University of Jammu

To be filled by the B.Sc. Nursing 1st & 2nd Year Candidate with her / his own handwriting

Page No.: ___

(May *2022)* ***(May 2022)***

Examination……

Subject ……....

Paper ……...

Course No…….

Date……...

Total No. of Pages used	

Code No.: To be filled by Office

FOR EVALUATORS

Q.No.	Part-I	Part-II	Part-III	Part-IV	Marks
Total Marks					

Total Marks in words……

Signature of the Evaluator……..

Code No.:

To be filled by Office

Roll No:

To be filled by the Candidate

Candidate's Name	
Father's Name	
Examination	
Subject	
Course No.	
Date	
Candidate's Signature	

Stamp of the concerned College Principal	

(Kindly turn over)

{Please read instructions overleaf}

University of Jammu