

Government of Jammu & Kashmir
Health and Medical Education Department
GOVERNMENT NURSING COLLEG/GNMS, PULWAMA

(Email: gmc.anantnag2018@gmail.com Website: www.gmc.anantnag.net Tele: 01933227624)

NOTICE

Subject: Admission Notification to left over seats for the 12th based Diploma Course at Govt. Nursing College/GNM School Pulwama.

Ref 2: No: SAHC-J&K/Leftover/1/716-727 Dated: 16-10-2025.

Pursuant to the notification issued by State Allied Health Care Council J&K vide referred above, applications are invited from eligible/ desired candidates for admission to left over seats in the following diploma Course at Govt. Nursing College/GNM School Pulwama.

S. No	Name of the Course	Leftover seats	OM	EWS	SC	ST1	ST2	OBC	RBA
01	Laboratory Assistant	03	**	**	01	01	01	**	**
02	Medical Assistant/ Pharmacist	06	01	01	01	01	01	01	**
03	ISM Pharmacist	09	04	01	**	01	01	01	01

The selection of the candidates to such course shall be in accordance with the rules and regulations issued by INC & J&K Board of professional Entrance Examinations and J&K Paramedical Council/JK State Allied Health Care Council as referred above.

Important information:

1. Application Forms will be available on the GMC Anantnag Website (www.gmc.anantnag.net) from 22-10-2025 to 25-10-2025.
2. Last date for submission of duly filled application forms shall be 25-10-2025 till 03 PM
3. The application forms complete in all respects along with requisite documents and a Demand Draft/Pay in slip of Rs: 300/- (in favour of Principal Govt. Nursing College/GNM Pulwama) are to be submitted in the office of the Principal Govt. Nursing College Pulwama.

No: GNC/Pul/Estt./578-82

Dated: 18/10/2025


Principal,
Govt. Nursing College/GNM
Pulwama.

Copy to the,

1. Principal, Govt. Medical College Anantnag for information.
2. Chairperson State Allied Healthcare Council J&K for information.
3. Joint Director Information Kashmir/District Information Officer Pulwama with the request to kindly publish the above notification in two leading newspapers of valley for wide publicity.
4. In-charge NIC, Pulwama with the request to kindly uploading the above notification on District NIC website for information of concerned candidates.
5. In-charge College website, GMC Anantnag for uploading the above notification on college website for information of concerned candidates.

Application Form for Leftover seats in Diploma training Courses

Bank Slip/ D.D. No		FORM Number:	
Date:		Date of submission:	
COURSE APPLIED			

Fill in Capital letters (to be filled in candidate)

1. Name of the candidate _____
2. Father/Guardian: _____
3. Date of Birth: _____
4. Age as on 31st December 2025: _____
5. (a) Gender _____ (b) Blood Group _____
6. Religion _____ (Muslim/Hindu/Sikh/Bodh/Jain/Christan)
7. Category _____ (SC/ST-I/ST-II/OBC/RBA/EWS)
8. Permanent Address: _____
Tehsil: _____ District: _____ Pin _____
9. Present Address: _____
Tehsil: _____ District: _____ Pin _____
10. Contact Number Personal: _____
Contact Number Guardian: _____
Email address: _____@ _____
11. Marks obtained in (10th) _____ Max. Marks _____ Percentage _____
Roll No: _____ Year of passing _____
12. Marks obtained in (12th) _____ Max. Marks _____ Percentage _____
Roll No: _____ Year of passing _____
13. Examination Details 12th Class:

Subjects	Marks Obtained	Maximum Marks	Percentage

14. Documents to be submitted: ()

1. Date of Birth Certificate.
2. 10th / 12th Marks Card.
3. Domicile Certificate.
4. Valid Category Certificate, if any.

Photo

Signature of Candidate

Date: _____

COLLEGE/INSTITUTION COPY

The Jammu & Kashmir Bank Ltd.
Pay in Slip for Govt. GNM School PULWAMA
(HEALTH DEPARTMENT)

A/C Number: 0054040500040889
(Principal GNM School Pulwama)

Date: _____ T.Id/Scroll No: _____

Name: _____
S/O,D/O: _____
Address: _____
Course: _____

Received the sum of Rs: _____
in words: _____

Details of dues:

1. Admission Fee	Rs: _____
2. Registration Fee	Rs: _____
3. Examination Fee	Rs: _____
4. Others:	Rs: _____

Bank Seal & Signature

CANDIDATE COPY

The Jammu & Kashmir Bank Ltd.
Pay in Slip for Govt. GNM School PULWAMA
(HEALTH DEPARTMENT)

A/C Number: 0054040500040889
(Principal GNM School Pulwama)

Date: _____ T.Id/Scroll No: _____

Name: _____
S/O,D/O: _____
Address: _____
Course: _____

Received the sum of Rs: _____
in words: _____

Details of dues:

1. Admission Fee	Rs: _____
2. Registration Fee	Rs: _____
3. Examination Fee	Rs: _____
4. Others:	Rs: _____

Bank Seal & Signature

JK BANK COPY

The Jammu & Kashmir Bank Ltd.
Pay in Slip for Govt. GNM School PULWAMA
(HEALTH DEPARTMENT)

A/C Number: 0054040500040889
(Principal GNM School Pulwama)

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Bank Seal & Signature