



Tribhuvan University
Institute of Medicine
Examination Control Division
Maharajgunj, Kathmandu, Nepal.

Recent Passport size
Photograph

Examination Form

Name of Campus/College: T.U.IOM, POKHARA NURSING CAMPUS

Address of Campus/College: POKHARA-12, RAMGHAT

Exam Center: POKHARA

Exam Roll No.

Academic Programme	Level	Phase	Year	Professional	Examination
NURSING	BNS	-	THIRD	NURSING	Regular <input type="checkbox"/> (Please tick) Partial <input type="checkbox"/>

Personal Data: (Please follow your previous academic certificate)

Full Name (BLOCK LETTER)	Surname	Middle name	First name
नेपाली (Devanagari)			

Sex: Male Female

Nationality: _____

Date of Birth (as in school certificate)	Day	Month	Year
	A D		
B S			

Father's Name:

Mother's Name:

Permanent Address	VDC/Municipality, State	Country	Mobile#	Email
Current Address				

Academic Records:

T.U. Regd. No.

Educational Background

Title of Qualification	Address of Institute	Period		Roll	Percentage	Division
		From	Till			
		From	Till			
		From	Till			
		From	Till			

Examination Papers:

THIRD YEAR

S.N.	All Subjects are compulsory	Please write tick (✓) in which subject/s to be appear		Internal Asst. Marks	Final Marks	Marks obtain in Internal Asst.
		Code	Total Marks			
1	Leadership & Management TH	XXIII	100	20	80	
2	Management (Practicum) Pr.	XXIV	100	75	25	
3	Research Applied To Nursing TH	XXV	100	20	80	
4	Research (Practicum) Pr.	XXVI	100	75	25	
5	Advance Adult Nursing II TH	XXVII	50	10	40	
6	Adult Health Nursing II Pr	XXVIII	100	50	50	