

PROVISIONAL LIST OF STAFF NURSE AFTER SCRUTINY OF FORMS

Sl. No.	Application No.	Name	Date of Birth	Category	Gender	Father/Husband's Name	Essential Qualification						Any Relevant Higher Edn.		Relevant Experience		DD No & Date	Amount	Form Status	Remarks		
							Obtained Percentage in Matriculation	Score out of 10 Marks	Obtained Percentage in Intermediate	Score out of 10 Marks	Obtained Percentage in GNM Training	Score out of 40 Marks	Name of Course	Obtained Percentage in Higher Edn.	Score out of 25 Marks	No. of Years (Month converted in yrs.)					Score out of 15 Marks (Max. Marks is 15)	Total Score (out of 100)
1	2	3	4	5	6	7	9	10	11	12	13	14	14a	15	16	17	18	19	20	21	22	23

Staff Nurse under NUHM, Code-10

1	10.1	BENA ROSELINE TUDU	14/08/1985	ST	F	BABLU TUDU	57.83	5.78	46.40	4.64	83.53	33.41	NA	0.00	0.00	0.00	0.00	0.00	0.00	43.84	781504/31-05-2021	200.00	Accepted	Attach Pay Slip/ Bank Statement for claiming experience.
2	10.2	SANGITA SOREN	08/06/1992	ST	F	ALFRED SOREN	46.80	4.68	56.80	5.68	82.78	33.11	NA	0.00	0.00	0.00	0.00	0.00	0.00	43.47	498161/01-06-2021	200.00	Accepted	Attach Pay Slip/ Bank Statement for claiming experience.
3	10.3	SANDHYA BHARTI	26/12/1992	BC-II	F	PRAMOD KUMAR MANDAL	53.20	5.32	51.60	5.16	89.60	35.84	NA	0.00	0.00	0.00	0.00	0.00	0.00	46.32	019911/27-05-2021	400.00	Rejected	3rd year Marksheet not attached & Pay Slip/ Bank Statement for experience not attached.
4	10.4	SONI MURMU	26/06/1991	ST	F	STEFAN MURMU	55.60	5.56	49.00	4.90	72.80	29.12	NA	0.00	0.00	1.33	4.99	0.00	0.00	44.57	781458/28-05-2021	200.00	Rejected	Not registered under J.N.C.
5	10.5	ANJU INNOSENT SOREN	23/06/1991	ST	F	ANAND MARANDI	58.40	5.84	49.00	4.90	70.00	28.00	NA	0.00	0.00	2.28	8.54	0.00	0.00	47.28	136870/25-05-2021	200.00	Accepted	Form Accepted.
6	10.6	INDU KUMARI	20/12/1995	BC-I	F	SUDHESH PRASAD BRAHM	59.60	5.96	55.00	5.50	81.56	32.62	NA	0.00	0.00	0.00	0.00	0.00	0.00	44.08	330363/28/05/2021	400.00	Rejected	Internship Marks & Pay Slip/ Bank Statement not attached.
7	10.7	ARCHINA KUMARI	19/11/1990	BC-I	F	PANKAJ KUMAR PANDIT	50.80	5.08	46.20	4.62	84.52	33.81	NA	0.00	0.00	0.00	0.00	0.00	0.00	43.51	507772/24-05-2021	400.00	Accepted	Attach Pay Slip/ Bank Statement for claiming experience.
8	10.8	SABINA HANSDA	01/01/1996	ST	F	SUPHAL HANSDA	57.60	5.76	58.80	5.88	68.90	27.56	NA	0.00	0.00	0.00	0.00	0.00	0.00	39.20	781499/31-05-2021	200.00	Accepted	Form Accepted.
9	10.9	KIRAN MARANDI	26/01/1995	ST	F	BARKA MARANDI	66.60	6.66	58.60	5.86	70.34	28.14	NA	0.00	0.00	0.00	0.00	0.00	0.00	40.66	484068/25-05-2021	200.00	Accepted	Attach Pay Slip/ Bank Statement for claiming experience.
10	10.10	PUNAMI KUMARI	18/05/1992	BC-I	F	RAKESH KUMAR	60.00	6.00	47.20	4.72	84.44	33.78	NA	0.00	0.00	0.00	0.00	0.00	0.00	44.50	645640/24-05-2021	400.00	Rejected	1st & 2nd year Marks Sheet not attached.

Handwritten marks and signatures: A blue checkmark, a signature 'A-1', and a green checkmark.

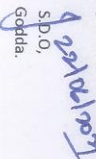
Sl. No.	Application No.	Name	Date of Birth	Category	Gender	Father/Husband's Name	Essential Qualification				Any Relevant Higher Edn.	Relevant Experience		DD No & Date	Amount	Form Status	Remarks					
							Obtained Percentage in Matriculation	Score out of 10 Marks	Obtained Percentage in Intermediate	Score out of 10 Marks		Obtained Final Percentage in GNM Training	Score out of 40 Marks					Score out of 25 Marks	No. of Years (Month converted in yrs.)	Score out of 15 Marks (Max. Marks is 15)	Total Score (out of 100)	
1	2	3	4	5	6	7	9	10	11	12	13	14	14a	15	16	17	18	19	20	21	22	23
11	1011	SHANTI KUMARI	06/10/1994	GEN	F	SITARAM MAHTO	54.60	5.46	48.40	4.84	73.28	29.31	N/A	0.00	0.00	0.00	0.00	39.61	492971/24-05-2021	400.00	Accepted	Attach Pay Slip/ Bank Statement for claiming experience.

Staff Nurse under NUHM, Code-10


 District Co-operative Officer-Cum
 I/c Officer, Legal Section,
 Godda.


 Assistant Director,
 Social Security Cell,
 Godda.


 District Welfare Officer,
 Godda.


 S.P.O.,
 Godda.


 Deputy Development Commissioner,
 Godda.

Note : If any applicant has claim/objection (सारा/सामग्री) with the details above or want to submit further documents as per the Remarks Column, they can provide them within one week i.e dated 30.06.2021, 05:00 PM at email address drda_godda@yahoo.co.in or by post or by hand in DRDA.
 Mailing Address : DDC, Godda, DRDA, Vikas Bhawan, PO+Dist-Godda, Jharkhand, PIN-814133
 Email Address : drda_godda@yahoo.co.in