



SOUMYA MURALI

CAREER OBJECTIVE

Dedication to my noble profession of Nursing, to work in any kind of environment with endurance regardless of hurdles. I would like to be part of a core team in a professional organization and believe that my abilities attitude and dedication would help in adding value to the organization

WORK EXPERIENCE

Designation – Registered Nurse in ICU

Work Experience – 10 years

Employment History

Last Employer – Presently working as a Staff Nurse in Aster Sanad Hospital, Riyadh in KSA.

Date of Employment -17 May 2021 to 17 May 2023

Previous Employer

1. Name of the Hospital : Abhay Hospital, Bangalore
Date of Employment : 15/11/2018 to 11/11/2020
2. Name of Hospital : Prasanthi Hi-tech Hospital, Manjeri
Date of Employment: 06/06/2016 to 07/11/2018
3. Name of Hospital : Sree UthramThirunal Hospital,
Ulloor, Trivandrum
Date of Employment : 21/03/2013 to 03/05/2016

EDUCATION

Course	Institution	Year
Diploma in General Nursing and Midwifery	SUT School of Nursing Pattom	2006-2010

CERTIFICATES

ACLS (American Heart Association)

BLS (American Heart Association)

EXPERIENCE

10 years in Intensive Care Unit

CONTACT DETAILS

Contact No: +919746789204

Email id : soumyamurali10@gmail.com

RESIDENTIAL ADDRESS

Salu Vilasom

Kumaramkarikkom, Kulathupuzha P.O

Kollam, Kerala, India

Pin: 691310,

PERSONAL DETAILS

Gender: : Female

Religion : Hindu, Nair

Nationality : Indian

Civil Status : Divorced

LANGUAGES

🇬🇧 English

🇮🇳 Malayalam

🇮🇳 Hindi

PASSPORT DETAILS

Passport No. : P1802101

Date of Issue : 09/12/2016

Date of Expiry : 08/12/2026

Place of Issue : Trivandrum

PROFESSIONAL MEMBERSHIP

- Saudi council registration as a Specialist with MOH license
- Kerala Nursing Council
- Indian Nursing Council

REFERENCE

- Mr.Biju Varkey
Nursing Supervisor
Aster Sanad Hospital
Phone : +966112407778
Mob: +966 599391704
Email : biju.varkey@astersanadhospital.com
- Dr.Muhammed Hayat
ICU Specialist
Aster Sanad Hospital
Phone : +966 112407778
Mob: +966 544205917
Email : drhayat@yahoo.com

DECLARATION

I declare that the information given above is true and correct to the best of my knowledge and belief.

SOUMYA MURALI

Place:

Date :