poster presentations, clinical care (knowledge and skills) and clinical audit.

* Supporting information (Please continue on additional sheets if necessary).

Additional Personal Information

Declaration

The information in this form is true and complete. I agree that any deliberate omission, falsification or misrepresentation in the application form will be grounds for rejecting this application or subsequent dismissal if employed by the organisation. Where applicable, I consent that the organisation can seek clarification regarding professional registration details.

I agree to the above declaration			
Signature	<i>Soumia</i>		
Name	Soumia Manu	Date	12-03-2018

MONITORING INFORMATION

NHS organisations recognise the benefits of having a diverse workforce and therefore welcome applications from all sections of the community. In addition to this, under the provisions of the Equality Act 2010, all NHS organisations are required to demonstrate that their recruitment processes are fair and that they are not discriminating against or disadvantaging anyone because of their age, disability, gender reassignment status, marriage or civil partnership status, pregnancy or maternity, race, religion or belief, sex or sexual orientation. Therefore a series of questions need to be raised in order to ascertain who is applying for each position and to ensure that no one is being unfairly discriminated against or disadvantaged.

This section of the application form will be detached from your application and will not be used as part of the selection process nor will it be seen by anybody who is interviewing you. The information collected is only used for monitoring purposes in an anonymised format to assist the organisation in analysing the profile and make up of individuals who apply, are shortlisted for and appointed to each vacancy. In this way, they can check that they are complying with the Equality Act 2010.

Equality Act 2010

The Equality Act 2010 protects people against discrimination on the grounds of their age and sex.

* Please state your date of birth	18-05-1984
* Please indicate your gender	<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female <input type="checkbox"/> I do not wish to disclose this

Equality Act 2010

The Equality Act 2010 protects people who are married or in a civil partnership.

* Please indicate the option which best describes your marital status	
<input checked="" type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Civil partnership <input type="checkbox"/> Legally separated	<input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> I do not wish to disclose this

Equality Act 2010

The Equality Act 2010 protects bisexual, gay, heterosexual and lesbian people from discrimination on the grounds of their sexual orientation.

* Please indicate the option which best describes your sexual orientation	
<input type="checkbox"/> Lesbian <input type="checkbox"/> Gay <input type="checkbox"/> Bisexual	<input type="checkbox"/> Heterosexual <input type="checkbox"/> I do not wish to disclose this

Equality Act 2010

The Equality Act 2010 protects people against discrimination on the grounds of their race which includes colour, nationality, ethnic or national origin.

* Please indicate your ethnic origin		
Asian or Asian British <input type="checkbox"/> Bangladeshi <input checked="" type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Any other Asian background	Mixed <input type="checkbox"/> White & Asian <input type="checkbox"/> White & Black African <input type="checkbox"/> White & Black Caribbean <input type="checkbox"/> Any other mixed background	Other Ethnic Group <input type="checkbox"/> Chinese <input type="checkbox"/> Any other ethnic group <input type="checkbox"/> I do not wish to disclose this
Black or Black British <input type="checkbox"/> African <input type="checkbox"/> Caribbean <input type="checkbox"/> Any other Black background	White <input type="checkbox"/> British <input type="checkbox"/> Irish <input type="checkbox"/> Any other White background	

Equality Act 2010

The Equality Act 2010 protects people against discrimination on the grounds of their religion or belief, including a lack of any belief.

* Please indicate your religion or belief		
<input type="checkbox"/> Atheism <input type="checkbox"/> Buddhism <input checked="" type="checkbox"/> Christianity <input type="checkbox"/> Hinduism	<input type="checkbox"/> Islam <input type="checkbox"/> Jainism <input type="checkbox"/> Judaism <input type="checkbox"/> Sikhism	<input type="checkbox"/> Other <input type="checkbox"/> I do not wish to disclose this

Equality Act 2010

The Equality Act 2010 protects disabled people - including those with long term health conditions, learning disabilities and so called "hidden" disabilities such as dyslexia. If you tell us that you have a disability we can make reasonable adjustments to ensure that any selection processes - including the interview - are fair and equitable.

* Do you consider yourself to have a disability?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> I do not wish to disclose this information
Please state the type of impairment which applies to you. People may experience more than one type of impairment, in which case you may indicate more than one. If none of the categories apply, please mark 'other'.	
<input type="checkbox"/> Physical impairment <input type="checkbox"/> Sensory impairment <input type="checkbox"/> Mental health condition	<input type="checkbox"/> Learning Disability/Difficulty <input type="checkbox"/> Long-standing illness <input type="checkbox"/> Other
If you have a disability, do you wish to be considered under the guaranteed interview scheme if you meet the minimum criteria as specified in the person specification?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	

Rehabilitation of Offenders Act 1974

The Rehabilitation of Offenders Act 1974 (as amended) helps rehabilitated ex-offenders back into work by allowing them not to declare criminal convictions after the rehabilitation period set by the Court has elapsed and the convictions become 'spent'. During the rehabilitation period, convictions are referred to as 'unspent' convictions and must be declared to employers.

The organisation aims to promote equality of opportunity and is committed to treating all applicants for positions fairly and on merit regardless of ethnicity, disability, age, gender or gender re-assignment, religion or belief, sexual orientation, pregnancy or maternity and marriage or civil partnership. The organisation undertakes not to discriminate unfairly against applicants on the basis of a criminal conviction or other information declared.

You are required to declare all current 'unspent' criminal convictions or cautions (including reprimands and final warnings). You are not required to disclose convictions or cautions which have become 'spent'.

As part of assessing your application, organisations will only take into account relevant criminal record and other information declared which is relevant to the position being applied for.

Answering 'yes' to the question below will not necessarily bar you from appointment. This will depend on the relevance of the information you provide in respect of the nature of the position for which you are applying and the particular circumstances.

* Are you currently bound over or do you have any current 'unspent' convictions or cautions (including reprimands or warnings) that have been issued by a Court or Court-Martial in the United Kingdom or in any other country?
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If Yes, please include details of the order binding you over and/or the nature of the offence, the penalty, sentence or order of the Court, and the date and place of the Court hearing. You do not need to tell us about parking offences.

Relationships

If you are related to a director, or have a relationship with a director or employee of an appointing organisation, please state the relationship:

Mrs. Soumia Manu,
Koorkamattom,
Pulinkara PO, Kuttichira,
Thrissur, Kerala
India. Pin 680724
Ph: 91-7025500673
Email: soumiamanu@yahoo.com
Date – 12/03/2018

Vostek Ltd
London,
7A, Lower Grosvenor Place, London
SW1W 0EN

Dear Sir,

I am enclosing my resume in this job application. I believe that my skills, knowledge and experience make me an ideal candidate for the job.

I have a diploma in Nursing and 8 years of proven experience effectively managing both patients and staff. I am an extremely organised calm, and patient professional with excellent healthcare skills. I have a passion for providing quality care to patients and necessary leadership skills to inspire other staff members to strive to provide above standard levels of service.

After completing my nursing diploma, I worked for 2 year as a ICU staff nurse for Amala Cancer Hospital And Research Center. And left the job

for better career prospects, professional growth and work opportunities. Then joined Dr. Bakhsh Hospital Group as a Medicalwar – senior staff nurse for 6 years. And i left the job to deal with some unexpected medical issues in family that came up. And needed to act as a caregiver to my sick Mom and Father. And following three and half year break to raise three children. I am now searching for a challenging position in a well reputed firm to full fill my ambition to workas a nurse.

I believe a relationship with our company would be mutually beneficial, as I am seeking a challenging work enviroment where I can utilize my skills to the fullest extent . I look forward to hearing from you, and would love to explain my skills further during an interview. Please find a detailed account of my history in the attached resume.

Sincerely,

Soumia Manu.

CURRICULUM VITAE

Name : Soumia Manu
Position : Staff Nurse, ICU and Medical ward
Years of Experience : 8

Personal Information

Date of Birth : 18-05-1984
Sex : Female
Nationality : Indian
Present Address : Koorkamatam Houses, Pulinkara, Kuttichira P.O
Chalaky via Thrissur, Kerala, INDIA. Pin-680724.
Contact : +91 7025500673
+91 9747988036
Email ID : soumiamanu@yahoo.com

Passport Details

Passport No : P4073145
Place of Issue : COCHIN
Date of Issue : 05-09-2016
Date of Expiry : 04-09-2026

Professional Qualifications

Professional Registration	Institution	Year
3 Years Diploma in General Nursing & Midwifery	Amala Cancer Hospital & Research Centre, Amala Nagar, Thrissur, India	2005

Life Support Certificate

Attended relevant training courses including basic life support, mandatory training, IV canulation and equipment training.

Working Experience

Name of Employer	Specialty/Position	Duration
Dr Bakhsh Hospital Group, Jeddah, Kingdom of Saudi Arabia	Medical ward- Senior staff nurse	September 2008- September 2014
Amala Cancer Hospital & Research Centre, Thrissur, India	ICU- Staff nurse	April 2005- April 2007

SUPPORTING INFORMATION

INTRODUCTION:

I have completed my diploma in General Nursing & Midwifery in 2005 from a well reputed hospital in India. Overall, I have 8 years of experience as a staff nurse and senior staff nurse in the ICU and Medical ward. I worked 6 years as a senior staff nurse in the Kingdom of Saudi Arabia which helped me improve my clinical leadership, teaching and communication skills, this has enabled me to be an excellent role model. Now I am able to assess, plan, deliver and implement the need of the patient on an ongoing basis and co-ordinate the care given by all members of the clinical team.

CLINICAL:

I am an excellent ICU nurse with vast knowledge in patient safety, infection control and aseptic technique. I am knowledgeable, hardworking, competent and a dedicated nurse towards patients, doctors, co-workers and other staff of the health team. I am able to show exceptional qualities such as efficiency, compassion and kindness to my patients.

I am effectively using my initiative skills wherever necessary such as:

Provide all aspects of care of patients including:

- Admission and discharge formalities of patients
- Recording vital signs, temperature, pulse and BP
- Administering oxygen
- Checking oxygen saturation by pulse oxymeter
- Ventolin inhalation
- IV cannulation and administration of IV fluids using EMS and IV pump
- Blood collection and blood platelets transfusion
- Administering oral medication and IV medications
- Maintaining personal hygiene of the patient
- Attending doctors round and carrying out orders
- Attending emergencies
- Taking ECGS
- Acting as a group leader and giving assignments to junior staff nurses and supervising them
- Monitoring patients on cardiac monitors
- Assisting for Endotracheal intubation and taking care of the patients

- Inserting urinary catheter for female patients
- Attending ventilator patients
- Taking care of drainage tubes
- Inserting nasogastric tubes
- Maintaining cleanliness of the unit
- Supervising and teaching junior nurses and student nurses
- Completing patient records and documentation
- Checking and maintaining the ward stock
- Handling narcotic drugs
- Take part in patient consenting
- Giving death care and meeting the death formalities.

EDUCATION AND PERSONAL DEVELOPMENT:

For my professional and personal development I update my knowledge and skills through self study on a regular basis and update mandatory training yearly. Done competency in vac pump, syringe drivers, blood collection and IV canulation. I have attended pain management study day.

From the past 8 years of experience being a junior and senior staff nurse I have proven my expertise in clinical and management skills. This confidence motivated me to take on a challenge as a team leader. I personally consider it will be a great opportunity to develop my leadership and management skills.

I have mentored students in the past, which involved planning the students learning needs and helping them achieve their competencies. This has improved my teaching skills. I regularly update myself through reading articles and journals.

MANAGEMENT:

Being a senior staff nurse I am able to manage the clinical work load effectively by ensuring the care is prioritised appropriately. I am supporting the ward manager by duty allocations to meet the demand and always make sure that delivering of care is safe as well as cost effective. I am acting as an effective team leader for senior and junior fellow colleagues and supporting the new members of staff and students by monitoring and documenting their development of clinical skills. I have used my past experience and skills to solve informal complaints. I do challenge people who are not keen on following policies and protocols within the clinical area and reporting deficits to the managers. I have taken leadership roles during any crisis. I keep an excellent

professional relationship with my colleagues, which enables me to run the department smoothly and effectively while I coordinate the shifts.

QUALITY ASSURANCE:

Development and maintenance of clinical standards can be achieved by audits. I have done audit on matrix, safety thermometer, complaints and patients stay on regular basis. Effective communication between the medical and nursing staff is a vital component for the safe clinical practice and should be able to implement changes wherever necessary.

In relation to risk and governance I report adverse incidents and communicate with my line manager for further investigation.

Declaration

I hereby declare that all information given above is correct and true of my knowledge and belief.

Soumia Manu

Place:

Date:

Sl. No. 110006742

Exm. No. 50102532

Kerala Nurses And Midwives Council



Diploma in General Nursing and Midwifery

The Kerala Nurses and Midwives Council hereby makes known that

Soumia Rappai

daughter of *Mr. N O Rappai* after having undergone

the prescribed Diploma course in General Nursing and Midwifery at
*School of Nursing, Amala Cancer Hospital & Research Centre, Amala
Nagar, Thrissur*

for the period from *January 2002* to *January 2005* and passed

the final examination held in *January 2005* with *First class*
by duly appointed examiners is awarded

the **Diploma in General Nursing and Midwifery.**


President

Board of Examiners

Kerala Nurses and Midwives Council

Thiruvananthapuram
Dated: 15-Jul-2005


Registrar

Kerala Nurses and Midwives Council

K. RAJEEVAKSHAN
Registrar
Kerala Nurses & Midwives Council
Red Cross Road
Thiruvananthapuram - 695 035
Phone- 0471 - 2307227



R012016014437

Kerala Nurses And Midwives Council



REGISTRATION CERTIFICATE



This is to certify that

SOUMIA RAPPAI

having undergone a

Diploma in General Nursing and Midwifery programme at *School of Nursing, Amala Cancer Hospital & Research Centre, Amala Nagar, Thrissur*

from *January 2002 to January 2005* has passed the examination conducted by the *Council with First Class* held in *January 2005* and is permitted to practice as a Nurse and Midwife under the provisions of the Nurses and Midwives Act, 1953.

The number assigned to her in the Register is **45784** dated **11th April 2005**.

The Registration Certificate is renewed on **5th October 2016** and valid upto **4th October 2021**.

Thiruvananthapuram

Dated: 05-10-2016

Registrar

Kerala Nurses and Midwives Council

PROF. VALSA K. PANICKER

Registrar
Kerala Nurses and Midwives Council
Feroz Cross Road
Thiruvananthapuram-695 035

0059615



SCHOOL OF NURSING
AMALA CANCER HOSPITAL & RESEARCH CENTRE

AMALA NAGAR - 680 555, THRISSUR, KERALA
 PHONE : 0487 - 2307950. FAX : 91 487 2307020

TRANSCRIPT OF STUDIES
GENERAL NURSING & MIDWIFERY COURSE

Name of Student S. OUMIA RAPPAL

Date of Birth 18-5-1984

Medium of Instruction ENGLISH

Duration of the Course THREE YEARS [3 YEARS]

Date of Admission JANUARY 2002 Date of Completion JANUARY 2005

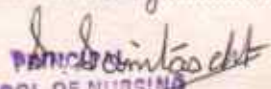
Date of publication of result 11th APRIL 2005 K.N.C. Reg. No. 45784

(This school of Nursing is approved and recognised by the Indian Nursing Council and the Kerala Nurses & Midwives Council. This is a 550 bedded multi speciality Hospital. The syllabus as approved by the Indian Nursing Council is followed by this institution)

FIRST YEAR					
Sl. No.	Subject	Preliminary Period		First Year	
		Class	Hours of Clinical Experience	Class	Hours of Clinical Experience
	Medical Surgical Nursing - 8 Weeks 287 Hrs				
1	Fundamentals of Nursing including History of Nursing, First Aid & Emergency Nursing. 8 Weeks, 288 Hrs.	100 Hrs.	8 Weeks	65 Hrs.	14 Weeks 639 Hrs.
	Paediatric Nursing 4 Weeks 144 Hrs.				
2	Anatomy & Physiology	30		50	
	Microbiology	30		-	
	Physics & Chemistry	20		-	
3	Community Health Nursing I	-		100	6 Weeks 216 Hrs.
	Psychology	20		40	
	Sociology & Economics	20		10	
	Hygiene (Personal & Environmental)	15		25	
	Nutrition	30		-	
	Health Education & Communication Skill	10		-	

Night NIL Vacation 30 days Sick Leave 10 days




 SCHOOL OF NURSING
 AMALA CANCER HOSPITAL
 RESEARCH CENTRE
 AMALANAGAR, THRISSUR
 PIN-680 553.

II ND YEAR

S.No	Subject	Hours of	
		Class	Clinical Experience
1.	MEDICAL SURGICAL NURSING - I		
	Medicine & Medical Nursing	110 Hrs.	7½ weeks 360 Hrs.
	Pharmacology	20	
	Surgery & Surgical Nursing	100 Hrs.	7½ weeks 360 Hrs.
	Theatre Techniques	20	6 weeks 216
	Advanced Nursing Practice	30	2 weeks 72
2.	MEDICAL SURGICAL NURSING - II		
	E.N.T.	10	1 week 36 Hrs.
	Ophthalmology	10	1 week 36 Hrs.
	Skin & V.D.	10	2 weeks 72 Hrs.
	Communicable disease	25	2 weeks 72 Hrs.
	Gynaecology	20	2 week 72 Hrs.
	Orthopaedics	10	1 week 36 Hrs.
3.	PAEDIATRIC NURSING, MENTAL HEALTH & PSYCHIATRIC NURSING		
	Paediatrics & Paediatric Nursing	35	8 weeks 288 Hrs.
	New Born Care	15	
	Psychiatric Nsg. & mental health	30	4 weeks 144 Hrs.

Night 4 weeks Vacation 30 days Sick Leave 10 days

III D YEAR

1.	MIDWIFERY		
	Obstetrics & Obst. Nursing	100 Hrs	24 weeks
	Antenatal & Postnatal Clinic		4 weeks 144 Hrs.
	Antenatal Ward		4 weeks 144 Hrs.
	Labour Ward		8 weeks 288 Hrs.
	Postnatal Ward		4 weeks 144 Hrs.
	Domiciliary		4 weeks 144 Hrs.
2.	COMMUNITY HEALTH NURSING - II	100 Hrs	8 weeks 288 Hrs.
	Professional Trends, Management & Supervision	50 Hrs	2 weeks 72 Hrs.

Night 4 weeks Vacation 30 days Sick Leave 10 days

Date 7-6-2007



PRINCIPAL
S. S. S. S. S.
 PRINCIPAL
 SCHOOL OF NURSING
 AMALA CANCER HOSPITAL
 RESEARCH CENTRE
 AMALANAGAR, TRISSUR
 PIN-680 553.

भारतीय गैर न्यायिक



കേരളം കേരल KERALA

FORM No.5

19AA 409568

(See Rule 8)

Form-5

നമ്പർ No

B0010202-84052244750



കേരള സർക്കാർ

GOVERNMENT OF KERALA

നഗരകാര്യ വകുപ്പ്

DEPARTMENT OF URBAN AFFAIRS

സർട്ടിഫിക്കറ്റ് നൽകുന്ന തദ്ദേശസ്ഥാപനത്തിന്റെ പേര് ചാലക്കുടി മുനിസിപ്പാലിറ്റി
Name of local body issuing certificate Chalakudy Municipality

ജനന സർട്ടിഫിക്കറ്റ്

BIRTH CERTIFICATE

(1969-ലെ ജനന-മരണ രജിസ്ട്രേഷൻ ആക്ടിലെ 17-ാം വകുപ്പും 1999-ലെ കേരള ജനന-മരണ രജിസ്ട്രേഷൻ ചട്ടങ്ങളിലെ 13-ാം വകുപ്പും അനുസരിച്ച് നൽകുന്നത്).
(Issued under Section 17 of the Registration of Births and Deaths Acts, 1969 and Rule 13 of the Kerala Registration of Births and Deaths Rules, 1999)

താഴെ പറയുന്ന വിവരങ്ങൾ കേരള സംസ്ഥാനത്തിലെ തൃശ്ശൂർ ജില്ലയിലെ ചാലക്കുടി താലൂക്കിലെ ചാലക്കുടി മുനിസിപ്പാലിറ്റി-ലെ (തദ്ദേശസ്ഥാപനം) അസ്സൽ ജനന രജിസ്റ്ററിൽ നിന്ന് എടുത്തിട്ടുള്ളവയാണെന്ന് സാക്ഷ്യപ്പെടുത്തുന്നു.

This is to certify that the following information has been taken from the original record of birth which is the register for (local area/local body)Chalakudy Municipality of Taluk Chalakudy of District Thrissur of State Kerala.

HEALTH INSPECTOR & REGISTRAR OF BIRTHS & DEATHS CHALAKUDY MUNICIPALITY



Handwritten signature and date 25/09/15

Handwritten notes: No 16/22/25-5-2015, Rappan-N.O. Nj & kels, Konnaluzh...



16 SEP 2015

പേര്/Name : സൗമ്യ റപ്പായി / SOUMIA RAPPAI

ആൺ/പെൺ/ Sex : പെൺ / Female

ജനന തീയതി/Date of Birth : 18/05/1984
(EIGHTEEN / MAY / ONE THOUSAND NINE HUNDRED EIGHTY-FOUR)

ജനന സ്ഥലം/Place of Birth : മാത്യു മെമ്മോറിയൽ ഹോസ്പിറ്റൽ, ചാലക്കുടി / Mathew Memorial Hospital, Chalakudy

മാതാവിന്റെ പേര് / Name of Mother : Mary

പിതാവിന്റെ പേര്/ Name of Father : Rappai

കുട്ടിയുടെ ജനന സമയത്ത് മാതാപിതാക്കളുടെ മേൽവിലാസം : *** ലഭ്യമല്ല

Address of the parents at the time of birth of the child : *** Not Available

മാതാപിതാക്കളുടെ സ്ഥിരമായ മേൽവിലാസം :

Permanent address of parents : Njarleli House, Mothirakanni

രജിസ്ട്രേഷൻ നമ്പർ/ : 866/1984
Registration No
അഭിപ്രായക്കുറിപ്പ്/Remarks (if any) : രജിസ്ട്രേഷൻ തീയതി/ : 22/05/1984
Date of Registration
: *** അസ്സൽ രേഖകളിൽ കുട്ടിയുടെ ജനന സമയത്ത് മാതാപിതാക്കളുടെ മേൽവിലാസത്തെ സംബന്ധിച്ച കോളങ്ങൾ ഉൾപ്പെടുന്നില്ല

*** The original records do not contain the column relating to the address of the parents at the time of birth of the child.

നൽകുന്ന തീയതി /Date of issue : 25/09/2015

നൽകുന്ന അധികാരിയുടെ ഒപ്പ്/
Signature of the issuing authority

നൽകുന്ന അധികാരിയുടെ മേൽവിലാസം/
Address of the issuing authority

സീൽ /SEAL

(Handwritten Signature)
25/09/15
HEALTH INSPECTOR &
REGISTRAR OF BIRTHS & DEATHS
CHALAKUDY MUNICIPALITY



"Ensure Registration of Every birth and death"

ഓരോ ജനനവും മരണവും രജിസ്റ്റർ ചെയ്തുവെന്ന് ഉറപ്പുവരുത്തുക

(Handwritten Signature)
2015



ഭാരത സർവ്വകാല തിരിച്ചറിയൽ താല്പാർത്ഥി

ഭാരത സർക്കാർ
Unique Identification Authority of India
Government of India

പ്രവേശന രേഖാ നമ്പർ / Enrollment No 2003/38055/35959

To,
സൗമ്യ മനു
Sourya Manu
W/O. Manu Mathews
Koonanattam
Pulinkara
Kulichira P O
Kulichira
Kulichira Mukundapuram Thissur
Kerala 680724
7025500673

Ref: 39544 / 07D / 4711285 / 4711353 / P



SE628924395FT



നിങ്ങളുടെ ആധാർ നമ്പർ / Your Aadhaar No. :

2091 9006 9652

ആധാർ - സാധാരണക്കാരന്റെ അറവകാശം



ഭാരത സർക്കാർ
Government of India



സൗമ്യ മനു
Sourya Manu
ബന്ധപ്പെട്ടിടം / DOB: 18/05/1984
ലിംഗം / Gender



2091 9006 9652

ആധാർ - സാധാരണക്കാരന്റെ അറവകാശം



വിവരങ്ങൾ

- ആധാർ തിരിച്ചറിയലിനുള്ള ട്രൈഡയ്ക്ക് പൗരത്വപരിഷ്കരണത്തിനുള്ള
- തിരിച്ചറിയൽ ഓൺലൈൻ വഴി ആധികാരികമാക്കുക

INFORMATION

- Aadhaar is proof of identity, not of citizenship.
- To establish identity, authenticate online.

07D / 4711285

- ആധാർ രാജ്യമെമ്പാടും അംഗീകാരമുള്ളതാകുന്നു.
- ഭാരതീയൻ സർക്കാർ സർക്കാരിനോ സൗകര്യങ്ങൾ പ്രദാനം ചെയ്യുന്നതിന് ആധാർ സഹായകമാകും.
- Aadhaar is valid throughout the country.
- Aadhaar will be helpful in availing Government and Non-Government services in future.



ഭാരതീയ തിരിച്ചറിയൽ അതോറിറ്റി
Unique Identification Authority of India

ഓഫീസ് വിലാസം: ഭാരതപ്പുഴ
സൗമ്യ മനു
കൂറകനാട്ടം, പുലിങ്കര,
കുലിച്ചിറ പി.ഒ., കുലിച്ചിറ,
കുലിച്ചിറ തൃശ്ശൂർ,
മുക്തപുരം, കേരളം, 680724

2091 9006 9652



1847 1800 200 1947

help@uidai.gov.in

www.uidai.gov.in



1570 5
73 = 3600

GOVERNMENT OF KERALA
BOARD OF HIGHER SECONDARY EXAMINATION
HIGHER SECONDARY EXAMINATION (CLASS XII)

No. S 0023508

CERTIFICATE

Register Number	153402
-----------------	--------

This is to certify that Sri/Smt. SOUMIA RAPPAL has appeared for the

HIGHER SECONDARY EXAMINATION (SCIENCE GROUP) held in March 2001

He/She has PASSED the Examination in First Class.

The marks obtained by the Candidate for the different subjects are shown below :

SUBJECTS	Marks Obtained			Min. Marks	Max. Marks
	In figures		In words		
	Subject	Part Total			
PART I ENGLISH	97	97	Nine Seven	53	150
PART II MALAYALAM	123	123	One Two Three	53	150
PART III (Optionals)					
PHYSICS	Theory	55		30	100
	Practical	46		...	50
	Total	101		53	150
CHEMISTRY	Theory	43		30	100
	Practical	48		...	50
	Total	91		53	150
BIOLOGY	Theory	42		30	100
	Practical	43		...	50
	Total	85		53	150
MATHEMATICS		82		53	150
TOTAL FOR PART III		359	Three Five Nine	212	600
GRAND TOTAL (PARTS I+II+III)		579	Five Seven Nine	318	900



[Signature]

Place : Thiruvananthapuram
Date : 29-05-2001

Joint Director (Examinations),
Department of Higher Secondary Education,
Kerala State

