




CURRICULAM VITAE

From

RIYA MOL P SAJI
PALACHUVATTIL HOUSE
THRISSILERY P O
KARTIKULAM
WAYANAD DIST
KERALA -- 670646

 : 8590635706

 : riyamolpsaji@gmail.com

Respected Sir/Madam,

Sub: Application for the post of Staff Nurse

I would like to apply for the post of Nursing Staff in your Hospital. I have a very good academic background in GNM Nursing has enabled me to develop and strengthen my skills further in the medical field. I believe that I can make a significant and valuable contribution to your hospital.

Thanking you and awaiting a positive from you.

Yours Faithfully

RIYA MOL P SAJI

Place: WAYANAD DIST, KERALA

Date:

PERSONAL PROFILE

Name : **RIYA MOL P SAJI**
Father's Name : Saji P M
Date Of Birth : 28/05/1999
Gender : Female
Marital Status : Single
Religion : Christian
Nationality : Indian
Mobile : 8590635706
Email : riyamolpsaji@gmail.com

OBJECTIVES

- To be proficient performer in the field of Nursing
- To strive for the highest level of competency and personally
- To work in team towards the betterment of the organization

PERSONAL STRENGTH

- Pleasing personality
- Versatile Working behaviour
- Good communication skills
- Willingness to learn and update myself with new methodologies and technologies
- Positive attitude and team spirit
- Team work

ACADEMIC QUALIFICATION

Qualification	School/College	Stream	University	Year of Passing	Percentage
SSLC	G H S S Thrissilery	Regular	Board of Kerala	March 2015	89
PLUS TWO	G H S S Thrissilery	Science	Board of kerala	March 2017	75

PROFESSIONAL QUALIFICATION

Qualification	Institution	Council	Year	Year of Passing	Percentage
GNM Nursing	School of Nursing St. Thomas Mission Hospital Kattanam	Kerala Nurses & Midwives Council	1 st Year	2018	75
			2 nd Year	2019	76
			3 rd Year	2021	79

EXPERIENCE

- Fresher

TRAINING EXPERIENCE

- Hospital training (for medical Surgical) at **GOVERNMENT TALUK HOSPITAL** Kayankulam
- Phychiatric training at **KCM HOSPITAL** Nooranad
- Hospital Training (for OBG) at **EBENZER Hospital** kayankulam
- Hospital Training AT **ST.THOMAS MISSION HOSPITAL** Kattanam

DETAILS OF REGISTRATION

Nursing Registration	Registration Number
Kerala Nurses & Midwives Council	KL01202101889

DECLARATION

I hereby declare the above furnished information is complete and to the best of my knowledge and belief.

Thanking you

Yours Faithfully



RIYA MOL P SAJI

Date:

Place : WAYANAD DIST, KERALA