

ছবি
এখানে ইউনিফর্ম পরিহিত ম্যাট পেপারে ল্যাব
প্রিন্ট করা পিছনে সত্যায়িত এক কপি ছবি
স্টপলার দিয়ে সংযুক্ত করতে হবে।



BNMC Form No.

Date:
Receipt No.....
Taka.....

Bangladesh Nursing & Midwifery Council

Bangladesh Nursing & Midwifery Council Act (Act No. 48 of 2016)

ছবি
এক কপি পাসপোর্ট সাইজের
ইউনিফর্ম পরিহিত ছবি আঁকা
দিয়ে লাগানোর পর ছবি ও ফর্ম
মিলে অধ্যক্ষ/ইনচার্জ সত্যায়িত
করতে হবে যেনো চেহারা ঢেকে
না যায়।

Date:

To
The Registrar
Bangladesh Nursing & Midwifery Council
203 Shaheed Sayed Nazrul Islam Sarani
(Old-86 Bijoy Nagar) Dhaka-1000.

Subject: **Application for Masters of Science in Nursing (MSN) Registration**

Dear Sir,

I request that, my name, address, educational qualification and current employment details as stated below and apply to be admitted in the Register of Masters of Science in Nursing (MSN) at Bangladesh Nursing & Midwifery Council Act (Act No. 48 of 2016). If I am registered, I under take that I will in the practice of my profession as a Nurse-Midwife, Observe & be bound the rules & regulations issued by the Bangladesh Nursing & Midwifery Council. So far as they affect me and that of the Council shall be any time after due enquiry order my name to be removed from the Register. I will return my certificate to the Registrar/BNMC.

Registration No. (BNMC Use) _____ Date of Registration (BNMC Use) _____

(Day) (Month)(Year)

Student Registration No. _____ Session: _____

Registration fee _____ Cash (If cash Tick) _____ Bank Draft No. & Date _____

Full Name (Bangla) _____ Full Name (English) _____

Father' Name (English) _____ Mother's Name (English) _____

(Capital Letter)

(Capital Letter)

Sex (Tick) Male ☐ Female ☐

National ID _____ Passport Number _____

Date of Birth: _____

Nationality _____

(Day) (Month) (Year)

Religion: _____ Marital Status: _____

E-mail Address _____ Mobile/Cell Number: _____

College/Institute: _____

Village/House/Road _____ Division _____

District _____ Upazilla/Thana _____

Post Office _____ Postal Code _____

Village/House/Road _____ Division _____

District _____ Upazilla/Thana _____

Post Office _____ Postal Code _____

Comprehensive/Final/Qualifying/License Exam Result (For Initial Registration)		
Examination Result for:	Date of Passing dd/mm/yyyy	Score Obtained/Results
Masters of Science in Nursing (MSN)	/ /	

Level of Education	College/University/ Institute Name	Class/ CGPA	Month & Year	Duration	Country
Pre-Registration N/M Education					
Diploma in Nursing Science & Midwifery					
Diploma in Nursing Science & orthopedic					
Diploma in Midwifery					
B.Sc in Nursing-Basic					
B.Sc in Nursing-Post Basic					
B.Sc in Public Health Nursing-Post Basic					
Post- Registration N/M Education					
B.Sc/Public Health Nursing					
Masters of Science in Nursing (MSN)					
Masters of Philosophy in Nursing/ MPhil					
Doctorate of Philosophy in Nursing/PhD					
Post- Registration N/M Education other than N/M					
Diploma Course					
Certificate Course					
Bachelor's Degree					
Master's Degree					
Doctorate/PhD					
Specialized Course					
Others					

Current Employment Status

Employed (Tick) ☐ Yes ☐ No Country of Employment: _____

Type of employer (Tick) ☐ Public ☐ Private ☐ NGO ☐ Unemployed Place of work: _____

Employment Setting (Tick) ☐ Health Facility ☐ Educational Institution ☐ Other If Other, please specify: _____

Registrar
Bangladesh Nursing & Midwifery Council

Signature of Director/Principal/In-charge
with Seal (Name & Date)

Signature of Applicant

INSTRUCTIONS

1. The applicant must be fill up all particulars by his/her own hand writing in neat & legible hand.
2. The name entered by applicants in their application must correspond with their SSC certificate.
3. Application must have signed by Director/Principal/In-Charge for acceleration of process.
4. All papers must have attested by Head of Institution.
5. Registration will be provided after production of testimonial from the Head of Institution where he/she is graduated. Enclose true copy of SSC/HSC or equivalent certificate. Submit attested photocopy of SSC/HSC/equivalent certificate, if not submitted true copy.
6. Two copies of recent passport size photograph of the applicant to be submitted with application attested by Director/Principal/Instructor In-charge of the respective College/Institute. Photo must be attached with aica gum. (Photo must be matt paper, lab print & light color).
7. When registered, he/she will have to abide by the existing rules and regulations of the Council or rules to be framed from time to time.
8. He/She also sign the Code of Nursing ethics declaration form and attach it with application.
9. Masters of Science in Nursing (MSN) applicant must submit student registration.
10. Masters of Science in Nursing (MSN) applicant must submit certificate of university and updated professional certificate by council with form.
11. Write down amount of fee in specific box.
12. Application must be forwarded by the Director/Principal/Instructor In-charge.
13. Registration may be cancelled, if any stage the information submitted is found to be incorrect.

Sd/-
Registrar
Bangladesh Nursing & Midwifery Council

BANGLADESH NURSING & MIDWIFERY COUNCIL

Bangladesh Nursing & Midwifery Council Act (Act No. 48 of 2016)

Code of Ethics & Professional Conduct

I amLicense Registration No.

Passed from College/Institute.....

Now working.....

Registered Nurse-Midwife/.....hereby declared that, I shall act all times in suchmanner as to:

- (a) Safeguardand protect the interests of individual patients/clients.
- (b) Serve the interest of the society.
- (c) Justify public trust and confidence.
- (d) Uphold and enhance the good standing and reputation of the profession.
- (e) Will be in the practice of my profession as a nurse midwife, observe & be bound the rules & regulations issued by the Bangladesh Nursing & Midwifery Council.
- (f) The council shall be at any time after due enquiry order my name to be removed from the register if proved any misconduct against me and will return Registration-Certificate to the Registrar/BNMC.

Signature of the Registered Nurse-Midwife.

Date: