For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/02/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AKRE CHUNARIYA NARAYAN
Seat Number : 1
Name of the Institution : CAMA ALBLESS HOSPITAL, MUMBAI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/02/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHOIR NITISHA RAJENDRA
Seat Number : 2
Name of the Institution : AKI INSTITUTE OF NURSING, NAGPADA, MUMBAI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DANGE ASMA BASHIR
Seat Number : 3
Name of the Institution : AKI INSTITUTE OF NURSING, NAGPADA, MUMBAI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHARAT PRACHI DIPAK
Seat Number : 4
Name of the Institution : AKI INSTITUTE OF NURSING, NAGPADA, MUMBAI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 14/07/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JUNDRE TARANNUM MEHBOOB
Seat Number : 5
Name of the Institution : AKI INSTITUTE OF NURSING, NAGPADA, MUMBAI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : I II III IV
Signature of the Holder : REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 02/07/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHAN NAIDA ASLAM
Seat Number : 6
Name of the Institution : AKI INSTITUTE OF NURSING, NAGPADA, MUMBAI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : I II III V VI IV
Signature of the Holder : REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Hall Ticket Details

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:** 20/04/1998

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** MISS KINI JYOTI BABAN

**Seat Number:** 7

**Name of the Institution:** AKI INSTITUTE OF NURSING, NAGPADA, MUMBAI

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** CAMA & ALBLESS HOSPITAL, MUMBAI

**Subjects:** 1

**Signature of the Holder:**

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### Hall Ticket Details

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:** 14/09/1993

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** SMT KINI RUCHITA VINOD

Nee(PATIL AAROHI SAMEER)

**Seat Number:** 8

**Name of the Institution:** AKI INSTITUTE OF NURSING, NAGPADA, MUMBAI

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** CAMA & ALBLESS HOSPITAL, MUMBAI

**Subjects:** 1

**Signature of the Holder:**

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
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<th>Sr. No.</th>
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<th>10</th>
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**

- AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

- 12/10/1997

**Date Of Exam**

- 14/01/2020 To 17/01/2020

**Name of the Candidate**

- MISS PAWAR PRAJAKTA NITIN

**Seat Number**

- 9

**Name of the Institution**

- AKI INSTITUTE OF NURSING, NAGPADA, MUMBAI

**Name of the Examination**

- AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

- CAMA & ALBLESS HOSPITAL, MUMBAI

**Subjects**

- I II

**Signature of the Holder**

**Note:**

1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

**Date Of Birth**

- 21/11/2001

**Date Of Exam**

- 14/01/2020 To 17/01/2020

**Name of the Candidate**

- MISS SHAIKH SAJEEDAKHATOON BASHEERALAM

**Seat Number**

- 10

**Name of the Institution**

- AKI INSTITUTE OF NURSING, NAGPADA, MUMBAI

**Name of the Examination**

- AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

- CAMA & ALBLESS HOSPITAL, MUMBAI

**Subjects**

- I II III V VI IV

**Signature of the Holder**

**Note:**

1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASA IKAR MANSI DINESH
Seat Number : 11
Name of the Institution : AKI INSTITUTE OF NURSING, NAGPADA, MUMBAI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 11

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/11/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JADHAV PRITI SURESH
Seat Number : 12
Name of the Institution : SMT. S. C. NANAVATI OF POLYTECHNIC SCHOOL OF NURSING, MUMBAI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 12
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/08/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KOKATE PRUTHVI EKNATH
Seat Number : 13
Name of the Institution : SMT. S. C. NANAVATI OF POLYTECHNIC SCHOOL OF NURSING, MUMBAI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT SIDDHI MAHESH
Seat Number : 14
Name of the Institution : SMT. S. C. NANAVATI OF POLYTECHNIC SCHOOL OF NURSING, MUMBAI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No.  15

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/06/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SADAMATE AKANSHA NIVAS
Seat Number : 15
Name of the Institution : SMT. S. C. NANAVATI OF POLYTECHNIC SCHOOL OF NURSING, MUMBAI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL , MUMBAI
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No.  16

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PATIL PRADNYA PUNDALIK
Seat Number : 16
Name of the Institution : LIFE LINE HOSPITAL, PANVEL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL , MUMBAI
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Hall Ticket: 13/01/2020

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
11/09/1999

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS BHADANGE SUVARNA SANTOSH

**Seat Number**
17

**Name of the Institution**
KALAVATI INSTITUTE OF NURSING EDUCATION, AIROLI NAVI MUMBAI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
CAMA & ALBLESS HOSPITAL, MUMBAI

**Subjects**
I IV

**Signature of the Holder**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**Sr. No. 18**

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**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
25/09/1999

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS BHOIR DAKSHATA BALU

**Seat Number**
18

**Name of the Institution**
KALAVATI INSTITUTE OF NURSING EDUCATION, AIROLI NAVI MUMBAI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
CAMA & ALBLESS HOSPITAL, MUMBAI

**Subjects**
II III IV

**Signature of the Holder**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 21/07/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAIKWAD VRUSHALI MACHCHHINDRANATH

Seat Number : 19

Name of the Institution : KALAVATI INSTITUTE OF NURSING EDUCATION, AIROLI NAVI MUMBAI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI

Subjects : III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 19

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 10/08/1995

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAVALI JAYASHREE CHANDAR

Seat Number : 20

Name of the Institution : KALAVATI INSTITUTE OF NURSING EDUCATION, AIROLI NAVI MUMBAI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI

Subjects : III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 20
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 06/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MADHAVI MONIKA KISAN
Seat Number : 21
Name of the Institution : KALAVATI INSTITUTE OF NURSING EDUCATION,
AIROLI NAVI MUMBAI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL , MUMBAI
Subjects : IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the
MSBNPE through institute authority before commencement of the examination.

Sr. No. 21

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 08/11/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MALI SUREKHA BHAGAVAN
Seat Number : 22
Name of the Institution : KALAVATI INSTITUTE OF NURSING EDUCATION,
AIROLI NAVI MUMBAI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL , MUMBAI
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the
MSBNPE through institute authority before commencement of the examination.

Sr. No. 22
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<th>23</th>
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

13/01/2020

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

17/04/1992

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS SURESH GUNITA SHIVAJI

**Seat Number**

23

**Name of the Institution**

KALAVATI INSTITUTE OF NURSING EDUCATION, AIROLI NAVI MUMBAI

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

CAMA & ALBLESS HOSPITAL, MUMBAI

**Subjects**

I II III V VI IV

**Signature of the Holder**

Note:

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

13/01/2020

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

27/12/1999

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS UMTOL RINKU DAMODAR

**Seat Number**

24

**Name of the Institution**

KALAVATI INSTITUTE OF NURSING EDUCATION, AIROLI NAVI MUMBAI

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

CAMA & ALBLESS HOSPITAL, MUMBAI

**Subjects**

III IV

**Signature of the Holder**

Note:

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/11/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WANGAD SAVITA SHANTARAM
Seat Number : 25
Name of the Institution : KALAVATI INSTITUTE OF NURSING EDUCATION, AIROLI NAVI MUMBAI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHENDE AKSHATA SUNIL
Seat Number : 26
Name of the Institution : INSTITUTE OF NURSING EDUCATION, DOMBIVALI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MANE SHUBHANGI HANUMANT
Seat Number : 27
Name of the Institution : INSTITUTE OF NURSING EDUCATION, DOMBIVALI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : I IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/08/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MISHRA RISHU MUNESHKUMAR
Seat Number : 28
Name of the Institution : INSTITUTE OF NURSING EDUCATION, DOMBIVALI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 03/02/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PAWAR ASMITA SHIVAJI

Seat Number : 29

Name of the Institution : INSTITUTE OF NURSING EDUCATION, DOMBIVALI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI

Subjects : I II IV

Signature of the Holder : REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 20/06/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS RAJBHAR POOJA RADHESHYAM

Seat Number : 30

Name of the Institution : INSTITUTE OF NURSING EDUCATION, DOMBIVALI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI

Subjects : I II III IV

Signature of the Holder : REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 25/07/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SHARMA PREETI BABURAM

Seat Number : 31

Name of the Institution : INSTITUTE OF NURSING EDUCATION, DOMBIVALI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI

Subjects : I II III IV

Signature of the Holder : SIGNATURE

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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Sr. No. 31

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 19/02/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BHOIR HEMANGI RATAN

Seat Number : 32

Name of the Institution : NAVJEEVAN SCHOOL OF NURSING, SHAHAPUR, THANE

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI

Subjects : III

Signature of the Holder : SIGNATURE

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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Sr. No. 32
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth :  29/10/1999
Date Of Exam :  14/01/2020 To 17/01/2020
Name of the Candidate : MISS KACHARE VRUTTIKA BIPIN
Seat Number :  33
Name of the Institution : NAVJEEVAN SCHOOL OF NURSING, SHAHAPUR, THANE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL , MUMBAI
Subjects :  I III IV
Signature of the Holder :  

Note:  1) Candidate will not be allowed in examination hall without this Hall Ticket.
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REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION,MUMBAI

---

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth :  09/11/2000
Date Of Exam :  14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE PRAMILA RAVINDRA
Seat Number :  34
Name of the Institution : NAVJEEVAN SCHOOL OF NURSING, SHAHAPUR, THANE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL , MUMBAI
Subjects :  I III IV
Signature of the Holder :  

Note:  1) Candidate will not be allowed in examination hall without this Hall Ticket.
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 20/03/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SATPUTE PAYAL MADHUKAR

Seat Number : 35

Name of the Institution : PRATIBHA SCHOOL OF NURSING, KOPERKHAI RANE, NAVI MUMBAI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI

Subjects : IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 13/06/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS JADHAV SONALI SHANKAR

Seat Number : 36

Name of the Institution : N. K. T. T. SCHOOL OF NURSING, BHIWANDI, THANE

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI

Subjects : IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 37

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/09/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE RESHMA ANURATH
Seat Number : 37
Name of the Institution : N. K. T. T. SCHOOL OF NURSING, BHIWANDI, THANE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 38

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/05/1988
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : SMT PATIL ROHINI BALKRUSHNA
                      Nee(PASHTE ROHINI KAILASH)
Seat Number : 38
Name of the Institution : N. K. T. T. SCHOOL OF NURSING, BHIWANDI, THANE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : III IV
Signature of the Holder :

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<thead>
<tr>
<th>Sr. No.</th>
<th>Name of the Candidate</th>
<th>Date Of Birth</th>
<th>Date Of Exam</th>
<th>Name of the Institution</th>
<th>Name of the Examination</th>
<th>Name of the Exam. Centre</th>
<th>Subjects</th>
<th>Signature of the Holder</th>
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<tr>
<td>39</td>
<td>MISS PRAJAPATI BABY BHAGWANDAS</td>
<td>15/08/1998</td>
<td>14/01/2020 To 17/01/2020</td>
<td>N. K. T. T. SCHOOL OF NURSING, BHIWANDI, THANE</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
<td>CAMA &amp; ALBLESS HOSPITAL , MUMBAI</td>
<td>II III IV</td>
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<td>40</td>
<td>MISS RAUT SWAPNALI RAMESH</td>
<td>02/04/2000</td>
<td>14/01/2020 To 17/01/2020</td>
<td>N. K. T. T. SCHOOL OF NURSING, BHIWANDI, THANE</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
<td>CAMA &amp; ALBLESS HOSPITAL , MUMBAI</td>
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</table>
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 12/12/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS TAYDE KOMAL VIJAY

Seat Number : 41

Name of the Institution : N. K. T. T. SCHOOL OF NURSING, BHIWANDI, THANE

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL , MUMBAI

Subjects : I II III

Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/11/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS WAGHMARE ASHWINI WAMAN

Seat Number : 42

Name of the Institution : N. K. T. T. SCHOOL OF NURSING, BHIWANDI, THANE

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL , MUMBAI

Subjects : III

Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/04/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ASHTIVKAR PUJA VITTHAL
Seat Number : 43
Name of the Institution : D. D. VISPUTE SCHOOL OF NURSING, PANVEL, RAIGAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/08/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHADANE NAMRATA JIBHAU
Seat Number : 44
Name of the Institution : D. D. VISPUTE SCHOOL OF NURSING, PANVEL, RAIGAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 18/07/1997

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS BHOIR PRITI PRAKASH

Seat Number: 45

Name of the Institution: D. D. VISPUTE SCHOOL OF NURSING, PANVEL, RAIGAD

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: CAMA & ALBLESS HOSPITAL, MUMBAI

Subjects: II

Signature of the Holder:

Note:
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<tr>
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<td><strong>Date Of Birth</strong></td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<td><strong>Name of the Candidate</strong></td>
<td>MISS KEDARE DIVYA MACHINDRA</td>
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<td><strong>Seat Number</strong></td>
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<tr>
<td><strong>Name of the Institution</strong></td>
<td>D. D. VISPUTE SCHOOL OF NURSING, PANVEL, RAIGAD</td>
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<td><strong>For the</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<tr>
<td><strong>Date Of Birth</strong></td>
<td>27/03/1998</td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS LAD ASMITA SUDESH</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
<td>48</td>
</tr>
<tr>
<td><strong>Name of the Institution</strong></td>
<td>D. D. VISPUTE SCHOOL OF NURSING, PANVEL, RAIGAD</td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 25/07/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MADVI SAYALI ANIL

Seat Number : 49

Name of the Institution : D. D. VISPUTE SCHOOL OF NURSING, PANVEL, RAIGAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI

Subjects : III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 49

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 11/10/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MHATRE PAYAL RAJENDRA

Seat Number : 50

Name of the Institution : D. D. VISPUTE SCHOOL OF NURSING, PANVEL, RAIGAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI

Subjects : II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 50
### Sr. No. 51

#### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**13/01/2020**

- **For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
- **Date Of Birth:** 12/09/1999
- **Date Of Exam:** 14/01/2020 To 17/01/2020
- **Name of the Candidate:** MISS DABHALE ANJALI ANAND
- **Seat Number:** 51
- **Name of the Institution:** SMT. D.Y.SAWANT NURSING SCHOOL, BHANDUP
- **Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR
- **Name of the Exam. Centre:** CAMA & ALBLESS HOSPITAL, MUMBAI
- **Subjects:** IV
- **Signature of the Holder:**

**Note:**
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2) Practical Examination centre shall be as directed by the MSBNPE.
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---

### Sr. No. 52

#### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**13/01/2020**

- **For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
- **Date Of Birth:** 27/03/1998
- **Date Of Exam:** 14/01/2020 To 17/01/2020
- **Name of the Candidate:** MISS KAMBALE TEJAL DEVIDAS
- **Seat Number:** 52
- **Name of the Institution:** SMT. D.Y.SAWANT NURSING SCHOOL, BHANDUP
- **Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR
- **Name of the Exam. Centre:** CAMA & ALBLESS HOSPITAL, MUMBAI
- **Subjects:** II III IV
- **Signature of the Holder:**

**Note:**
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILIARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/05/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SADAVARTE SWATI SUBHASH
Seat Number : 53
Name of the Institution : SMT. D.Y. SAWANT NURSING SCHOOL, BHANDUP
Name of the Examination : AUXILIARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 53

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILIARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BASHIRE RATNAMALA GANESH
Seat Number : 54
Name of the Institution : SAKET GYANPEETH TRUST, THANE
Name of the Examination : AUXILIARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 54
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/07/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KUSWAHA SHILPA HARNAYAN
Seat Number : 55
Name of the Institution : SAKET GYANPEETH TRUST, THAN
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/10/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MANDVE RAKSHITA BABAN
Seat Number : 56
Name of the Institution : SAKET GYANPEETH TRUST, THAN
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : CAMA & ALBLESS HOSPITAL, MUMBAI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 29/07/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MANJAREKAR KOMAL DATTARAM

Seat Number : 57

Name of the Institution : RAMRAJE SCH. NSG, RCON DAPOLI, RATNAGIRI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri

Subjects : I II

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 04/03/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PATEKAR RUNITA LAXMAN

Seat Number : 58

Name of the Institution : RAMRAJE SCH. NSG, RCON DAPOLI, RATNAGIRI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri

Subjects : I II IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 09/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TAMBE ROSHANI RAVINRA

Seat Number : 59
Name of the Institution : RAMRAJE SCH. NSG, RCON DAPOLI, RATNAGIRI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri
Subjects : V VI
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 10/12/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KARALE ADITI RAGHUNATH

Seat Number : 60
Name of the Institution : SHREE ANANT SMRUTI SCHOOL OF NURSING, KASAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHINGADE RUPA ANAND
Seat Number : 61
Name of the Institution : SHREE ANANT SMRUTI SCHOOL OF NURSING, KASAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MIRGAL KAJAL SANTOSH
Seat Number : 62
Name of the Institution : SAMARTH INSTITUTE OF NURSING EDUCATION, DERVAN
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/02/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SONKAR GUDIYA BABAN
Seat Number : 63
Name of the Institution : M.E.S SCHOOL OF NURSING KHED RATNAGIRI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

SR. NO. 63

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION
HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHAVAN ANANDI SANTOSH
Seat Number : 64
Name of the Institution : BR. NATH PAI INSTITUTE OF NURSING, PINGULI, SINDHUDURGA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 17/06/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DESAI MANALI MAHESH

Seat Number : 65

Name of the Institution : BR. NATH PAI INSTITUTE OF NURSING, PINGULI, SINDHUDURGA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri

Subjects : I II III IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 65

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 29/11/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DHURI RUCHITA RAJENDRA

Seat Number : 66

Name of the Institution : BR. NATH PAI INSTITUTE OF NURSING, PINGULI, SINDHUDURGA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri

Subjects : IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KALAP VISHAKHA VISHNU
Seat Number : 67
Name of the Institution : BR. NATH PAI INSTITUTE OF NURSING, PINGULI, SINDHUDURGA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri
Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MANJAREKAR ROHINI RAVINDRA
Seat Number : 68
Name of the Institution : BR. NATH PAI INSTITUTE OF NURSING, PINGULI, SINDHUDURGA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri
Subjects : III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
15/05/2000

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS MASKE SHRAMIKA EKNATH

Seat Number:
69

Name of the Institution:
BR. NATH PAI INSTITUTE OF NURSING, PINGULI, SINDHUDURGA

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Ratnagiri

Subjects:
II

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAWANT KOMAL VILAS
Seat Number : 71
Name of the Institution : BR. NATH PAI INSTITUTE OF NURSING, PINGULI, SINDHUDURGA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/06/1984
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS THAKUR PRANITA ANANT
Seat Number : 72
Name of the Institution : BR. NATH PAI INSTITUTE OF NURSING, PINGULI, SINDHUDURGA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri
Subjects : I II IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JADHAV MINAL VIVEK
Seat Number : 73
Name of the Institution : SARASWATI ANM NURSING SCHOOL, KANKAVLI, SINDHUDURG
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri
Subjects : I IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PARAB NAMRATA SANDIP
Seat Number : 74
Name of the Institution : MAI NURSING SCHOOL, KUDAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/03/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MITHBAV KAR ANKITA YASHWANT
Seat Number : 75
Name of the Institution : LATE MRS. ABO LI KULDEEP PEDNEKAR NURSING INSTITUTE, TALER E, SINDHUDURG
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Ratnagiri
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/12/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BAM BARE PUJA RAGHUNATH
Seat Number : 76
Name of the Institution : GANPATRAO ADKE INE. NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DANDEKAR NISHA VIshmU
Seat Number : 77
Name of the Institution : GANPATRAO ADKE INE. NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 13/06/1996

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KHAKAR KAVITA KAMALU

Seat Number : 79

Name of the Institution : GANPATRAO ADKE INE. NASIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I II

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 79

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 26/02/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS LONDHE RAJANI RAVINDRA

Seat Number : 80

Name of the Institution : GANPATRAO ADKE INE. NASIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 80
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/04/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PADAVI SUNITA SHANTARAM
Seat Number : 81
Name of the Institution : GANPATRAO ADKE INE. NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 12/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TOKARE MAYA PRAKASH
Seat Number : 82
Name of the Institution : GANPATRAO ADKE INE. NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### HALL TICKET

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

- **For the** :
  - AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
- **Date Of Birth** :
  - 11/03/2000
- **Date Of Exam** :
  - 14/01/2020 To 17/01/2020
- **Name of the Candidate** :
  - MISS ZURDE REKHA TRYAMBAK
- **Seat Number** :
  - 83
- **Name of the Institution** :
  - RACHANA SCHOOL OF NURSING, NASHIK
- **Name of the Examination** :
  - AUXILLARY NURSE MIDWIFERY FIRST YEAR
- **Name of the Exam. Centre** :
  - GENERAL HOSPITAL, Nasik
- **Subjects** :
  - III IV
- **Signature of the Holder** :

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### HALL TICKET

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

- **For the** :
  - AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
- **Date Of Birth** :
  - 18/09/1997
- **Date Of Exam** :
  - 14/01/2020 To 17/01/2020
- **Name of the Candidate** :
  - MISS BHUJAD GEETA KISAN
- **Seat Number** :
  - 84
- **Name of the Institution** :
  - S.N.D. SCHOOL OF NURSING, JES, YEOLA, NASIK
- **Name of the Examination** :
  - AUXILLARY NURSE MIDWIFERY FIRST YEAR
- **Name of the Exam. Centre** :
  - GENERAL HOSPITAL, Nasik
- **Subjects** :
  - III
- **Signature of the Holder** :

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/03/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHANAVA NEHA SANTOSH
Seat Number : 85
Name of the Institution : S.N.D. SCHOOL OF NURSING, JES, YEOLA, NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 85

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 31/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DUNBALE ASHWINI DAULAT
Seat Number : 86
Name of the Institution : S.N.D. SCHOOL OF NURSING, JES, YEOLA, NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 86
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

Sr. No. 87

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
17/08/1997

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS MALI DIPMALA DEVMAN

Seat Number:
87

Name of the Institution:
S.N.D. SCHOOL OF NURSING, JES, YEOLA, NASIK

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Nasik

Subjects:
IV

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 88

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
19/02/1999

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS MISAL MONIKA RAGHUNATH

Seat Number:
88

Name of the Institution:
S.N.D. SCHOOL OF NURSING, JES, YEOLA, NASIK

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Nasik

Subjects:
I III

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 11/10/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PARHAD SHRUTIKA DATTU

Seat Number : 89

Name of the Institution : S.N.D. SCHOOL OF NURSING, JES, YEOLA, NASIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 89

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 04/11/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SHINGADA SUNITA NAVAJI

Seat Number : 90

Name of the Institution : S.N.D. SCHOOL OF NURSING, JES, YEOLA, NASIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 90
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 20/04/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS VALVI RAVINA SURESH

Seat Number : 91

Name of the Institution : S.N.D. SCHOOL OF NURSING, JES, YEOLA, NASIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I II III V VI IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 91

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 29/08/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BHUSARE MEGHA MANOHAR

Seat Number : 92

Name of the Institution : NAMCO SCHOOL OF NURSING, NASIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 92
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/09/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAVATE SUREKHA DEVU
Seat Number : 93
Name of the Institution : NAMCO SCHOOL OF NURSING, NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JADHAV PARVATABAI AMBADAS
Seat Number : 94
Name of the Institution : NAMCO SCHOOL OF NURSING, NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Hall Ticket Details

**Sr. No.** 95

**For the**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**  
24/11/1998

**Date Of Exam**  
14/01/2020 To 17/01/2020

**Name of the Candidate**  
MISS PAWARA DIPA ANTARSING

**Seat Number**  
95

**Name of the Institution**  
NAMCO SCHOOL OF NURSING, NASIK

**Name of the Examination**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**  
GENERAL HOSPITAL, Nasik

**Subjects**  
I

**Signature of the Holder**

---

**Note:**  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

---

**Sr. No.** 96

**For the**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**  
13/08/2000

**Date Of Exam**  
14/01/2020 To 17/01/2020

**Name of the Candidate**  
MISS PAWARA MANISHA KONYA

**Seat Number**  
96

**Name of the Institution**  
NAMCO SCHOOL OF NURSING, NASIK

**Name of the Examination**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**  
GENERAL HOSPITAL, Nasik

**Subjects**  
I II III

**Signature of the Holder**

---

**Note:**  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA VAISHALI VISHWANATH
Seat Number : 97
Name of the Institution : NAMCO SCHOOL OF NURSING, NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 97

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TADVI RITA BAJYA
Seat Number : 98
Name of the Institution : NAMCO SCHOOL OF NURSING, NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 98
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>99</th>
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</thead>
</table>

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the **AUXILLARY NURSE MIDWIFERY FIRST YEAR** to be held in January 2020

**Date Of Birth**: 01/05/2001

**Date Of Exam**: 14/01/2020 To 17/01/2020

**Name of the Candidate**: MISS VASAVE MANISHA BAMANYA

**Seat Number**: 99

**Name of the Institution**: NAMCO SCHOOL OF NURSING, NASIK

**Name of the Examination**: AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**: GENERAL HOSPITAL, Nasik

**Subjects**: I

**Signature of the Holder**: 

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**Note**:  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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<table>
<thead>
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<th>Sr. No.</th>
<th>100</th>
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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the **AUXILLARY NURSE MIDWIFERY FIRST YEAR** to be held in January 2020

**Date Of Birth**: 23/08/2000

**Date Of Exam**: 14/01/2020 To 17/01/2020

**Name of the Candidate**: MISS VASAVE PRAMILA NARAYAN

**Seat Number**: 100

**Name of the Institution**: NAMCO SCHOOL OF NURSING, NASIK

**Name of the Examination**: AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**: GENERAL HOSPITAL, Nasik

** Subjects**: I

**Signature of the Holder**: 

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**Note**:  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 22/04/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS VASAVE RANJITA BIJALYA

Seat Number: 101

Name of the Institution: NAMCO SCHOOL OF NURSING, NASIK

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Nasik

Subjects: I III

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 102

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 21/06/1998

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS VASAVE USHA ATYA

Seat Number: 102

Name of the Institution: NAMCO SCHOOL OF NURSING, NASIK

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Nasik

Subjects: I II III V VI IV

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 102
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 28/07/1996

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BARVE RUTUJA DEEPAK

Seat Number : 103

Name of the Institution : VISHWASATTAYA SCHOOL OF NURSING, OZAR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : V VI

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 103

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/06/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GHEGADMAL BHARTI BHIKAJI

Seat Number : 104

Name of the Institution : VISHWASATTAYA SCHOOL OF NURSING, OZAR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : II

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 104
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHARE KAVITA DHARMARAJ
Seat Number : 105
Name of the Institution : VISHWASATTAYA SCHOOL OF NURSING, OZAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 105

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHARE SHITAL KAILAS
Seat Number : 106
Name of the Institution : VISHWASATTAYA SCHOOL OF NURSING, OZAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 106
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILIARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/11/1995

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS NIKAM CHHAYA NAGRAJ

Seat Number : 107

Name of the Institution : VISHWASATTAYA SCHOOL OF NURSING, OZAR

Name of the Examination : AUXILIARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 107

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILIARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 12/07/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PAWAR MANISHA LAXMAN

Seat Number : 108

Name of the Institution : VISHWASATTAYA SCHOOL OF NURSING, OZAR

Name of the Examination : AUXILIARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 108
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/08/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWAR SUKHALA LAXMAN

Seat Number : 109
Name of the Institution : VISHWASATTAYA SCHOOL OF NURSING, OZAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 31/10/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALHARE POOJA VISHNU

Seat Number : 110
Name of the Institution : VISHWASATTAYA SCHOOL OF NURSING, OZAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :  AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :  15/07/1999
Date Of Exam :  14/01/2020 To 17/01/2020
Name of the Candidate :  MISS DESAI NIRMALA SONYA

Seat Number :  111
Name of the Institution :  NASHIK NURSING SCHOOL, NASHIK
Name of the Examination :  AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre :  GENERAL HOSPITAL, Nasik
Subjects :  I II III IV
Signature of the Holder :  

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 111

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :  AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :  06/10/1999
Date Of Exam :  14/01/2020 To 17/01/2020
Name of the Candidate :  MISS DIVA YOGITA SONIRAM

Seat Number :  112
Name of the Institution :  NASHIK NURSING SCHOOL, NASHIK
Name of the Examination :  AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre :  GENERAL HOSPITAL, Nasik
Subjects :  I II III IV
Signature of the Holder :  

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 03/04/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAVIT RAJSHRI ANIL

Seat Number : 113

Name of the Institution : NASHIK NURSING SCHOOL, NASHIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 113

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 17/02/1992

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAVIT VARSHA MANGESH

Seat Number : 114

Name of the Institution : NASHIK NURSING SCHOOL, NASHIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 114
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 02/12/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAWALE ROHINI BHARAT
Seat Number : 115
Name of the Institution : NASHIK NURSING SCHOOL, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Signature of the Holder :

Subjects : I  II  III

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 20/08/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NAIK MANISHA VILAS
Seat Number : 116
Name of the Institution : NASHIK NURSING SCHOOL, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Signature of the Holder :

Subjects : I  III

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA SUSHILA NAMA
Seat Number : 117
Name of the Institution : NASHIK NURSING SCHOOL, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Signature of the Holder : 

Subjects : I II III IV

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 117

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA JAYSHRI BANYA
Seat Number : 118
Name of the Institution : NASHIK NURSING SCHOOL, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Signature of the Holder : 

Subjects : I II III IV

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 118
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TADVI ANJILA DAJLA
Seat Number : 119
Name of the Institution : NASHIK NURSING SCHOOL, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE.  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TADVI PRAMILA DATKYA
Seat Number : 120
Name of the Institution : NASHIK NURSING SCHOOL, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE.  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 18/09/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS VALVI SAPANA DILAWAR

Seat Number : 121

Name of the Institution : NASHIK NURSING SCHOOL, NASHIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/03/1996

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS VALVI DAKSHANA RAVINDRA

Seat Number : 122

Name of the Institution : NASHIK NURSING SCHOOL, NASHIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASAVE MANISHA AJAY
Seat Number : 124
Name of the Institution : NASHIK NURSING SCHOOL, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/05/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALVI KAJAL DILIP
Seat Number : 123
Name of the Institution : NASHIK NURSING SCHOOL, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASAVE NILIMA JITENDRA
Seat Number : 125
Name of the Institution : NASHIK NURSING SCHOOL, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/09/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKAWAD DROPADA CHINTAMAN
Seat Number : 126
Name of the Institution : SAHYADRI SEVA SANSTHA, INSTITUTE OF NURSING, NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
10/09/1999

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS SALVE RECHAL HENRI

Seat Number:
127

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION
REGISTRAR
MUMBAI

Signature of the Holder:

Name of the Institution:
SAHYADRI SEVA SANSTHA, INSTITUTE OF NURSING, NASIK

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Nasik

Subjects:
I II

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Exam:
13/01/2020

Sr. No. 127

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
27/04/1998

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS BARDE SARIKA EKNATH

Seat Number:
128

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION
REGISTRAR
MUMBAI

Signature of the Holder:

Name of the Institution:
SHREE SWAMI NARAYAN NURSING INSTITUTE, NASIK

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Nasik

Subjects:
I II IV

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Exam:
13/01/2020

Sr. No. 128
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 16/07/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BARDE ESTER PANDIT

Seat Number : 129

Name of the Institution : SHREE SWAMI NARAYAN NURSING INSTITUTE, NASIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I II IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 26/07/1990

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DIVE PALLAVI GOPINATH

Seat Number : 130

Name of the Institution : SHREE SWAMI NARAYAN NURSING INSTITUTE, NASIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I II

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/06/1985
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : SMT MORE SARLA KHANDU
                        Nee(HIRWALE SARLA MAHENDRA)
Seat Number : 131
Name of the Institution : SHREE SWAMI NARAYAN NURSING INSTITUE, NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 131

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAGARE CHAITALI MACHINDRA
Seat Number : 132
Name of the Institution : SHREE SWAMI NARAYAN NURSING INSTITUE, NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 132
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 10/11/1996
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS PAWARA BABITA SUKLAL
Seat Number: 133
Name of the Institution: SHREE SWAMI NARAYAN NURSING INSTITUTE, NASIK
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Nasik
Subjects: I II III IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 133

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 15/08/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS GAVIT PRATIBHA BHAGWAT
Seat Number: 134
Name of the Institution: MATOSHRI SCHOOL OF A.N.M. NURSING, EKLAHARE, NASIK
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Nasik
Subjects: I II III IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 134
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMADI SHWETA BANDU
Seat Number : 135
Name of the Institution : MATOSHRI SCHOOL OF A.N.M. NURSING, EKLAHARE, NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : III
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 135

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/10/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA SAHARA BIJALA
Seat Number : 136
Name of the Institution : MATOSHRI SCHOOL OF A.N.M. NURSING, EKLAHARE, NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I III IV
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 20/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAVARA MONALI PANDURANG

Seat Number : 137
Name of the Institution : MATOSHRI SCHOOL OF A.N.M. NURSING, EKLAHARE, NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : II
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 11/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASAVE PRIYANKA RAMJI

Seat Number : 138
Name of the Institution : MATOSHRI SCHOOL OF A.N.M. NURSING, EKLAHARE, NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : II
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KADU SARASWATI SUBHASH
Seat Number : 139
Name of the Institution : MATOSHRI SCHOOL OF A.N.M. NURSING, BABULGAON, NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/01/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PARADHI SUNITA VILAS
Seat Number : 140
Name of the Institution : MATOSHRI SCHOOL OF A.N.M. NURSING, BABULGAON, NASIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I  III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 22/07/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS BACHHAV BHAGYASHRI BHARAT

Seat Number: 141

Name of the Institution: SAI NURSING SCHOOL, MALEGAON NASHIK

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Nasik

Signature of the Holder: 

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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Sr. No. 141

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 25/08/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS GAVIT MILKA ISHWAR

Seat Number: 142

Name of the Institution: SAI NURSING SCHOOL, MALEGAON NASHIK

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Nasik

Signature of the Holder: 

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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Sr. No. 142
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

Sr. No. 143

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 03/07/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWAR SANGITA VISHRAM
Seat Number : 143
Name of the Institution : SAI NURSING SCHOOL, MALEGAON NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I
Signature of the Holder : 

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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Sr. No. 144

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 01/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA PRAMILA BOTYA
Seat Number : 144
Name of the Institution : SAI NURSING SCHOOL, MALEGAON NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II III IV
Signature of the Holder : 

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 14/10/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SONAWANE SARALA SOMA

Seat Number : 145

Name of the Institution : SAI NURSING SCHOOL, MALEGAON NASHIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : III IV

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 31/05/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS TADAVI MATHURA NARENDRA

Seat Number : 146

Name of the Institution : SAI NURSING SCHOOL, MALEGAON NASHIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I II III IV

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/04/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TADVI AARTEE CHHAGAN
Seat Number : 147
Name of the Institution : SAI NURSING SCHOOL, MALEGAON NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I III IV
Signature of the Holder :

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 147

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS THAKARE JJABAI MAKDYA
Seat Number : 148
Name of the Institution : SAI NURSING SCHOOL, MALEGAON NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II III IV
Signature of the Holder :

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 148
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 20/07/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS VASAVE RANJANA KALLA

Seat Number : 149

Name of the Institution : SAI NURSING SCHOOL, MALEGAON NASHIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : General 

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 149

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 16/12/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS VASAVE RINKU RULYA

Seat Number : 150

Name of the Institution : SAI NURSING SCHOOL, MALEGAON NASHIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I II III V VI IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 150
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/06/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AHIRE SAVITA PANDURANG
Seat Number : 151
Name of the Institution : SWAMI VIVEKANAND SANSTHA, MALEGAON, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I, II, III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/08/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BIRADE MANISHA BALU
Seat Number : 152
Name of the Institution : SWAMI VIVEKANAND SANSTHA, MALEGAON, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I, II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth: 14/02/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS CHAVHAN VIMAL SURESH

Seat Number: 153

Name of the Institution: SWAMI VIVEKANAND SANSTHA, MALEGAON, NASHIK

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Nasik

Subjects: I III

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 153

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth: 23/03/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS GANGURDE AVIRALI DEVIDAS

Seat Number: 154

Name of the Institution: SWAMI VIVEKANAND SANSTHA, MALEGAON, NASHIK

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Nasik

Subjects: I II

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 154
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
15/07/1989

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS KAPADANE SHUBHANGI DADAJI

Seat Number:
155

Name of the Institution:
SWAMI VIVEKANAND SANSTHA, MALEGAON, NASHIK

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Nasik

Subjects:
I II IV

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
22/06/1999

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS MAHALE PUSHPA PANDURANG

Seat Number:
156

Name of the Institution:
SWAMI VIVEKANAND SANSTHA, MALEGAON, NASHIK

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Nasik

Subjects:
I II IV

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 02/06/1989
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NIKAM RAMABAI SHIVAJI
Seat Number : 157
Name of the Institution : SWAMI VIVEKANAND SANSTHA, MALEGAON, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 157

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 02/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWAR MAYURI DILIP
Seat Number : 158
Name of the Institution : SWAMI VIVEKANAND SANSTHA, MALEGAON, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I, IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 158
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHAURE MANISHA ANIL
Seat Number : 159
Name of the Institution : KALWAN NURSING SCHOOL, KALWAN, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : II  III  IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 24/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GANGURDE KAVITA SHRIRAM
Seat Number : 160
Name of the Institution : KALWAN NURSING SCHOOL, KALWAN, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGH RANI KEVJI
Seat Number : 161
Name of the Institution : KALWAN NURSING SCHOOL, KALWAN, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 13/11/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGH SUVARNA ASHOK
Seat Number : 162
Name of the Institution : KALWAN NURSING SCHOOL, KALWAN, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/08/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS CHAURE NARMADA VEDU

Seat Number : 163

Name of the Institution : DINDORI SCHOOL OF NURSING, DINDORI, NASHIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I II III

Signature of the Holder :

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 163

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/02/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS TADVI JHALI SINGA

Seat Number : 164

Name of the Institution : DINDORI SCHOOL OF NURSING, DINDORI, NASHIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I III

Signature of the Holder :

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 164
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 18/12/1997
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS UPADHYAY HIRALBEN MAHESHKUMAR
Seat Number: 165
Name of the Institution: DINDORI SCHOOL OF NURSING, DINDORI, NASHIK
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Nasik
Subjects: I
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 24/01/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS GAVIT SARASWATI GULABSING
Seat Number: 166
Name of the Institution: YEOLA SCHOOL OF NURSING, YEOLA, NASHIK
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Nasik
Subjects: II IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SATPUTE GAURI LAXMAN
Seat Number : 167
Name of the Institution : YEOLA SCHOOL OF NURSING, YEOLA, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/07/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SONAWANE SHITAL SURESH
Seat Number : 168
Name of the Institution : YEOLA SCHOOL OF NURSING, YEOLA, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 169

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALAVI RITA VIJYA
Seat Number : 169
Name of the Institution : YEOLA SCHOOL OF NURSING, YEOLA, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 170

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASAVE PRIYANKA DILIP
Seat Number : 170
Name of the Institution : YEOLA SCHOOL OF NURSING, YEOLA, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 16/10/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS VASAVE CHHAYA UTTAM
Seat Number: 171
Name of the Institution: YEOLA SCHOOL OF NURSING, YEOLA, NASHIK
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Nasik
Subjects: I II III
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket. 
2) Practical Examination centre shall be as directed by the MSBNPE 
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/12/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAMBARE POOJA BHAGWAN
Seat Number : 173
Name of the Institution : MATOSHRI ASARABAI DARADE SCHOOL OF NURSING, YEOLA, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/07/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GONDKE CHAYA HEMANT
Seat Number : 174
Name of the Institution : PETH NURSING SCHOOL, PETH, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS HANDORE DHANASHREE SUKHDEV
Seat Number : 175
Name of the Institution : PETH NURSING SCHOOL, PETH, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KOTHE AKSHADA ASHOK
Seat Number : 176
Name of the Institution : PETH NURSING SCHOOL, PETH, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Note:

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

SR. NO. 177

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
15/03/2001

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS PAWAR SUREKHA BALWANT

Seat Number:
177

Name of the Institution:
PETH NURSING SCHOOL, PETH, NASHIK

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Nasik

Subjects:
II, III

Signature of the Holder:

SR. NO. 178

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
11/01/2000

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS JADHAV SITABAI CHINDHU

Seat Number:
178

Name of the Institution:
IGATPURI NURSING SCHOOL, IGATPURI, NASHIK

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Nasik

Subjects:
I

Signature of the Holder:

Note:

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 20/01/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS PACHARNE MINAKSHI PANDHARINATH
Seat Number: 179
Name of the Institution: IGATPURI NURSING SCHOOL, IGATPURI, NASHIK
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Nasik
Subjects: I II III V VI IV
Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth: 13/01/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SABALE RAJSHREE SANTOSH
Seat Number: 180
Name of the Institution: IGATPURI NURSING SCHOOL, IGATPURI, NASHIK
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Nasik
Subjects: I IV
Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 04/06/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SHINDE SANDHYA RAVINDRA
Seat Number: 181
Name of the Institution: IGATPURI NURSING SCHOOL, IGATPURI, NASHIK
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Nasik
Subjects: II
Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 05/05/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SHIRSATH MAYURI BALKRISHNA
Seat Number: 182
Name of the Institution: IGATPURI NURSING SCHOOL, IGATPURI, NASHIK
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Nasik
Subjects: III
Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 15/10/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS GANGURDE MANISHA ARUN

Seat Number: 183

Name of the Institution: NIFAD NURSING SCHOOL, NIFAD, NASHIK

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Nasik

Subjects: I II

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 183

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 30/03/1998

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS JAGTAP MANISHA MANGU

Seat Number: 184

Name of the Institution: NIFAD NURSING SCHOOL, NIFAD, NASHIK

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Nasik

Subjects: I

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 184

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS THAKRE SANGITA DHANLAL
Seat Number : 185
Name of the Institution : NIFAD NURSING SCHOOL, NIFAD, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 185

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALVI ASHWINI JAGAN
Seat Number : 186
Name of the Institution : NIFAD NURSING SCHOOL, NIFAD, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 17/02/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS GAVIT RIBIKA MAYAKU
Seat Number: 187
Name of the Institution: MANMAD NURSING SCHOOL, YEOLA, NASHIK
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Nasik
Subjects: II
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth: 08/11/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS PAWAR SARIKA KANTILAL
Seat Number: 188
Name of the Institution: MANMAD NURSING SCHOOL, YEOLA, NASHIK
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Nasik
Subjects: I II
Signature of the Holder:
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/08/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALVI VANITA MAGAN
Seat Number : 191
Name of the Institution : MANMAD NURSING SCHOOL, YEOLA, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 191

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/06/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHAUDHARI PUSHPA TUKARAM
Seat Number : 192
Name of the Institution : SAI CARE NURSING SCHOOL, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 192
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>193</th>
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<tr>
<td><strong>MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION</strong></td>
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<td><strong>HALL TICKET</strong></td>
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<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS GAVIT ROHINI PANDURANG</td>
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<tr>
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<td><strong>Name of the Institution</strong></td>
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<td><strong>Name of the Exam. Centre</strong></td>
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<td><strong>Subjects</strong></td>
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<td><strong>Signature of the Holder</strong></td>
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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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<td><strong>For the</strong></td>
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<td><strong>Date Of Birth</strong></td>
<td>20/12/1999</td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS JADHAV AKSHADA RAJENDRA</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
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<td><strong>Name of the Institution</strong></td>
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<td><strong>Name of the Exam. Centre</strong></td>
<td>GENERAL HOSPITAL, Nasik</td>
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<td><strong>Subjects</strong></td>
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**Note:**
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
22/08/1999

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS PADVI MAHIMA JALPATSING

Seat Number:
195

Name of the Institution:
SAI CARE NURSING SCHOOL, NASHIK

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Nasik

Subjects:
IV

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth:
19/02/2000

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS PAWARA KAVITA KOPARYA

Seat Number:
196

Name of the Institution:
JIJAMATA NURSING SCHOOL, MALEGAON, NASHIK

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Nasik

Subjects:
I II III V VI IV

Signature of the Holder:
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/02/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAVIT KARUNA DHARMA
Seat Number : 197
Name of the Institution : RAJEEV GANDHI GNM NURSING COLLEGE, SINNAR, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/01/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALVI VARSHA PRAVIN
Seat Number : 198
Name of the Institution : RAJEEV GANDHI GNM NURSING COLLEGE, SINNAR, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Sr. No. 199

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 10/06/1992

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS AHIRE NIRMALA TANAJI

Seat Number : 199

Name of the Institution : TANMAYI NURSING INSTITUTE, NASHIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I

Signature of the Holder :

---

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

---

### Sr. No. 200

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 08/03/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS AHIRE SHITAL SHANKAR

Seat Number : 200

Name of the Institution : TANMAYI NURSING INSTITUTE, NASHIK

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Nasik

Subjects : I

Signature of the Holder :

---

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/12/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DESHMUKH SARALA SAVALIRAM
Seat Number : 201
Name of the Institution : TANMAYI NURSING INSTITUTE, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GANGURDE YOGITA RAMESH
Seat Number : 202
Name of the Institution : TANMAYI NURSING INSTITUTE, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 01/01/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS GAVIT GULABI REVALA
Seat Number: 203
Name of the Institution: TANMAYI NURSING INSTITUTE, NASHIK
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Nasik
Subjects: I II
Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 19/07/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS GAVIT KALYANI DARJI
Seat Number: 204
Name of the Institution: TANMAYI NURSING INSTITUTE, NASHIK
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Nasik
Subjects: I
Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/04/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAVIT SUNITA DIPCHAND
Seat Number : 205
Name of the Institution : TANMAYI NURSING INSTITUTE, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I II III V VI IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 205

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PATALE SHAKILA RAMCHANDRA
Seat Number : 206
Name of the Institution : TANMAYI NURSING INSTITUTE, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : I
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 206
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :

23/12/1999

Date Of Exam :

14/01/2020 To 17/01/2020

Name of the Candidate :

MISS PAWAR NIKITA TRYAMBAK

Seat Number :

207

Name of the Institution :

TANMAYI NURSING INSTITUTE, NASHIK

Name of the Examination :

AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :

GENERAL HOSPITAL, Nasik

Subjects :

I

Signature of the Holder :

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 207

13/01/2020

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 208

13/01/2020
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/02/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASAVE SHIVROSHANA KRUSHNA
Seat Number : 209
Name of the Institution : TANMAYI NURSING INSTITUTE, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : 1
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 02/09/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASAVE SHANTI MAKTYA
Seat Number : 210
Name of the Institution : TANMAYI NURSING INSTITUTE, NASHIK
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Nasik
Subjects : 1
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 05/04/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHANDARI MANISHA BHAVASAR
Seat Number : 211
Name of the Institution : K.D. GAVIT NURSING SCHOOL, PATHRAI , NANDURBAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Dhule
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 211

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 08/01/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHAVHAN PRIYANKA CHIKA
Seat Number : 212
Name of the Institution : K.D. GAVIT NURSING SCHOOL, PATHRAI , NANDURBAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Dhule
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 212
## Hall Ticket

### 13/01/2020

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
06/03/1999

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS PADVI KAVITA RAYSING

**Seat Number**
213

**Name of the Institution**
K.D. GAVIT NURSING SCHOOL, PATHRAI, NANDURBAR

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Dhule

**Subjects**
III

**Signature of the Holder**

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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
23/05/1999

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS PAWARA MINAKSHI PRADHAN

**Seat Number**
214

**Name of the Institution**
K.D. GAVIT NURSING SCHOOL, PATHRAI, NANDURBAR

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Dhule

**Subjects**
III

**Signature of the Holder**

---

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Sr. No. 215

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

13/01/2020

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

04/12/1998

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS PAWARA PRAGATI BHAVSING

**Seat Number**

215

**Name of the Institution**

K.D. GAVIT NURSING SCHOOL, PATHRAI, NANDURBAR

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

GENERAL HOSPITAL, Dhule

**Subjects**

III IV

**Signature of the Holder**

---

**Note:**

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### Sr. No. 216

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

13/01/2020

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

13/09/2000

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS PAWARA SUNITA LALA

**Seat Number**

216

**Name of the Institution**

K.D. GAVIT NURSING SCHOOL, PATHRAI, NANDURBAR

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

GENERAL HOSPITAL, Dhule

**Subjects**

I III IV

**Signature of the Holder**

---

**Note:**

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALAVI ANKITA GAMERSING
Seat Number : 217
Name of the Institution : K.D. GAVIT NURSING SCHOOL, PATHRAI, NANDURBAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Dhule
Subjects : I III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 217

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/12/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALVI YOGITA JAGAN
Seat Number : 218
Name of the Institution : K.D. GAVIT NURSING SCHOOL, PATHRAI, NANDURBAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Dhule
Subjects : III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 218
## MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

### HALL TICKET

**For the**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**  
25/06/2000

**Date Of Exam**  
14/01/2020 To 17/01/2020

**Name of the Candidate**  
MISS VALVI MOGIVATI SUKLAL

**Seat Number**  
219

**Name of the Institution**  
K.D. GAVIT NURSING SCHOOL, PATHRAI, NANDURBAR

**Name of the Examination**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**  
GENERAL HOSPITAL, Dhule

**Subjects**  
I, II, III, IV

**Signature of the Holder**  

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**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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## MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

### HALL TICKET

**For the**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**  
29/09/1999

**Date Of Exam**  
14/01/2020 To 17/01/2020

**Name of the Candidate**  
MISS VALVI MOHINI RAVAJI

**Seat Number**  
220

**Name of the Institution**  
K.D. GAVIT NURSING SCHOOL, PATHRAI, NANDURBAR

**Name of the Examination**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**  
GENERAL HOSPITAL, Dhule

**Subjects**  
I, III

**Signature of the Holder**  

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**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/04/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASAVE ASHA RAMA
Seat Number : 221
Name of the Institution : K.D. GAVIT NURSING SCHOOL, PATHRAI , NANDURBAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Dhule
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 221

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASAVE RAJESHWARI RAJENDRA
Seat Number : 222
Name of the Institution : K.D. GAVIT NURSING SCHOOL, PATHRAI , NANDURBAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Dhule
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 222
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/06/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASAVE SAVITA MANGA
Seat Number : 223
Name of the Institution : K.D. GAVIT NURSING SCHOOL, PATHRAI, NANDURBAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Dhule
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASAVE SULOCHNA BALIRAM
Seat Number : 224
Name of the Institution : K.D. GAVIT NURSING SCHOOL, PATHRAI, NANDURBAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Dhule
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/09/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AHIRE VIDYASHWARI NARAYAN
Seat Number : 225
Name of the Institution : NANDA AAI BAHU. NURSING TRAINING CENTRE, DEOPUR, DHULE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Dhule
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 225

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MALCHE VARSHA BRIJLAL
Seat Number : 226
Name of the Institution : NANDA AAI BAHU. NURSING TRAINING CENTRE, DEOPUR, DHULE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Dhule
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SALVE BHARATI SANTOSH
Seat Number : 229
Name of the Institution : KIRAN NURSING SCHOOL, KAPADNE, DHULE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Dhule
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/02/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHINDE ASHWINI ARAM
Seat Number : 230
Name of the Institution : KIRAN NURSING SCHOOL, KAPADNE, DHULE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Dhule
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/12/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASAVE TEJASVINI ASHOK
Seat Number : 231
Name of the Institution : KIRAN NURSING SCHOOL, KAPADNE, DHULE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Dhule
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 231

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AHIRE SAPANA DAULAT
Seat Number : 232
Name of the Institution : SAU. R.G. MALI NURSING COLLEGE, AKLAD, DHULE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Dhule
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 232
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 233

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 21/06/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS GAVIT SHILA JIVALYA
Seat Number: 233
Name of the Institution: SAU. R.G. MALI NURSING COLLEGE, AKLAD, DHULE
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Dhule
Subjects: III
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 234

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 05/11/1997
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS JADHAV BABITA BHAGAWAN
Seat Number: 234
Name of the Institution: SAU. R.G. MALI NURSING COLLEGE, AKLAD, DHULE
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Dhule
Subjects: III IV
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
# Hall Ticket

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**For the**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
- 18/05/2000

**Date Of Exam**
- 14/01/2020 To 17/01/2020

**Name of the Candidate**
- MISS SALWE YOGITA YUVRAJ

**Seat Number**
- 235

**Name of the Institution**
- SAU. R.G. MALI NURSING COLLEGE, AKLAD, DHULE

**Name of the Examination**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
- GENERAL HOSPITAL, Dhule

**Subjects**
- III IV

**Signature of the Holder**

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**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**For the**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
- 11/03/1998

**Date Of Exam**
- 14/01/2020 To 17/01/2020

**Name of the Candidate**
- MISS PADVI MOTI BIJALA

**Seat Number**
- 236

**Name of the Institution**
- RANIMANSAHEB MANUBADEVI RAWAL NURSING SCHOOL, DONDAICHA, DHULE

**Name of the Examination**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
- GENERAL HOSPITAL, Dhule

**Subjects**
- III

**Signature of the Holder**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 16/01/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PAWARA JYOTI ARJUN

Seat Number : 237

Name of the Institution : RANIMANSAHEB MANUBADEVI RAWAL NURSING SCHOOL, DONDAICHA, DHULE

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Dhule

Subjects : III

Signature of the Holder :

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. : 237

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/01/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PAWARA KAVITA DARASING

Seat Number : 238

Name of the Institution : RANIMANSAHEB MANUBADEVI RAWAL NURSING SCHOOL, DONDAICHA, DHULE

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Dhule

Subjects : I II III IV

Signature of the Holder :

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. : 238
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/09/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA SANGITA RAMESH
Seat Number : 239
Name of the Institution : RANIMANSAHEB MANUBADEVI RAWAL NURSING SCHOOL, DONDAICHA, DHULE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Dhule
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 239

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA SARITA DARASING
Seat Number : 240
Name of the Institution : RANIMANSAHEB MANUBADEVI RAWAL NURSING SCHOOL, DONDAICHA, DHULE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Dhule
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 240
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 08/10/1998

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS TADVI LILA RAMESH

Seat Number: 241

Name of the Institution: RANIMANSAHEB MANUBADEVI RAWAL NURSING SCHOOL, DONDAICHA, DHULE

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Dhule

Subjects: I III V VI

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

13/01/2020

Sr. No. 241

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 14/04/1996

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS VALVI SONYABAI LADKU

Seat Number: 242

Name of the Institution: RANIMANSAHEB MANUBADEVI RAWAL NURSING SCHOOL, DONDAICHA, DHULE

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Dhule

Subjects: III

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

13/01/2020

Sr. No. 242
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 12/02/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS VASAVE PRIYANKA KHAALYA

Seat Number : 243

Name of the Institution : RANIMANSAHEB MANUBADEVI RAWAL NURSING SCHOOL, DONDAICHA, DHULE

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Dhule

Subjects : I II III V VI IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 03/01/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS CHAURE SAVITA VASANT

Seat Number : 244

Name of the Institution : D.S. NURSING SCHOOL, SAKRI, DHULE

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Dhule

Subjects : III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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### Hall Ticket

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
24/11/1999

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS DEORE ANJANA CHANDU

**Seat Number**
245

**Name of the Institution**
D.S. NURSING SCHOOL, SAKRI, DHULE

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Dhule

**Subjects**
III

**Signature of the Holder**

---

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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<th>245</th>
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<tr>
<td><strong>Note:</strong>*</td>
<td>1) Candidate will not be allowed in examination hall without this Hall Ticket. 2) Practical Examination centre shall be as directed by the MSBNPE 3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.</td>
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<td><strong>Date Of Exam</strong></td>
<td>13/01/2020 To 17/01/2020</td>
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<td>MISS DEORE ANJANA CHANDU</td>
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<td><strong>Name of the Institution</strong></td>
<td>D.S. NURSING SCHOOL, SAKRI, DHULE</td>
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<td><strong>Name of the Examination</strong></td>
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<td>GENERAL HOSPITAL, Dhule</td>
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**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
17/06/1999

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS GAVIT ANJALI MAGAN

**Seat Number**
246

**Name of the Institution**
D.S. NURSING SCHOOL, SAKRI, DHULE

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Dhule

**Subjects**
II III IV

**Signature of the Holder**

---

**Note:**
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 11/05/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAVIT MANISHA VITTHAL

Seat Number : 247

Name of the Institution : D.S. NURSING SCHOOL, SAKRI, DHULE

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Dhule

Subjects : I II III IV

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 247

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/04/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PAWARA SHITAL SUKLAL

Seat Number : 248

Name of the Institution : GENERAL HOSPITAL, NANDURBAR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Dhule

Subjects : III

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/03/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BARELA SUIVITA BHIMSING
Seat Number : 249
Name of the Institution : BHAGINI MANDAL SCHOOL OF NURSING, CHOPDA, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 249

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/06/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA MANITA VIKRAM
Seat Number : 250
Name of the Institution : BHAGINI MANDAL SCHOOL OF NURSING, CHOPDA, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA HEMA MANGALSING
Seat Number : 251
Name of the Institution : BHAGINI MANDAL SCHOOL OF NURSING, CHOPDA, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : II
Signature of the Holder : 

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/03/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA ROSHANI KUMAR
Seat Number : 252
Name of the Institution : BHAGINI MANDAL SCHOOL OF NURSING, CHOPDA, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : II IV
Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA SANGITA BHAISING
Seat Number : 253
Name of the Institution : BHAGINI MANDAL SCHOOL OF NURSING, CHOPDA, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : II
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA SAVITA SHANTILAL
Seat Number : 254
Name of the Institution : BHAGINI MANDAL SCHOOL OF NURSING, CHOPDA, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : III IV
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 30/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALVI PRITI VASANT
Seat Number : 255
Name of the Institution : BHAGINI MANDAL SCHOOL OF NURSING, CHOPDA , JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 255

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 13/07/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AMBHURE VAISHALI NILKANTH
Seat Number : 256
Name of the Institution : KHANDESH NURISNG INSTITUTE, CHALISGAON, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 14/01/1998

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS AMBORE SHUBHANGI ASHOK

Seat Number: 257

Name of the Institution: KHANDESH NURISNG INSTITUTE, CHALISGAON, JALGAON

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, JALGAON

Subjects: II III IV

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 257

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 28/07/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS BHANGARE SUNANDA NIVRUTTI

Seat Number: 258

Name of the Institution: KHANDESH NURISNG INSTITUTE, CHALISGAON, JALGAON

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, JALGAON

Subjects: II III IV

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 258
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/06/1984
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : SMT BORKAR LUMBINI ISHWARRAO
                      : Nee(GAJBHIYE LUMBINI KUSHAL)
Seat Number : 259
Name of the Institution : KHANDESH NURISNG INSTITUTE, CHALISGAON, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHANGARI DURGA VISHWANATH
Seat Number : 260
Name of the Institution : KHANDESH NURISNG INSTITUTE, CHALISGAON, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 17/05/1991
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHAIRE VIDYA NANA
Seat Number : 261
Name of the Institution : KHANDESH NURISNG INSTITUTE, CHALISGAON, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 23/11/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHULE LEELA ASHOK
Seat Number : 262
Name of the Institution : KHANDESH NURISNG INSTITUTE, CHALISGAON, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SALAVE PRADNYA SANJAY
Seat Number : 263
Name of the Institution : KHANDESH NURISNG INSTITUTE, CHALISGAON, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON

Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 263

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/03/1986
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHEJAWAL KIRAN PRAKASH
Seat Number : 264
Name of the Institution : KHANDESH NURISNG INSTITUTE, CHALISGAON, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON

Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 19/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALAVI KALAWATI CHANDRASING
Seat Number : 265
Name of the Institution : KHANDESH NURISNG INSTITUTE, CHALISGAON, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 265

cut

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 11/10/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALAVI RANJANA HUNYA
Seat Number : 266
Name of the Institution : KHANDESH NURISNG INSTITUTE, CHALISGAON, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 266

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</tr>
<tr>
<td><strong>Seat Number</strong></td>
<td>267</td>
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<tr>
<td><strong>Name of the Institution</strong></td>
<td>KHANDESH NURISNG INSTITUTE, CHALISGAON, JALGAON</td>
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<tr>
<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td><strong>Name of the Exam. Centre</strong></td>
<td>GENERAL HOSPITAL, JALGAON</td>
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<td><strong>Subjects</strong></td>
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**Note:**<br>1) Candidate will not be allowed in examination hall without this Hall Ticket.<br>2) Practical Examination centre shall be as directed by the MSBNPE<br>3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>268</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION</strong>&lt;br&gt;HALL TICKET</td>
<td>13/01/2020</td>
</tr>
<tr>
<td><strong>For the</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020</td>
</tr>
<tr>
<td><strong>Date Of Birth</strong></td>
<td>10/03/1990</td>
</tr>
<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
</tr>
<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS VALVI JAYASHREE JAYRAM</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
<td>268</td>
</tr>
<tr>
<td><strong>Name of the Institution</strong></td>
<td>KHANDESH NURISNG INSTITUTE, CHALISGAON, JALGAON</td>
</tr>
<tr>
<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
</tr>
<tr>
<td><strong>Name of the Exam. Centre</strong></td>
<td>GENERAL HOSPITAL, JALGAON</td>
</tr>
<tr>
<td><strong>Subjects</strong></td>
<td>II  III  IV</td>
</tr>
<tr>
<td><strong>Signature of the Holder</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Note:**<br>1) Candidate will not be allowed in examination hall without this Hall Ticket.<br>2) Practical Examination centre shall be as directed by the MSBNPE<br>3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/01/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALAVI KAVITA RAMESH
Seat Number : 269
Name of the Institution : KHANDESH NURISNG INSTITUTE, CHALISGAON, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : II  IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHAMBERE DIPALI PANDURANG
Seat Number : 271
Name of the Institution : GODAVARI COLLEGE OF NURSING, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : II
Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHARE PRADNYA SANJAY
Seat Number : 272
Name of the Institution : GODAVARI COLLEGE OF NURSING, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : II, IV
Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 07/04/2001

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS KHOBRAGADE PRACHI MAHESH

Seat Number: 273

Name of the Institution: GODAVARI COLLEGE OF NURSING, JALGAON

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, JALGAON

Subjects: IV

Signature of the Holder: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 273

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 17/03/1998

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS NIKAM MAYURI PANDURANG

Seat Number: 274

Name of the Institution: GODAVARI COLLEGE OF NURSING, JALGAON

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, JALGAON

Subjects: IV

Signature of the Holder: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 274
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 20/04/1990

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PAWAR GAURI UTTAM

Seat Number : 275

Name of the Institution : GODAVARI COLLEGE OF NURSING, JALGAON

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON

Subjects : II IV

Signature of the Holder :

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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/06/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PAWARA SHITAL VIJAY

Seat Number : 276

Name of the Institution : GODAVARI COLLEGE OF NURSING, JALGAON

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON

Subjects : II IV

Signature of the Holder :

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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA SUSHMITA DOHANYA
Seat Number : 277
Name of the Institution : GODAVARI COLLEGE OF NURSING, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 277

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/06/1985
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAYAPURKAR ARATI MADAN
Seat Number : 278
Name of the Institution : GODAVARI COLLEGE OF NURSING, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 278
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/01/1986
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SONAWANE ASHVINI PRAKASH
Seat Number : 279
Name of the Institution : GODAVARI COLLEGE OF NURSING, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 279

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGH KALYANI KAILAS
Seat Number : 280
Name of the Institution : GODAVARI COLLEGE OF NURSING, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : II IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 280
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 09/09/1994

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS WAGH LAXMIBAI RAJENDRA

Seat Number : 281

Name of the Institution : GODAVARI COLLEGE OF NURSING, JALGAON

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON

Subjects : IV

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. 281

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 02/06/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BARELA NILAM SIMA

Seat Number : 282

Name of the Institution : DADASAHEB DR. SUresh G. Patil College of Nursing, Chopda, Jalgaon

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON

Subjects : I II III IV

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BARELA JYOTI AAPSING
Seat Number : 283
Name of the Institution : DADASAHEB DR. SURESH G. PATIL COLLEGE OF NURSING, CHOPDA, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 283

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/03/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BARELA SONIYA VELCHAND
Seat Number : 284
Name of the Institution : DADASAHEB DR. SURESH G. PATIL COLLEGE OF NURSING, CHOPDA, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 284
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 15/11/1997

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS BARELA VIJAYA TANSING

Seat Number: 285

Name of the Institution: DADASAHEB DR. SURESH G. PATIL COLLEGE OF NURSING, CHOPDA, JALGAON

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, JALGAON

Subjects: I II III IV

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 286

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 21/04/1998

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS BARELA SAVITA RULSING

Seat Number: 286

Name of the Institution: DADASAHEB DR. SURESH G. PATIL COLLEGE OF NURSING, CHOPDA, JALGAON

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, JALGAON

Subjects: II IV

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 286
Note:  
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KARDE JYOTI BABULAL
Seat Number : 289
Name of the Institution : DADASAHEB DR. SURESH G. PATIL COLLEGE OF NURSING, CHOPDA, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 20/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA CHANDRAKALA PYARELAL
Seat Number : 290
Name of the Institution : DADASAHEB DR. SURESH G. PATIL COLLEGE OF NURSING, CHOPDA, JALGAON
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, JALGAON
Subjects : I III IV
Signature of the Holder :

Note:
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Hall Ticket

**Name of the Candidate**: MISS PAWARA SANGEETA RAISHYA  
**Date Of Birth**: 20/01/1993  
**Date Of Exam**: 14/01/2020 To 17/01/2020

**Name of the Institution**: DADASAHEB DR. SURESH G. PATIL COLLEGE OF NURSING, CHOPDA, JALGAON  
**Name of the Examination**: AUXILLARY NURSE MIDWIFERY FIRST YEAR  
**Name of theExam. Centre**: GENERAL HOSPITAL, JALGAON  
**Seat Number**: 291  
**Subjects**: XIV

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

1. Candidate will not be allowed in examination hall without this Hall Ticket.  
2. Practical Examination centre shall be as directed by the MSBNPE  
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### Hall Ticket

**Name of the Candidate**: MISS GAIKWAD MANSI DEVDAN  
**Date Of Birth**: 23/05/2000  
**Date Of Exam**: 14/01/2020 To 17/01/2020

**Name of the Institution**: F.J.F.M. HOSPITAL SCH OF NSG, NEWASA, DISTAHMEDNAGAR  
**Name of the Examination**: AUXILLARY NURSE MIDWIFERY FIRST YEAR  
**Name of the Exam. Centre**: GENERAL HOSPITAL, AHMEDNAGAR  
**Seat Number**: 292  
**Subjects**: IV

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

1. Candidate will not be allowed in examination hall without this Hall Ticket.  
2. Practical Examination centre shall be as directed by the MSBNPE  
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/03/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RATHOD TEJASVINI LAXIMAN
Seat Number : 293
Name of the Institution : F.J.F.M. HOSPITAL SCH OF NSG, NEWASA, DISTAHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/06/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD SUVARNA BABASAHEB
Seat Number : 294
Name of the Institution : KRANTI SCHOOL OF NURSING AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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<table>
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<tr>
<th>Sr. No.</th>
<th>299</th>
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<td><strong>MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION</strong></td>
<td><strong>HALL TICKET</strong></td>
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<tr>
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<td>21/04/2000</td>
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<tr>
<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
</tr>
<tr>
<td>Name of the Candidate</td>
<td>MISS SALAVE PRIYANKA UTTAM</td>
</tr>
<tr>
<td>Seat Number</td>
<td>299</td>
</tr>
<tr>
<td>Name of the Institution</td>
<td>VIJAY GANGA RURAL, MED RES FOUNDATION, SON, AHMEDNAGAR</td>
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<tr>
<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td>Name of the Exam. Centre</td>
<td>GENERAL HOSPITAL, AHMEDNAGAR</td>
</tr>
<tr>
<td>Subjects</td>
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</tr>
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<td>Signature of the Holder</td>
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**Note:**
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<td><strong>MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION</strong></td>
<td><strong>HALL TICKET</strong></td>
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<tr>
<td>Date Of Birth</td>
<td>11/05/1996</td>
</tr>
<tr>
<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
</tr>
<tr>
<td>Name of the Candidate</td>
<td>MISS TAYDE MADHURI SARANGDHR</td>
</tr>
<tr>
<td>Seat Number</td>
<td>300</td>
</tr>
<tr>
<td>Name of the Institution</td>
<td>VIJAY GANGA RURAL, MED RES FOUNDATION, SON, AHMEDNAGAR</td>
</tr>
<tr>
<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
</tr>
<tr>
<td>Name of the Exam. Centre</td>
<td>GENERAL HOSPITAL, AHMEDNAGAR</td>
</tr>
<tr>
<td>Subjects</td>
<td>IV</td>
</tr>
<tr>
<td>Signature of the Holder</td>
<td></td>
</tr>
</tbody>
</table>

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
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Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/08/1986
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHOSALE MANISHA ASHOK
Seat Number : 305
Name of the Institution : PRAVARA MEDICAL TRUST, SON, SBEVGAON, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : I II III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 306

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS THORAT KARISHMA RATAN
Seat Number : 306
Name of the Institution : PRAVARA MEDICAL TRUST, SON, SBEVGAON, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : I
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Hall Ticket

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
05/11/1999

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS UNHALE BHAGYASHRI SUDAM

**Seat Number**
307

**Name of the Institution**
PRAVARA MEDICAL TRUST, SON, SHEVGAON, AHMEDNAGAR

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, AHMEDNAGAR

**Signature of the Holder**

---

**PRAVARA MEDICAL TRUST, SON, SHEVGAON, AHMEDNAGAR**

**GENERAL HOSPITAL, AHMEDNAGAR**

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**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### Hall Ticket

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
17/04/2000

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS WAGHMARE PRIYANKA YOSEF

**Seat Number**
308

**Name of the Institution**
PRAVARA MEDICAL TRUST, SON, SHEVGAON, AHMEDNAGAR

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, AHMEDNAGAR

**Signature of the Holder**

---

**PRAVARA MEDICAL TRUST, SON, SHEVGAON, AHMEDNAGAR**

**GENERAL HOSPITAL, AHMEDNAGAR**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/01/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AMRAO SHITAL JANARDHAN
Seat Number : 309
Name of the Institution : NITYASEVA HOSPITAL NURSING SCHOOL, SHEVGAON, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 309

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/07/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHAWALE KOMAL TATYARAM
Seat Number : 310
Name of the Institution : PARVATIBAI MHASKE INSTITUTE OF NURSING, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 310
Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 01/03/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS VASAVE ANITA DIVALYA

Seat Number: 313

Name of the Institution: PARVATIBAI MHASKE INSTITUTE OF NURSING, AHMEDNAGAR

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, AHMEDNAGAR

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date of Birth: 10/09/1999

Date of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS BHOSALE PRIYA VIJAY

Seat Number: 314

Name of the Institution: WAMANRAO ITHAPE NURSING COLLEGE, SANGAMNER, AHMEDNAGAR

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, AHMEDNAGAR

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/11/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BATTISHE MOHINI DEELIP
Seat Number : 315
Name of the Institution : SAI NURSING INSTITUTE, RAHATA, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/12/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MORGHA PRIYANKA NATHA
Seat Number : 316
Name of the Institution : BAHUJAN SAMAJ PRABODHAN SCHOOL OF NURSING, AKOLE, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the  : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth  : 16/02/1997
Date Of Exam  : 14/01/2020 To 17/01/2020
Name of the Candidate  : MISS RATHAD MADHURI DAMU
Seat Number  : 317
Name of the Institution  : BAHUJAN SAMAJ PRABODHAN SCHOOL OF NURSING, AKOLE, AHMEDNAGAR
Name of the Examination  : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre  : GENERAL HOSPITAL, AHMEDNAGAR
Subjects  : I II III IV
Signature of the Holder  :

Note:  1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 317

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the  : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth  : 14/04/1997
Date Of Exam  : 14/01/2020 To 17/01/2020
Name of the Candidate  : MISS JAGTAP MADHURI BHIMRAJ
Seat Number  : 318
Name of the Institution  : KOPERGAON TALUKA VIDYARTHI SAHAYYAK SCHOOL OF NURSING, KOPERGAON
Name of the Examination  : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre  : GENERAL HOSPITAL, AHMEDNAGAR
Subjects  : III
Signature of the Holder  :

Note:  1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 318
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
29/11/1999

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS JAMDHADE POOJA BHAUSAHEB

**Seat Number**
319

**Name of the Institution**
KOPERGAON TALUKA VIDYARTHI SAHAYYAK SCHOOL OF NURSING, KOPERGAON

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, AHMEDNAGAR

**Subjects**
I, IV

**Signature of the Holder**

---

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
21/10/1997

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS MOKAL SAVITA RAMKISAN

**Seat Number**
320

**Name of the Institution**
KOPERGAON TALUKA VIDYARTHI SAHAYYAK SCHOOL OF NURSING, KOPERGAON

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, AHMEDNAGAR

**Subjects**
II, III

**Signature of the Holder**

---

**Note:**
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 02/11/1996

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS MULE SHITAL ROHIDAS

Seat Number: 321

Name of the Institution: KOPERGAON TALUKA VIDYARTHI SAHAYYAK SCHOOL OF NURSING, KOPERGAON

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, AHMEDNAGAR

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Date Of Birth: 14/04/1997

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS SATPUTE ROHINI GULAB

Seat Number: 322

Name of the Institution: KOPERGAON TALUKA VIDYARTHI SAHAYYAK SCHOOL OF NURSING, KOPERGAON

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, AHMEDNAGAR

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

13/01/2020

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

12/03/1985

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS KAMBLE SHIVKANYA DAGADU

**Seat Number**

323

**Name of the Institution**

SHREE SAI NURSING SCHOOL, JAMKHED, AHMEDNAGAR

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

GENERAL HOSPITAL, AHMEDNAGAR

**Subjects**

I II III IV

**Signature of the Holder**

Note:

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2) Practical Examination centre shall be as directed by the MSBNPE.

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

13/01/2020

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

01/07/1991

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS KASAB KALPANA SAKHADEV

**Seat Number**

324

**Name of the Institution**

SHREE SAI NURSING SCHOOL, JAMKHED, AHMEDNAGAR

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

GENERAL HOSPITAL, AHMEDNAGAR

**Subjects**

I II IV

**Signature of the Holder**

Note:

1) Candidate will not be allowed in examination hall without this Hall Ticket.

2) Practical Examination centre shall be as directed by the MSBNPE.

3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 23/06/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHINDE SHAMAL NAMDEO
Seat Number : 325
Name of the Institution : SHREE SAI NURSING SCHOOL, JAMKHED, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 06/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS UBALE SEEMA DHARMA
Seat Number : 326
Name of the Institution : SHREE SAI NURSING SCHOOL, JAMKHED, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birthday : 10/02/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS UBALE POOJA JAGANNATH
Seat Number : 327
Name of the Institution : SHREE SAI NURSING SCHOOL, JAMKHED, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : I IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birthday : 11/01/1991
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHMARE SARIKA SHRIRAM
Seat Number : 328
Name of the Institution : SHREE SAI NURSING SCHOOL, JAMKHED, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 19/03/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS GIRHE SHILABAI TUKARAM
Seat Number: 329
Name of the Institution: MANGALA NURSING SCHOOL, AHMEDNAGAR
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, AHMEDNAGAR
Subjects: I II III V VI IV
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 329

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 25/02/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KADALE SAVITA SOMNATH
Seat Number: 330
Name of the Institution: MANGALA NURSING SCHOOL, AHMEDNAGAR
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, AHMEDNAGAR
Subjects: II III
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAYKWAD SHIVANI BHAUSAHEB
Seat Number : 331
Name of the Institution : ABHINAV NURSING SCHOOL, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : II
Signature of the Holder :

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 331

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/02/1985
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHATESHAHI ARCHANA SURESH
Seat Number : 332
Name of the Institution : ABHINAV NURSING SCHOOL, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : II
Signature of the Holder :

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 332
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
01/07/2000

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS PATHARE ARCHANA RAJU

Seat Number :
333

Name of the Institution :
ABHINAV NURSING SCHOOL, AHMEDNAGAR

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
GENERAL HOSPITAL, AHMEDNAGAR

Subjects :
II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
20/08/1999

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS SALVE PRADNYA KISHOR

Seat Number :
334

Name of the Institution :
ABHINAV NURSING SCHOOL, AHMEDNAGAR

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
GENERAL HOSPITAL, AHMEDNAGAR

Subjects :
II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 18/10/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS SONAVANE PRATIKSHA RAJESH

Seat Number: 335

Name of the Institution: ABHINAV NURSING SCHOOL, AHMEDNAGAR

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, AHMEDNAGAR

Subjects: II III

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

 Sr. No. 335
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 12/03/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS TEJI SHUBHANGI DHANRAJ

Seat Number: 336

Name of the Institution: ABHINAV NURSING SCHOOL, AHMEDNAGAR

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, AHMEDNAGAR

Subjects: I II III IV

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 03/06/1984
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ZENDE REKHA LAKSHAMANRAO
Seat Number : 337
Name of the Institution : ABHINAV NURSING SCHOOL, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 29/01/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ZENDE NIKITA ANIL
Seat Number : 338
Name of the Institution : ABHINAV NURSING SCHOOL, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DABERAO TEJSWINI RAVISING
Seat Number : 339
Name of the Institution : DR. RAMESH DHOKANE PATIL SCHOOL OF NURSING, NEWASA, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 339

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SONAWANE PALLAVI BABASAHEB
Seat Number : 340
Name of the Institution : DR. RAMESH DHOKANE PATIL SCHOOL OF NURSING, NEWASA, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 340
<table>
<thead>
<tr>
<th>Sr. No.</th>
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<td><strong>MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION</strong></td>
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<td>Name of the Candidate</td>
<td>MISS BANGAR RANUBAI RAMNATH</td>
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<td>Name of the Institution</td>
<td>LATE BHAU DAJI PATIL DESHMUKH GRAMIN VIKAS PRATISHTHAN'S RANM SCHOOL, AHMEDNAGAR</td>
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<td>Subjects</td>
<td>I II III IV</td>
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<td>Signature of the Holder</td>
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</tbody>
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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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<table>
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<tr>
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<td>Date Of Birth</td>
<td>27/04/2000</td>
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<td>Date Of Exam</td>
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<td>Name of the Candidate</td>
<td>MISS BHANGARE APEKSHA MOHAN</td>
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<td>Name of the Institution</td>
<td>LATE BHAU DAJI PATIL DESHMUKH GRAMIN VIKAS PRATISHTHAN'S RANM SCHOOL, AHMEDNAGAR</td>
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<td>GENERAL HOSPITAL, AHMEDNAGAR</td>
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<td>Subjects</td>
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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 02/04/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BHOIR PRIYANKA RAMKRUSHNA

Seat Number : 343

Name of the Institution : LATE BHAU DAJI PATIL DESHMUKH GRAMIN VIKAS PRATISHTHAN'S RANM SCHOOL, AHMEDNAGAR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR

Subjects : II

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 343

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/01/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DUDHAWADE MAYA SANJAY

Seat Number : 344

Name of the Institution : LATE BHAU DAJI PATIL DESHMUKH GRAMIN VIKAS PRATISHTHAN'S RANM SCHOOL, AHMEDNAGAR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR

Subjects : II

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 344
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 07/07/1996

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAMBHIRE VAISHALI BHAGA

Seat Number : 345

Name of the Institution : LATE BHAU DAJI PATIL DESHMUKH GRAMIN VIKAS PRATISHTHAN'S RANM SCHOOL, AHMEDNAGAR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR

Subjects : I II IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 05/08/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAWANDE KAVITA NAMDEV

Seat Number : 346

Name of the Institution : LATE BHAU DAJI PATIL DESHMUKH GRAMIN VIKAS PRATISHTHAN'S RANM SCHOOL, AHMEDNAGAR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR

Subjects : I II IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/07/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHANKUTE SUNITA KASHINATH
Seat Number : 347
Name of the Institution : LATE BHAU DAJI PATIL DESHMUKH GRAMIN VIKAS PRATISHTHAN'S RANM SCHOOL, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHODE JYOTSNA SALU
Seat Number : 348
Name of the Institution : LATE BHAU DAJI PATIL DESHMUKH GRAMIN VIKAS PRATISHTHAN'S RANM SCHOOL, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 11/04/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KADU SHAKUNTALA SAKHARAM

Seat Number : 349

Name of the Institution : LATE BHAU DAJI PATIL DESHMUKH GRAMIN VIKAS PRATISHTHAN'S RANM SCHOOL, AHMEDNAGAR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR

Subjects : II

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 349

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 27/01/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MUTHE SOMABAI BHADU

Seat Number : 350

Name of the Institution : LATE BHAU DAJI PATIL DESHMUKH GRAMIN VIKAS PRATISHTHAN'S RANM SCHOOL, AHMEDNAGAR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR

Subjects : I IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 350
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS POPERE KANTA HIRAMAN
Seat Number : 351
Name of the Institution : LATE BHAU DAJI PATIL DESHMUKH GRAMIN VIKAS PRATISHTHAN'S RANM SCHOOL, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : I II IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 351

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DETHE ROHINI RAJENDRA
Seat Number : 352
Name of the Institution : SAWALI SCHOOL OF NURSING, PARNER, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 352

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 08/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GADGE MONIKA BALASAHEB

Seat Number : 353
Name of the Institution : SAWALI SCHOOL OF NURSING, PARNER, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR

Subjects : IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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Sr. No. 354

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 12/09/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SALVE SWAPNALI SHRIDHAR

Seat Number : 354
Name of the Institution : SAWALI SCHOOL OF NURSING, PARNER, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR

Subjects : IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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Note:  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the  : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth  : 05/10/1999
Date Of Exam  : 14/01/2020 To 17/01/2020
Name of the Candidate  : MISS GADEKAR JAYSHRI NANASAHEB
Seat Number  : 357
Name of the Institution  : JIJAMATA NURSING SCHOOL, SHEVGAON, AHMEDNAGAR
Name of the Examination  : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre  : GENERAL HOSPITAL, AHMEDNAGAR
Subjects  : II
Signature of the Holder  :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No.  357

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the  : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth  : 15/11/1999
Date Of Exam  : 14/01/2020 To 17/01/2020
Name of the Candidate  : MISS GADHAVE VAISHALI NANASAHEB
Seat Number  : 358
Name of the Institution  : JIJAMATA NURSING SCHOOL, SHEVGAON, AHMEDNAGAR
Name of the Examination  : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre  : GENERAL HOSPITAL, AHMEDNAGAR
Subjects  : II
Signature of the Holder  :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No.  358
For the  : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth  : 17/07/2001
Date Of Exam  : 14/01/2020 To 17/01/2020
Name of the Candidate  : MISS GAIKWAD PRERNA SADANAND
Seat Number  : 359
Name of the Institution  : JIJAMATA NURSING SCHOOL, SHEVGAON, AHMEDNAGAR
Name of the Examination  : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre  : GENERAL HOSPITAL, AHMEDNAGAR
Subjects  : I II III IV
Signature of the Holder  :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the  : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth  : 20/12/2000
Date Of Exam  : 14/01/2020 To 17/01/2020
Name of the Candidate  : MISS GAWHALE SHUBHANGI RAMESH
Seat Number  : 360
Name of the Institution  : JIJAMATA NURSING SCHOOL, SHEVGAON, AHMEDNAGAR
Name of the Examination  : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre  : GENERAL HOSPITAL, AHMEDNAGAR
Subjects  : I II IV
Signature of the Holder  :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 28/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KALE SUREKHA RAJENDRA
Seat Number : 361
Name of the Institution : JIJAMATA NURSING SCHOOL, SHEVGAON, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 361

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 08/10/1987
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KANGARE MANISHA LAXMAN
Seat Number : 362
Name of the Institution : JIJAMATA NURSING SCHOOL, SHEVGAON, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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<th>367</th>
</tr>
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<tbody>
<tr>
<td>Name of the Exam. Centre</td>
<td>: GENERAL HOSPITAL, AHMEDNAGAR</td>
</tr>
<tr>
<td>Name of the Examination</td>
<td>: AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
</tr>
<tr>
<td>Name of the Candidate</td>
<td>: MISS CHAUDHARI JYOTI JAU</td>
</tr>
<tr>
<td>Date Of Exam</td>
<td>: 14/01/2020 To 17/01/2020</td>
</tr>
<tr>
<td>Date Of Birth</td>
<td>: 04/04/1997</td>
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<tr>
<td>Name of the Institution</td>
<td>: Saibaba Nursing School, Kolpewadi, Ahmednagar</td>
</tr>
<tr>
<td>Subjects</td>
<td>: I III</td>
</tr>
<tr>
<td>Seat Number</td>
<td>: 367</td>
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</table>

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<tr>
<td>Name of the Candidate</td>
<td>: MISS KADU SONALI RAMESH</td>
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<tr>
<td>Date Of Exam</td>
<td>: 14/01/2020 To 17/01/2020</td>
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<td>Date Of Birth</td>
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<td>Name of the Institution</td>
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<td>Subjects</td>
<td>: II</td>
</tr>
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</tr>
<tr>
<td><strong>Date Of Birth</strong></td>
<td>25/01/1998</td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS KAMADI YOGITA JANU</td>
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<tr>
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<td><strong>Name of the Institution</strong></td>
<td>Saibaba Nursing School, Kolpewadi, Ahmednagar</td>
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**Note:**
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<tr>
<td><strong>Date Of Birth</strong></td>
<td>06/07/1998</td>
</tr>
<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS PAWARA MOGARA REHANJYA</td>
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<tr>
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<td>370</td>
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<tr>
<td><strong>Name of the Institution</strong></td>
<td>Saibaba Nursing School, Kolpewadi, Ahmednagar</td>
</tr>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/01/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAMBAR ANJULA KASHIRAM
Seat Number : 371
Name of the Institution : Saibaba Nursing School, Kolpewadi, Ahmednagar
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Date Of Birth : 26/01/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAMBAR MANJULA KASHIRAM
Seat Number : 372
Name of the Institution : Saibaba Nursing School, Kolpewadi, Ahmednagar
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASAVE PRITI SUREN德拉
Seat Number : 375
Name of the Institution : Saibaba Nursing School, Kolpewadi, Ahmednagar
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : I II
Signature of the Holder :

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Sr. No. 375

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASAVE GAYATRI ULHAS
Seat Number : 376
Name of the Institution : Saibaba Nursing School, Kolpewadi, Ahmednagar
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 376
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 06/03/2001
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS ARAWADE ASHLESHA RATAN
Seat Number: 377
Name of the Institution: Praytna Nursing College, Ahmednagar
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, AHMEDNAGAR
Subjects: I  III  IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 377

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 24/07/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SALVE RUTIKA APPASAHEB
Seat Number: 378
Name of the Institution: Praytna Nursing College, Ahmednagar
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, AHMEDNAGAR
Subjects: I  IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 378
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
25/06/1998

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS VASAVE SAKABAI ARSHI

Seat Number :
379

Name of the Institution :
Praytna Nursing College, Ahmednagar

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
GENERAL HOSPITAL, AHMEDNAGAR

Subjects :
I II III IV

Signature of the Holder :

Note:
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Sr. No. 379

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
11/02/2000

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS VASAVE SAKILA PARTA

Seat Number :
380

Name of the Institution :
Praytna Nursing College, Ahmednagar

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
GENERAL HOSPITAL, AHMEDNAGAR

Subjects :
IV

Signature of the Holder :

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Sr. No. 380
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/07/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWAR NIMA LOTAN
Seat Number : 381
Name of the Institution : SHRIRAMPUR NURSING SCHOOL, SHRIAMPUR, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/07/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA MINAKSHI VAHARYA
Seat Number : 382
Name of the Institution : SHRIRAMPUR NURSING SCHOOL, SHRIAMPUR, AHMEDNAGAR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AHMEDNAGAR
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/09/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SARWADE RUPALI VASANT
Seat Number : 383
Name of the Institution : DR. J. J. MAGDUM SON, SHIROL, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : V VI
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 383

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/11/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VAJANTRI KAJAL PRAKASH
Seat Number : 384
Name of the Institution : DR. J. J. MAGDUM SON, SHIROL, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : V VI
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 387

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE ASMITA SURESH
Seat Number : 387
Name of the Institution : KEDARI REDEKAR NURSING SCHOOL, GADHINGLAJ, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 388

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/08/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE ARATI MANIK
Seat Number : 388
Name of the Institution : MAHALAXMI NURSING INSTITUTE, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/12/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHMARE AARTI NISHIKANT
Seat Number : 389
Name of the Institution : MAHALAXMI NURSING INSTITUTE, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 389

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE DIPALI VISHWAS
Seat Number : 390
Name of the Institution : Y.D. MANE SCHOOL OF NURSING, KAGAL, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 390
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE PRATIKSHA NANDKUMAR
Seat Number : 391
Name of the Institution : Y.D. MANE SCHOOL OF NURSING, KAGAL, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : I IV
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE SHRADDHA SAMBAHAI
Seat Number : 392
Name of the Institution : Y.D. MANE SCHOOL OF NURSING, KAGAL, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/01/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE ALISHA CHANDRAKANT
Seat Number : 393
Name of the Institution : Y.D. MANE SCHOOL OF NURSING, KAGAL, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : II IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 393

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE ASHWINI GOVINDA
Seat Number : 394
Name of the Institution : Y.D. MANE SCHOOL OF NURSING, KAGAL, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. 394
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 04/06/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KAMBLE PRADNYA RAMESH
Seat Number: 395
Name of the Institution: ADHAAR NURSING SCHOOL, AJRA KOLHAPUR
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects: I
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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Sr. No. 395

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 13/01/1992
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KAMBLE ARCHANA RAMA
Seat Number: 396
Name of the Institution: ADHAAR NURSING SCHOOL, AJRA KOLHAPUR
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects: I
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 396
**FOR THE**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**DATE OF BIRTH**

18/09/2000

**DATE OF EXAM**

14/01/2020 To 17/01/2020

**NAME OF THE CANDIDATE**

MISS KAMBLE ASHVINI LAXMAN

**SEAT NUMBER**

397

**NAME OF THE INSTITUTION**

ADHAAR NURSING SCHOOL, AJRA KOLHAPUR

**NAME OF THE EXAMINATION**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**NAME OF THE EXAM. CENTRE**

C.P.R. GENERAL HOSPITAL, KOLHAPUR

**SUBJECTS**

I II III IV

**SIGNATURE OF THE HOLDER**

Note:

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**FOR THE**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**DATE OF BIRTH**

19/07/1991

**DATE OF EXAM**

14/01/2020 To 17/01/2020

**NAME OF THE CANDIDATE**

SMT KAMBLE UJWALA CHANDRAKANT

Nee(KAMBLE UJWALA ANIL)

**SEAT NUMBER**

398

**NAME OF THE INSTITUTION**

ADHAAR NURSING SCHOOL, AJRA KOLHAPUR

**NAME OF THE EXAMINATION**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**NAME OF THE EXAM. CENTRE**

C.P.R. GENERAL HOSPITAL, KOLHAPUR

**SUBJECTS**

I II III IV

**SIGNATURE OF THE HOLDER**

Note:

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the:  AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth:  18/12/1999
Date Of Exam:  14/01/2020 To 17/01/2020
Name of the Candidate:  MISS BHASKAR NIKITA SAMBHAJI
Seat Number:  399
Name of the Institution:  KAI. BALWANTRAO HANUMANTRAO PATIL SHIKSHAN PRASARAK MANDAL, KARVIR, KOLHAPUR
Name of the Examination:  AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre:  C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects:  IV
Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the:  AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth:  06/01/2000
Date Of Exam:  14/01/2020 To 17/01/2020
Name of the Candidate:  MISS JADHAV SANDHYARANI SUNIL
Seat Number:  400
Name of the Institution:  KAI. BALWANTRAO HANUMANTRAO PATIL SHIKSHAN PRASARAK MANDAL, KARVIR, KOLHAPUR
Name of the Examination:  AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre:  C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects:  II IV
Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/01/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE TEJSWINI KRUSNAT
Seat Number : 401
Name of the Institution : KAI. BALWANTRAO HANUMANTRAO PATIL SHIKSHAN PRASARAK MANDAL, KARVIR, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : II IV
Signature of the Holder : REGISTRAR

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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Sr. No. : 401

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/03/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE ANKITA RAJU
Seat Number : 402
Name of the Institution : KAI. BALWANTRAO HANUMANTRAO PATIL SHIKSHAN PRASARAK MANDAL, KARVIR, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : II IV
Signature of the Holder : REGISTRAR

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 16/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE ASHLESHA NIVAS
Seat Number : 403
Name of the Institution : KAI. BALWANTRAO HANUMANTRAO PATIL SHIKSHAN PRASARAK MANDAL, KARVIR, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : I III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

SR. NO. 403

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 13/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BANSODE AARTI SARDAR
Seat Number : 404
Name of the Institution : SARASWATI GAIKWAD NURSING SCHOOL , KOTOLI, PANHALA, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

SR. NO. 404
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/09/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BANSODE DIPALI SAKHARAM
Seat Number : 405
Name of the Institution : SARASWATI GAIKWAD NURSING SCHOOL, KOTOLI, PANHALA, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 405

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/05/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE NIKEETA BHANUDAS
Seat Number : 406
Name of the Institution : SARASWATI GAIKWAD NURSING SCHOOL, KOTOLI, PANHALA, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 16/10/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KAMBLE APEKSHA BHANUDAS

Seat Number : 407

Name of the Institution : SARASWATI GAIKWAD NURSING SCHOOL, KOTOLI, PANHALA, KOLHAPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR

Subjects : I II IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 407

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 09/11/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KAMBLE NAYANA MADHUKAR

Seat Number : 408

Name of the Institution : SARASWATI GAIKWAD NURSING SCHOOL, KOTOLI, PANHALA, KOLHAPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 408

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 409

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MOHITE UJJWALA MADHUKAR
Seat Number : 409
Name of the Institution : SARASWATI GAIKWAD NURSING SCHOOL , KOTOLI,
PANHALA, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 410

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAKATE HARSHADA GORAKHANATH
Seat Number : 410
Name of the Institution : SARASWATI GAIKWAD NURSING SCHOOL , KOTOLI,
PANHALA, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
   2) Practical Examination centre shall be as directed by the MSBNPE
   3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 31/05/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ARADALE SWATI DADA
Seat Number : 413
Name of the Institution : CREATIVE NURSING SCHOOL, GADHINGLAJ, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : I, II, IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 413

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHUDAI NIKITA PANDIT
Seat Number : 414
Name of the Institution : CREATIVE NURSING SCHOOL, GADHINGLAJ, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 414
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KORE POOJA SHRIKANT
Seat Number : 415
Name of the Institution : CREATIVE NURSING SCHOOL, GADHINGLAJ, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 415

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MANG UJAWALA KALLAPPA
Seat Number : 416
Name of the Institution : CREATIVE NURSING SCHOOL, GADHINGLAJ, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 416
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 23/03/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS VITEKARI SWAPNALI SADASHIV

Seat Number : 417

Name of the Institution : CREATIVE NURSING SCHOOL, GADHINGLAJ, KOLHAPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR

Subjects : 1

Signature of the Holder : 

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 12/06/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS VITEKARI SUPRIYA SADASHIV

Seat Number : 418

Name of the Institution : CREATIVE NURSING SCHOOL, GADHINGLAJ, KOLHAPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR

Subjects : 1

Signature of the Holder : 

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
## Hall Ticket

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

17/11/1998

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS AVAGHADE SUMITRA PRAKASH

**Seat Number**

419

**Name of the Institution**

SAHAKAR MAHARSHI TATYASHEB KORE NURSING SCHOOL, HATKANGALE, KOLHAPUR

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

C.P.R. GENERAL HOSPITAL, KOLHAPUR

**Subjects**

I, II, IV

**Signature of the Holder**

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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## Hall Ticket

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

07/06/2000

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS KURANE PRAJAKTA AJIT

**Seat Number**

420

**Name of the Institution**

SAHAKAR MAHARSHI TATYASHEB KORE NURSING SCHOOL, HATKANGALE, KOLHAPUR

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

C.P.R. GENERAL HOSPITAL, KOLHAPUR

**Subjects**

IV

**Signature of the Holder**

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHANDANSHIVE MEGHA MUKUND
Seat Number : 421
Name of the Institution : SHRI BHAIRAVNATH NURSING SCHOOL, ICHALKARANJI, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/11/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KURANE RUTUJA AJAY
Seat Number : 422
Name of the Institution : SHRI BHAIRAVNATH NURSING SCHOOL, ICHALKARANJI, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 26/07/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MANE DIPALI DEVDAS

Seat Number : 423

Name of the Institution : SAVITRIBAI PHULE COLLEGE OF NURSING, KOLHAPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR

Subjects : II

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 12/11/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BHOSALE MAYURI SHIVAJI

Seat Number : 424

Name of the Institution : SANJEEVA NURSING SCHOOL, KOLHAPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR

Subjects : I

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DABHADE AISHWARYA BALU
Seat Number : 425
Name of the Institution : SANJEEVA NURSING SCHOOL, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 425

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MANE SWAPNALI SANJAY
Seat Number : 426
Name of the Institution : SANJEEVA NURSING SCHOOL, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 426
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAWANT SHILPA VIJAY
Seat Number : 427
Name of the Institution : SANJEEVA NURSING SCHOOL, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 427

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PADVI NILIMA SURESH
Seat Number : 428
Name of the Institution : SANT GAJANAN MAHARAJ SCHOOL OF NURSING, CHINCHEWADI, GADHINGLAI, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 428
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 429

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 29/07/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS VASAVE HARSHADA DHARMENDRA

Seat Number: 429

Name of the Institution: SANT GAJANAN MAHARAJ SCHOOL OF NURSING, CHINCHEWADI, GADHINGLAJ, KOLHAPUR

Name of the Exam. Centre: C.P.R. GENERAL HOSPITAL, KOLHAPUR

Signature of the Holder: 

Date Of Birth: 24/02/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS KAMBLE ANKITA DATTATRAY

Seat Number: 430

Name of the Institution: SHRI SIDDHI NURSING SCHOOL, KAGAL, KOLHAPUR

Name of the Exam. Centre: C.P.R. GENERAL HOSPITAL, KOLHAPUR

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 14/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE ARCHANA MARUTI

Seat Number : 431
Name of the Institution : SHRI SIDDHI NURSING SCHOOL, KAGAL, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 431

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE DIKSHA BALVANT

Seat Number : 432
Name of the Institution : SHRI SIDDHI NURSING SCHOOL, KAGAL, KOLHAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : C.P.R. GENERAL HOSPITAL, KOLHAPUR
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 432
For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
31/01/2000

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS SATHE YOGITA NAMDEV

Seat Number
433

Name of the Institution
SHRI SIDDHI NURSING SCHOOL, KAGAL, KOLHAPUR

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
C.P.R. GENERAL HOSPITAL, KOLHAPUR

Subjects
IV

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
01/04/2000

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS BUCHADE SWAPNALI SADANAND

Seat Number
434

Name of the Institution
Late Ushatai Nursing School, Kolhapur

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
C.P.R. GENERAL HOSPITAL, KOLHAPUR

Subjects
I

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
<table>
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<th>Sr. No.</th>
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<td>Name of Exam. Centre</td>
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<td>Name of the Institution</td>
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<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td>Name of the Candidate</td>
<td>MISS BHORAKADE KAJAL NARAYAN</td>
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<td>Seat Number</td>
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<td>Name of the Candidate</td>
<td>MISS BHORAKADE KAJAL NARAYAN</td>
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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHANDANSHIVE KALPANA SIDHARTH
Seat Number : 439
Name of the Institution : KAMAL INSTITUTE OF NURSING EDUCATION, JATH, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 439

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHUMBARE SARASWATI SUKHADEV
Seat Number : 440
Name of the Institution : KAMAL INSTITUTE OF NURSING EDUCATION, JATH, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/06/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE BHAGYASHRI SHRISHAIL
Seat Number : 441
Name of the Institution : KAMAL INSTITUTE OF NURSING EDUCATION, JATH, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : II, III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS THOKALE ROHINI UTTAM
Seat Number : 442
Name of the Institution : KAMAL INSTITUTE OF NURSING EDUCATION, JATH, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
# Hall Ticket

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
22/04/2000

**Date Of Exam**
14/01/2020 to 17/01/2020

**Name of the Candidate**
MISS SUTAR GOURI BALU

**Seat Number**
445

**Name of the Institution**
HON.R.R.PATIL INSTITUTE OF NSG EDUCATION, SANGLI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Sangli

**Subjects**
II

**Signature of the Holder**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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# Hall Ticket

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
09/06/2000

**Date Of Exam**
14/01/2020 to 17/01/2020

**Name of the Candidate**
MISS BALLARI SONALI NARASINHA

**Seat Number**
446

**Name of the Institution**
KRANTIAGRANI G.D.BAPU LAD SCH OF NS, SANGLI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Sangli

**Subjects**
II IV

**Signature of the Holder**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 20/09/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS BALLARI GITANJALI NARSHIMH
Seat Number: 447
Name of the Institution: KRANTIAGRANI G.D.BAPU LAD SCH OF NS, SANGLI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Sangli
Subjects: I II III IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth: 06/12/1995
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS DHANAWADE PRANOTI SUNIL
Seat Number: 448
Name of the Institution: KRANTIAGRANI G.D.BAPU LAD SCH OF NS, SANGLI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Sangli
Subjects: I III IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 447
Sr. No. 448
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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

13/01/2020

**For the**

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<th>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</th>
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**Date Of Birth**

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**Date Of Exam**

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**Name of the Candidate**

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<th>MISS DHODMANI SUSHMITA VILAS</th>
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**Seat Number**

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**Name of the Institution**

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**Name of the Examination**

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<th>AUXILLARY NURSE MIDWIFERY FIRST YEAR</th>
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**Name of the Exam. Centre**

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**Subjects**

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**Signature of the Holder**

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**Note:**

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**Sr. No. | 450**

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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

13/01/2020

**For the**

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**Date Of Birth**

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**Date Of Exam**

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**Name of the Candidate**

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<th>MISS KAMBLE JAYSHRI ANANDA</th>
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**Seat Number**

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**Name of the Institution**

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**Name of the Examination**

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**Name of the Exam. Centre**

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**Subjects**

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<th>I II III IV</th>
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**Signature of the Holder**

---

**Note:**

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 30/05/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAKATE RUPALI ASHOK
Seat Number : 451
Name of the Institution : KRANTIAGRANI G.D.BAPU LAD SCH OF NS, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 451

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 04/02/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AIWALE SUDHARANI MADAGONDA
Seat Number : 452
Name of the Institution : UMA INST. OF NURSING EDUCATION, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 452
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
06/06/1995

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS KOLI BALABAI TUKARAM

Seat Number:
453

Name of the Institution:
UMA INST. OF NURSING EDUCATION, SANGLI

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Sangli

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 453

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
26/02/1999

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS MORE PRATIKSHA SANJAY

Seat Number:
454

Name of the Institution:
UMA INST. OF NURSING EDUCATION, SANGLI

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Sangli

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 454
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 20/02/1998

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS LONDHE MAYURI JAGANNATH

Seat Number: 457

Name of the Institution: PHALTAN EDUCATION SOCIETY, SCHOOL OF NURSING, PHALTAN, SATARA

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Sangli

Subjects: I III IV

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 459

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 06/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHAVHAN JAYVANTI GANPAT
Seat Number : 459
Name of the Institution : LATE NARAYANDAS BHAWANGDAS CHHABADA TRAINING COLLEGE OF NURSING, SATARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : I IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 460

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 16/05/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KURHADA NIRMALA PESHU
Seat Number : 460
Name of the Institution : LATE NARAYANDAS BHAWANGDAS CHHABADA TRAINING COLLEGE OF NURSING, SATARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/02/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MUKANE SUMITRA SURESH
Seat Number : 461
Name of the Institution : LATE NARAYANDAS BHAWANGDAS CHHABADA TRAINING COLLEGE OF NURSING, SATARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : III, IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NIMLA PRATIKSHA BHIVAJI
Seat Number : 462
Name of the Institution : LATE NARAYANDAS BHAWANGDAS CHHABADA TRAINING COLLEGE OF NURSING, SATARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : III, IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TUMBADA NIKITA RAMESH
Seat Number : 463
Name of the Institution : LATE NARAYANDAS BHAWANGDAS CHHABADA TRAINING COLLEGE OF NURSING, SATARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHAURE PRATIKSHA PUNDALIK
Seat Number : 464
Name of the Institution : SHAKUNTALA INSTITUTE OF NURSING EDUCATION, SATARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHAVAN POONAM BALU
Seat Number : 465
Name of the Institution : ADARSH NURSING SCHOOL, VITA, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 465

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHENDE TRUPTI BHASKAR
Seat Number : 466
Name of the Institution : ADARSH NURSING SCHOOL, VITA, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 466
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DODAKE VASANTI VIJAY
Seat Number : 467
Name of the Institution : ADARSH NURSING SCHOOL, VITA, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 467

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS INGALE KAJAL RAMCHANDRA
Seat Number : 468
Name of the Institution : ADARSH NURSING SCHOOL, VITA, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 468
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUNILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 20/03/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KARANDE SUPRIYA MAHADEV

Seat Number : 469

Name of the Institution : ADARSH NURSING SCHOOL, VITA, SANGLI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, SANGLI

Subjects : I II III

Signature of the Holder : 

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 469

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUNILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/01/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SATHE BHAGYASHRI MADHUKAR

Seat Number : 470

Name of the Institution : ADARSH NURSING SCHOOL, VITA, SANGLI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, SANGLI

Subjects : III

Signature of the Holder : 

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 470
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 03/07/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SHINDE SIMA ATMARAM
Seat Number: 471
Name of the Institution: ADARSH NURSING SCHOOL, VITA, SANGLI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Sangli
Subjects: II III IV
Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth: 22/09/1988
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: SMT GHOLAP RESHMA LAXMAN Nee(KAMBLE RESHMA SUNIL)
Seat Number: 472
Name of the Institution: HUTATMA INSTITUTE OF NURSING, WALWA, SANGLI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Sangli
Subjects: II III IV
Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 03/11/1984
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : SMT KAMBLE RANJANA SHIVAJI
                        Neet(MOHITE RANJANA NAVNATH)
Seat Number : 473
Name of the Institution : HUTATMA INSTITUTE OF NURSING , WALWA , SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 473

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 26/10/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE AARATI ASHOK
Seat Number : 474
Name of the Institution : HUTATMA INSTITUTE OF NURSING , WALWA , SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 474
### Sr. No. 475

<table>
<thead>
<tr>
<th>For the</th>
<th>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</th>
</tr>
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<tbody>
<tr>
<td>Date Of Birth</td>
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<td>Date Of Exam</td>
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<td>Name of the Candidate</td>
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<td>Seat Number</td>
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<td>Name of the Institution</td>
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<tr>
<td>Name of the Exam. Centre</td>
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**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

### Sr. No. 476

<table>
<thead>
<tr>
<th>For the</th>
<th>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</th>
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<tr>
<td>Date Of Birth</td>
<td>01/12/1998</td>
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<tr>
<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td>Name of the Candidate</td>
<td>MISS SHIKHARE SHRADDHA VISHNU</td>
</tr>
<tr>
<td>Seat Number</td>
<td>476</td>
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<tr>
<td>Name of the Institution</td>
<td>HUTATMA INSTITUTE OF NURSING, WALWA, SANGLI</td>
</tr>
<tr>
<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
</tr>
<tr>
<td>Name of the Exam. Centre</td>
<td>GENERAL HOSPITAL, SANGLI</td>
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<tr>
<td>Subjects</td>
<td>II, IV</td>
</tr>
<tr>
<td>Signature of the Holder</td>
<td></td>
</tr>
</tbody>
</table>

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 24/01/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS YADAV APEKSHA SANJAY

Seat Number: 477

Name of the Institution: HUTATMA INSTITUTE OF NURSING, WALWA, SANGLI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Sangli

Subjects: II III IV

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.

2) Practical Examination centre shall be as directed by the MSBNPE

3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 477

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 06/07/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS ATRAM SULOCHANA SHAMRAO

Seat Number: 478

Name of the Institution: ABHINAV INSTITUTE OF NURSING EDUCATION, MIRAJ, SANGLI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Sangli

Subjects: IV

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.

2) Practical Examination centre shall be as directed by the MSBNPE

3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/07/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHILAVEKAR JYOTI GENDALAL
Seat Number : 479
Name of the Institution : ABHINAV INSTITUTE OF NURSING EDUCATION, MIRAJ, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DARSIMBE ANJANA MUNNA
Seat Number : 480
Name of the Institution : ABHINAV INSTITUTE OF NURSING EDUCATION, MIRAJ, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : II IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KASTEKAR GITA CHHOGEAL
Seat Number : 481
Name of the Institution : ABHINAV INSTITUTE OF NURSING EDUCATION, MIRAJ, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/04/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KUMARE ALISHIBA KOBAKU
Seat Number : 482
Name of the Institution : ABHINAV INSTITUTE OF NURSING EDUCATION, MIRAJ, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 01/02/2001

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS LOHALE LEENA BHIWAJI

Seat Number: 483

Name of the Institution: ABHINAV INSTITUTE OF NURSING EDUCATION, MIRAJ, SANGLI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Sangli

Subjects: IV

Signature of the Holder: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 15/06/1996

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS MAWASKAR KAVITA RAMLAL

Seat Number: 484

Name of the Institution: ABHINAV INSTITUTE OF NURSING EDUCATION, MIRAJ, SANGLI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Sangli

Subjects: III

Signature of the Holder: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 22/01/2001
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS RAKSHE POOJA VIJAY

Seat Number: 485
Name of the Institution: VIDYA SAGAR NURSING SCHOOL, SANGLI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Sangli

Subjects: IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.  
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 485

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 24/12/1995
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: SMT SAVAISARJE VARSHALI VISHWAS Nee(KAMBLE VARSHALI GAUTAM)

Seat Number: 486
Name of the Institution: VIDYA SAGAR NURSING SCHOOL, SANGLI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Sangli

Subjects: III
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE. 
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 486
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILIARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 10/07/1995

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS ETAM ARUNA SURESH

Seat Number: 487

Name of the Institution: KEDARNATH NURSING SCHOOL, ISLAMPUR, SANGLI

Name of the Examination: AUXILIARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Sangli

Subjects: IV

Signature of the Holder: ________________________________

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 487

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILIARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 02/10/1996

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS KAMBLE PRANALI RAJESH

Seat Number: 488

Name of the Institution: KEDARNATH NURSING SCHOOL, ISLAMPUR, SANGLI

Name of the Examination: AUXILIARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Sangli

Subjects: IV

Signature of the Holder: ________________________________

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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Sr. No. 488
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/05/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE PRIYANKA RAVINDRA
Seat Number : 489
Name of the Institution : KEDARNATH NURSING SCHOOL, ISLAMPUR, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : I II IV
Signature of the Holder : Signature of the Holder

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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Sr. No. 489

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHILARE TEJASWINI SOMNATH
Seat Number : 490
Name of the Institution : KEDARNATH NURSING SCHOOL, ISLAMPUR, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : II IV
Signature of the Holder : Signature of the Holder

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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Sr. No. 490
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/01/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PATSUTE KAJAL PANDURANG

Seat Number : 491

Name of the Institution : KEDARNATH NURSING SCHOOL, ISLAMPUR, SANGLI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Sangli

Subjects : II IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/08/1990

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS WAGHMARE POONAM SAVKAR

Seat Number : 492

Name of the Institution : KEDARNATH NURSING SCHOOL, ISLAMPUR, SANGLI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Sangli

Subjects : II III IV

Signature of the Holder :

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<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<td><strong>Seat Number</strong></td>
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<td>SMT ATTAR RIJWANA SHAHAJHAN Nee (TAMBOLI RIJWANA SAMEER)</td>
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<td><strong>Name of the Exam. Centre</strong></td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHORE NIKITA VIKAS
Seat Number : 495
Name of the Institution : LAXMIPRABHA NURSING INSTITUTE, MIRAJ, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : I III IV
Signature of the Holder :

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/10/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHORE NISHA TANAJI
Seat Number : 496
Name of the Institution : LAXMIPRABHA NURSING INSTITUTE, MIRAJ, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : III
Signature of the Holder :

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth

19/09/1990

Date Of Exam

14/01/2020 To 17/01/2020

Name of the Candidate

SMT DHOBALE PRAMILA DATTA

Neel(KAMBLE PRAMILA ANANDRAO)

Seat Number

497

Name of the Institution

LAXMIPRABHA NURSING INSTITUTE, MIRAJ, SANGLI

Name of the Examination

AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre

GENERAL HOSPITAL, Sangli

Signature of the Holder

Note:

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Date Of Birth

30/04/1984

Date Of Exam

14/01/2020 To 17/01/2020

Name of the Candidate

MISS KAMBLE SANDHYA SHIVAJI

Seat Number

498

Name of the Institution

LAXMIPRABHA NURSING INSTITUTE, MIRAJ, SANGLI

Name of the Examination

AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre

GENERAL HOSPITAL, Sangli

Signature of the Holder

Note:

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 06/06/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHENDE ASHWINI SANJAY
Seat Number : 501
Name of the Institution : SHABBIR AHMED ANSARI NURSING SCHOOL, MIRAJ, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : I II III V VI IV
Signature of the Holder :

Note:
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Sr. No. 501

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 26/05/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MADRASI SUVARTA YAKOB
Seat Number : 502
Name of the Institution : SHABBIR AHMED ANSARI NURSING SCHOOL, MIRAJ, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : I II III V VI IV
Signature of the Holder :

Note:
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Sr. No. 502
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHIKALGAR SAMEERA UBED
Seat Number : 503
Name of the Institution : SHABBI AHMED ANSARI NURSING SCHOOL, MIRAJ, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : II
Signature of the Holder : 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/11/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SUTAR RUPALI RAJENDRA
Seat Number : 504
Name of the Institution : SHABBI AHMED ANSARI NURSING SCHOOL, MIRAJ, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
16/10/1995

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS BAGADE CHARUSHILA BHAGWAN

Seat Number
505

Name of the Institution
DHANVANTARI INSTITUTE OF NURSING PARAMEDICAL SCIENCES, SHIRALA, SANGLI

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
GENERAL HOSPITAL, Sangli

Subjects
II IV

Signature of the Holder

Note:
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For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
28/02/1995

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS BANASODE SONALI PRALHAD

Seat Number
506

Name of the Institution
DHANVANTARI INSTITUTE OF NURSING PARAMEDICAL SCIENCES, SHIRALA, SANGLI

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
GENERAL HOSPITAL, Sangli

Subjects
I II III V VI IV

Signature of the Holder

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
16/11/1999

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS GHOLAP ARATI SURESH

Seat Number:
507

Name of the Institution:
DHANVANTARI INSTITUTE OF NURSING PARAMEDICAL SCIENCES, SHIRALA, SANGLI

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Sangli

Subjects:
IV

Signature of the Holder:

Note:
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Date Of Birth:
12/12/1999

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS GHOLAP RUTUJA DILIP

Seat Number:
508

Name of the Institution:
DHANVANTARI INSTITUTE OF NURSING PARAMEDICAL SCIENCES, SHIRALA, SANGLI

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Sangli

Subjects:
I II III IV

Signature of the Holder:

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 01/01/1996

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS JAGTAP RAJNANDINI SUBHASH

Seat Number: 509

Name of the Institution: DHANVANTARI INSTITUTE OF NURSING PARAMEDICAL SCIENCES, SHIRALA, SANGLI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Sangli

Subjects: II

Signature of the Holder:

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Sr. No. 509

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 19/07/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS PATIL JAYASHREE SHANKAR

Seat Number: 510

Name of the Institution: DHANVANTARI INSTITUTE OF NURSING PARAMEDICAL SCIENCES, SHIRALA, SANGLI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Sangli

Subjects: II

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 510
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

**Sr. No.:** 511

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<th>For the</th>
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

**Sr. No.:** 512

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<td>GENERAL HOSPITAL, Sangli</td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
</tr>
<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS BADE KAJAL UTTAM</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
<td>513</td>
</tr>
<tr>
<td><strong>Name of the Institution</strong></td>
<td>SHRI DATTA SCHOOL OF NURSING, SHIRALA, SANGLI</td>
</tr>
<tr>
<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
</tr>
<tr>
<td><strong>Name of the Exam. Centre</strong></td>
<td>GENERAL HOSPITAL, Sangli</td>
</tr>
<tr>
<td><strong>Subjects</strong></td>
<td>II III IV</td>
</tr>
<tr>
<td><strong>Signature of the Holder</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>514</th>
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<tbody>
<tr>
<td><strong>MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION</strong></td>
<td></td>
</tr>
<tr>
<td><strong>HALL TICKET</strong></td>
<td>13/01/2020</td>
</tr>
<tr>
<td><strong>For the</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<tr>
<td><strong>Date Of Birth</strong></td>
<td>31/03/1987</td>
</tr>
<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>SMT KALE PRIYANKA MANOHAR Nee(KAMBLE PRIYANKA RUPESH)</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
<td>514</td>
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<tr>
<td><strong>Name of the Institution</strong></td>
<td>SHRI DATTA SCHOOL OF NURSING, SHIRALA, SANGLI</td>
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<td><strong>Name of the Exam. Centre</strong></td>
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<tr>
<td><strong>Subjects</strong></td>
<td>IV</td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/10/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PATIL RESHMA SADASHIV
Seat Number : 517
Name of the Institution : SHRI DATTA SCHOOL OF NURSING, SHIRALA, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Sangli
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/05/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SATPUTE KAJAL DNYANDEV
Seat Number : 519
Name of the Institution : SHRI DATTA SCHOOL OF NURSING, SHIRALA, SANGLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, SANGLI
Subjects : III IV
Signature of the Holder : 

Note:  
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 519

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PHARANDE SHRADDHA KISAN
Seat Number : 520
Name of the Institution : RAJMATI NURSING SCHOOL, SATARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, SANGLI
Subjects : I II IV
Signature of the Holder : 

Note:  
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 520
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 04/08/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KUCHEKAR VAISHNAVI VILAS

Seat Number : 521

Name of the Institution : Smt. Padmini Institute of Nursing Paramedical Sciences, Atpadi, Sangli

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Sangli

Subjects : IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 16/07/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DHONE POURNIMA RAM

Seat Number : 522

Name of the Institution : DHANRAJGIRIJI HOSPITAL, SOLAPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Solapur

Subjects : IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : SMT MAKANDAR HANEEFA AMEEN
Nee(TINWALE HANIFA AMINASAB)
Seat Number : 523
Name of the Institution : DHANRAJGIRIJI HOSPITAL, SOLAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Solapur
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 523

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/07/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MANE JYOTI SHIVAJI
Seat Number : 524
Name of the Institution : DHANRAJGIRIJI HOSPITAL, SOLAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Solapur
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 524
**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
10/03/1986

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS NAIKWADE SAMINA IQBAL

**Seat Number**
525

**Name of the Institution**
RAJMATA JIJAU NURSING SCHOOL, PANDHARPUR

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Solapur

**Subjects**
<table>
<thead>
<tr>
<th>I</th>
<th>II</th>
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**Signature of the Holder**

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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
15/01/1999

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS PALAGHAMOL VISHAKHA KAILASH

**Seat Number**
526

**Name of the Institution**
RAJMATA JIJAU NURSING SCHOOL, PANDHARPUR

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Solapur

**Subjects**
<table>
<thead>
<tr>
<th>I</th>
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**Signature of the Holder**

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WANKHADE KALYANI RAJENDRA
Seat Number : 527
Name of the Institution : RAJMATA JIJAU NURSING SCHOOL, PANDHARPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Solapur
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 527

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/02/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD PALLAVI KISAN
Seat Number : 528
Name of the Institution : DHANVANTERI SCHOOL OF NURSING, MALSHIRAS, SOLAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Solapur
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. 528
For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 05/06/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KAMDI ROSHANI LADKU
Seat Number: 529
Name of the Institution: DHANVANTERI SCHOOL OF NURSING, MALSHIRAS, SOLAPUR
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Solapur
Subjects: III
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 24/03/1987
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS BHALERAO AMBIKA PANDURANG
Seat Number: 530
Name of the Institution: DHANSHRI INSTITUTE OF NURSING, MADHA, SOLAPUR
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Solapur
Subjects: I III
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/04/1985

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS CHALWADI SHRIDEVI HANAMANTU

Seat Number : 531

Name of the Institution : DHANSHRI INSTITUTE OF NURSING, MADHA, SOLAPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Solapur

Subjects : I IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 14/05/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS FULARI RADHA BABA

Seat Number : 532

Name of the Institution : DHANSHRI INSTITUTE OF NURSING, MADHA, SOLAPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Solapur

Subjects : I III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD SONALI VILAS
Seat Number : 533
Name of the Institution : DHANSHRI INSTITUTE OF NURSING, MADHA, SOLAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Solapur
Subjects : I, III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No.  535

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE DIPALI MARUTI
Seat Number : 535
Name of the Institution : DHANSHRI INSTITUTE OF NURSING, MADHA, SOLAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Solapur
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No.  536

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/07/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE ANITA SIDDHARAM
Seat Number : 536
Name of the Institution : DHANSHRI INSTITUTE OF NURSING, MADHA, SOLAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Solapur
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/04/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MASKE NIKITA BHIMA
Seat Number : 537
Name of the Institution : DHANSHRI INSTITUTE OF NURSING, MADHA, SOLAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Solapur
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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SR. NO. 537

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BANSODE PRATIBHA BABU
Seat Number : 538
Name of the Institution : SMT. KAMALBEN PATEL INSTITUTE OF NURSING, KUMBHARI, SOLAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Solapur
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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SR. NO. 538
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 26/11/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS HABU SAVITRI BALU

Seat Number : 539
Name of the Institution : SMT. KAMALBEN PATEL INSTITUTE OF NURISNG, KUMBHARI, SOLAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Solapur

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 539

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 06/05/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE RUTUJA SANJAY

Seat Number : 540
Name of the Institution : SMT. KAMALBEN PATEL INSTITUTE OF NURISNG, KUMBHARI, SOLAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Solapur

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 540
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 06/09/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS RANDIVE PRATIKSHA ARUN

Seat Number : 541

Name of the Institution : SMT. KAMALBEN PATEL INSTITUTE OF NURISNG, KUMBHARI, SOLAPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Solapur

Subjects : I II

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 06/09/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SHINDE TANAYA SUHAS

Seat Number : 542

Name of the Institution : SMT. KAMALBEN PATEL INSTITUTE OF NURISNG, KUMBHARI, SOLAPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Solapur

Subjects : II

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.

2) Practical Examination centre shall be as directed by the MSBNPE.

3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Maharshtra State Board of Nursing and Paramedical Education

**Hall Ticket**

**For the**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date of Birth**
- 10/08/2001

**Date of Exam**
- 14/01/2020 to 17/01/2020

**Name of the Candidate**
- MISS YUVARAJ VIDHYA SONAGIWALE

**Seat Number**
- 543

**Name of the Institution**
- SMT. KAMALBEN PATEL INSTITUTE OF NURSING, KUMBHARI, SOLAPUR

**Name of the Examination**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
- GENERAL HOSPITAL, Solapur

**Signature of the Holder**

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**Note:**
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**Hall Ticket**

**For the**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date of Birth**
- 19/11/1993

**Date of Exam**
- 14/01/2020 to 17/01/2020

**Name of the Candidate**
- MISS BHOSALE AMRUTA NARAYAN

**Seat Number**
- 544

**Name of the Institution**
- Maharashtra Arogya Mandal's Institute of Nursing Education, Malwadi, Hadapsar, Pune

**Name of the Examination**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
- DR. D.Y. PATIL INST OF NURSING EDU., PIMPRI PUNE

**Subjects**
- I II III IV V VI

**Signature of the Holder**

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**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KARDE JAYSHRI MANOHAR
Seat Number : 545
Name of the Institution : MEERA NURSING SCHOOL, SASWAD, PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE
Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 22/01/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS PAWARA JYOTI CHAMPALAL

Seat Number: 547

Name of the Institution: MEERA NURSING SCHOOL, SASWAD, PUNE

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE

Subjects: III

Signature of the Holder:

---

**Note:**

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 26/04/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS PAWARA PUJA DEVIDAS
Seat Number: 549
Name of the Institution: MEERA NURSING SCHOOL, SASWAD, PUNE
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: DR. D.Y. PATIL INST OF NURSING EDU., PIMPRI, PUNE
Subjects: III
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 26/01/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SURYAWANSHI RUPALI DIPAK
Seat Number: 550
Name of the Institution: MEERA NURSING SCHOOL, SASWAD, PUNE
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: DR. D.Y. PATIL INST OF NURSING EDU., PIMPRI, PUNE
Subjects: I, II, III
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
17/11/1997

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS SHINGE AMRAPALI KAMALAKAR

Seat Number:
551

Name of the Institution:
DWARIKA SANGAMNER INSTITUTE OF NURSING EDUCATION, PUNE

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE

Subjects:
I, III

Signature of the Holder:

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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Sr. No. 552

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
13/07/2000

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS SONAWANE SAMIKHSA DINKAR

Seat Number:
552

Name of the Institution:
DWARIKA SANGAMNER INSTITUTE OF NURSING EDUCATION, PUNE

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE

Subjects:
III, IV

Signature of the Holder:

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/03/1994
Date Of Exam : 14/01/2020 to 17/01/2020
Name of the Candidate : MISS KALE SARITA MANGESH

Seat Number : 553
Name of the Institution : C Y DANGAT PATIL SHIKSAN AND KRIDA MANDAL, SCHOOL OF NURSING, PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE

Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/06/1999
Date Of Exam : 14/01/2020 to 17/01/2020
Name of the Candidate : MISS NAKTE ANKITA ASHOK

Seat Number : 554
Name of the Institution : C Y DANGAT PATIL SHIKSAN AND KRIDA MANDAL, SCHOOL OF NURSING, PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE

Subjects : II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 05/09/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PAWARA PRITI NATVAR

Seat Number : 555

Name of the Institution : C Y DANGAT PATIL SHIKSHAN AND KRIDA MANDAL, SCHOOL OF NURSING , PUNE

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI ,PUNE

Subjects : II III IV

Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Date Of Birth : 28/06/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS TAMBE YOJANA POPAT

Seat Number : 556

Name of the Institution : C Y DANGAT PATIL SHIKSHAN AND KRIDA MANDAL, SCHOOL OF NURSING , PUNE

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI ,PUNE

Subjects : I II III V VI IV

Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 21/02/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SHELAR NIKITA SANJAY

Seat Number : 557

Name of the Institution : GIRIRAJ SCHOOL OF NURSING, BARAMATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE

Subjects : II

Signature of the Holder :

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
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Sr. No. 557

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 18/02/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS TORANE MAYURI APPASO

Seat Number : 558

Name of the Institution : GIRIRAJ SCHOOL OF NURSING, BARAMATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE

Subjects : II

Signature of the Holder :

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/11/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KOKANE POOJA SOMNATH
Seat Number : 559
Name of the Institution : PUKHRAJ NAGRAJ RANKA SCHOOL OF NURSING, PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE
Subjects : I
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/11/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JOSHI SHUBHANGI VITTHAL
Seat Number : 560
Name of the Institution : TEJASWINI NURSING SCHOOL, JUNNAR, PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE
Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION
HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 23/12/1991
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KIRANGE VANDANA SUKU
Seat Number : 561
Name of the Institution : SHARDABAI PAWAR INSTITUTE OF NURSING, PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI , PUNE
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No.  561

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION
HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 26/06/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS INGLE PRACHI MAHENDRA
Seat Number : 562
Name of the Institution : JAY INSTITUTE OF NURSING , INDAPUR , PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI , PUNE
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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Sr. No.  562
<table>
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<th>Sr. No.</th>
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<td>For the</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<td>Date Of Birth</td>
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<tr>
<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td>Name of the Candidate</td>
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<td>Name of the Institution</td>
<td>JAY INSTITUTE OF NURSING, INDAPUR, PUNE</td>
</tr>
<tr>
<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td>Name of the Exam. Centre</td>
<td>DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE</td>
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<tr>
<td>Subjects</td>
<td>I II III IV</td>
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<td>Signature of the Holder</td>
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</tbody>
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<th>Sr. No.</th>
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<td>For the</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<tr>
<td>Date Of Birth</td>
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<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td>Name of the Candidate</td>
<td>MISS TELGOTE VISHAKHA SANJAY</td>
</tr>
<tr>
<td>Seat Number</td>
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<tr>
<td>Name of the Institution</td>
<td>JAY INSTITUTE OF NURSING, INDAPUR, PUNE</td>
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<tr>
<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td>Name of the Exam. Centre</td>
<td>DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE</td>
</tr>
<tr>
<td>Subjects</td>
<td>I II III IV</td>
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<tr>
<td>Signature of the Holder</td>
<td></td>
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</tbody>
</table>

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/06/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS THORAT INDRAYANI KAILAS
Seat Number : 565
Name of the Institution : JAY INSTITUTE OF NURSING, INDAPUR, PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 565

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/07/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TOTE SWATI MANGAL
Seat Number : 566
Name of the Institution : JAY INSTITUTE OF NURSING, INDAPUR, PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAJKWAD BHAGYASHREE BALAJI
Seat Number : 567
Name of the Institution : JANAKI INSTITUTE OF NURSING EDUCATION, PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI
Subjects : I, III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/05/1989
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RASAL RUPALI CHANDRAKANT
Seat Number : 568
Name of the Institution : JANAKI INSTITUTE OF NURSING EDUCATION, PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI
Subjects : I, II, III, V, VI, IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
12/06/2000

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS SAMOLIN SUPRIYA SWAMI

Seat Number
569

Name of the Institution
JANAKI INSTITUTE OF NURSING EDUCATION, PUNE

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE

Subjects
III

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

RAHUSHRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
20/10/1997

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS BHANDARI SAVITRI ARJUN

Seat Number
570

Name of the Institution
Sushrusha Nursing School, Ap Daund, Pune

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE

Subjects
I II III IV

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHAVAN JUI DADABHAU

Seat Number : 571

Name of the Institution : TILAK MAHARASHTRA VIDYAPEETH INSTITUTE OF NURSING EDUCATION RESEARCH, PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI PUNE
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 571

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GOWARI MARIA MADHU

Seat Number : 572

Name of the Institution : TILAK MAHARASHTRA VIDYAPEETH INSTITUTE OF NURSING EDUCATION RESEARCH, PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI PUNE
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 572
<table>
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<th>Sr. No.</th>
<th>573</th>
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<tbody>
<tr>
<td><strong>MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION</strong></td>
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<tr>
<td><strong>HALL TICKET</strong></td>
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<tr>
<td><strong>For the</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<tr>
<td><strong>Date Of Birth</strong></td>
<td>23/12/1999</td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
</tr>
<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS NISAL PRITI DILIP</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
<td>573</td>
</tr>
<tr>
<td><strong>Name of the Institution</strong></td>
<td>TILAK MAHARASHTRA VIDYAPEETH INSTITUTE OF NURSING EDUCATION RESEARCH, PUNE</td>
</tr>
<tr>
<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
</tr>
<tr>
<td><strong>Name of the Exam. Centre</strong></td>
<td>DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI PUNE</td>
</tr>
<tr>
<td><strong>Subjects</strong></td>
<td>I II III</td>
</tr>
<tr>
<td><strong>Signature of the Holder</strong></td>
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</tr>
<tr>
<td><strong>REGISTRAR</strong></td>
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</tbody>
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**Note:**
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<thead>
<tr>
<th>Sr. No.</th>
<th>574</th>
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<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
</tr>
<tr>
<td><strong>Date Of Birth</strong></td>
<td>10/06/1998</td>
</tr>
<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
</tr>
<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS NHAVADE LAXMI ROHIDAS</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
<td>574</td>
</tr>
<tr>
<td><strong>Name of the Institution</strong></td>
<td>LATE UDHAVRAO TULSHIRAM JADHAVAR FOUNDATIONS INSTITUTE OF NURSING, PUNE</td>
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<tr>
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<td>DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI PUNE</td>
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<td><strong>Subjects</strong></td>
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<td><strong>Signature of the Holder</strong></td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NIKUM POOJA SUDAM
Seat Number : 575
Name of the Institution : LATE UDHAVRAO TULSHIRAM JADHAVAR FOUNDATIONS INSTITUTE OF NURSING, PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE
Subjects : III
Signature of the Holder :

Note:
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Sr. No. 575

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PATALE POOJA DEVIDAS
Seat Number : 576
Name of the Institution : LATE UDHAVRAO TULSHIRAM JADHAVAR FOUNDATIONS INSTITUTE OF NURSING, PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE
Subjects : III
Signature of the Holder :

Note:
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Sr. No. 576
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

13/01/2020

For the

: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth

: 01/03/2000

Date Of Exam

: 14/01/2020 To 17/01/2020

Name of the Candidate

: MISS PAWAR SUPRIYA JAGAN

Seat Number

: 577

Name of the Institution

: LATE UDHAVRAO TULSHIRAM JADHAVAR FOUNDATIONS INSTITUTE OF NURSING, PUNE

Name of the Examination

: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre

: DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE

Subjects

: III

Signature of the Holder


**Note:**
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

13/01/2020

For the

: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth

: 07/03/2000

Date Of Exam

: 14/01/2020 To 17/01/2020

Name of the Candidate

: MISS PAWARA HINABAI INDRASING

Seat Number

: 578

Name of the Institution

: LATE UDHAVRAO TULSHIRAM JADHAVAR FOUNDATIONS INSTITUTE OF NURSING, PUNE

Name of the Examination

: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre

: DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE

Subjects

: III

Signature of the Holder


**Note:**
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For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 22/08/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS PAWARA RUPALI RAMA
Seat Number: 579
Name of the Institution: LATE UDHAOIRA TULSHIRAM JADHAVAR FOUNDATIONS INSTITUTE OF NURSING, PUNE
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI, PUNE
Subjects: II
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 03/02/1997
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SULE NISHA UTTAM
Seat Number: 580
Name of the Institution: LATE UDHAOIRA TULSHIRAM JADHAVAR FOUNDATIONS INSTITUTE OF NURSING, PUNE
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI, PUNE
Subjects: II
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/07/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHENDE BHAGYASHRI BABAN
Seat Number : 581
Name of the Institution : YASH INSTITUTE OF NURSING PARAMEDICAL SCIENCES, INDAPUR, PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE
Subjects : I II IV
Signature of the Holder : HANDSIGNED
REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
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SR. NO. 581

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAWANT KIRTI SUDHIR
Seat Number : 582
Name of the Institution : YASH INSTITUTE OF NURSING PARAMEDICAL SCIENCES, INDAPUR, PUNE
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU, PIMPRI, PUNE
Subjects : III
Signature of the Holder : HANDSIGNED
REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 16/09/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHINDE NITA SHIVAJI

Seat Number : 583
Name of the Institution : Dhareshwar Institute of Nursing, Pune
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI ,PUNE
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 04/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ADE RHUTUJA NARAYAN

Seat Number : 584
Name of the Institution : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 22/05/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS BHANDEKAR KOMAL VILASH

Seat Number: 585

Name of the Institution: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects: 1 II

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 13/04/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS DEOPARE KAJAL SUBHASH

Seat Number: 586

Name of the Institution: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects: 1

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/03/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE SHWETA VINODRAO
Seat Number : 587
Name of the Institution : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 01/01/2001
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS MHAISKAR ACHAL VINOD
Seat Number: 589
Name of the Institution: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects: I II III V VI IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 589

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 28/10/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS PETKAR SHITAL DNYANESHWAR
Seat Number: 590
Name of the Institution: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects: I II
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RANGARI PAPIHA BHAGWAN
Seat Number : 591
Name of the Institution : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 591

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BOKADE ACHAL BHAGWANJI
Seat Number : 592
Name of the Institution : JANATA NURSING SCHOOL, HINGANGHAT, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 592
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 26/03/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GHODE PRAJAKTA SHESHRAO

Seat Number : 593

Name of the Institution : JANATA NURSING SCHOOL, HINGANGHAT, WARDHA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects : I III

Signature of the Holder : REGISTRAR MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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Sr. No. 593

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 21/10/1994

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GIRADKAR AARTI GANESH

Seat Number : 594

Name of the Institution : JANATA NURSING SCHOOL, HINGANGHAT, WARDHA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects : I II III IV

Signature of the Holder : REGISTRAR MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 594
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 19/03/1996

Date Of Exam: 14/01/2020 to 17/01/2020

Name of the Candidate: MISS MADAVI POOJA NARESHRAO

Seat Number: 595

Name of the Institution: JANATA NURSING SCHOOL, HINGANGHAT, WARDHA

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects: I II

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 22/04/1987

Date Of Exam: 14/01/2020 to 17/01/2020

Name of the Candidate: MISS RAMTEKE SARITA BHIKAJI

Seat Number: 596

Name of the Institution: JANATA NURSING SCHOOL, HINGANGHAT, WARDHA

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects: I

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/12/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SALAM SUSHAMA KAWADUJI
Seat Number : 597
Name of the Institution : JANATA NURSING SCHOOL, HINGANGHAT, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I IV
Signature of the Holder :

Note:
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2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 15/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHEIKH SIMRAN MEHBOOB
Seat Number : 598
Name of the Institution : JANATA NURSING SCHOOL, HINGANGHAT, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II
Signature of the Holder :

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 20/08/1999

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS GAJBHE SHITAL KAWADUJI

Seat Number
: 601

Name of the Institution
: SHALOM SCHOOL OF NURSING, WARDHA

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects
: I II III IV

Signature of the Holder

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No.: 601

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 11/02/2000

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS GUDHE ARTI SIDDHARTH

Seat Number
: 602

Name of the Institution
: SHALOM SCHOOL OF NURSING, WARDHA

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects
: III

Signature of the Holder

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No.: 602
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHADSE KAIAL PRAKASH
Seat Number : 603
Name of the Institution : SHALOM SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.
Subjects : II  III  IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/05/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LOKHANDE MANISHA RAJENDRA
Seat Number : 604
Name of the Institution : SHALOM SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.
Subjects : II  III  IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILIARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
29/11/2000

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS MALIK TRISHALA BABBU

Seat Number
605

Name of the Institution
SHALOM SCHOOL OF NURSING, WARDHA

Name of the Examination
AUXILIARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 605

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILIARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
25/06/1996

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS MASRAM DIPALI WARLUJI

Seat Number
606

Name of the Institution
SHALOM SCHOOL OF NURSING, WARDHA

Name of the Examination
AUXILIARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 606
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RANGARI KANCHAN BASRAJ
Seat Number : 607
Name of the Institution : SHALOM SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 607

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/07/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SALODKAR PRAGATI PRABHAKAR
Seat Number : 608
Name of the Institution : SHALOM SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### HALL TICKET

**13/01/2020**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
09/02/2000

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS SHRIRAME SUSHMA SHANTARAM

**Seat Number**
609

**Name of the Institution**
SHALOM SCHOOL OF NURSING, WARDHA

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

#### Subjects
- I

**Signature of the Holder**

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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### HALL TICKET

**13/01/2020**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
22/05/2000

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS SUTE KAJAL DHANRAJ

**Seat Number**
610

**Name of the Institution**
SHALOM SCHOOL OF NURSING, WARDHA

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

#### Subjects
- II

**Signature of the Holder**

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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/09/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TELANG SHWETA VIJAY
Seat Number : 611
Name of the Institution : SHALOM SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/08/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS URKUDE SHITAL DAMDUJI
Seat Number : 612
Name of the Institution : SHALOM SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHMARE PAYAL BHANUDAS
Seat Number : 613
Name of the Institution : SHALOM SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/09/1991
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MURAR NAINA TARACHAND
Seat Number : 614
Name of the Institution : EKVIRA DEVI EDUCATION SOCIETY, SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT KARISHMA SUBHASH
Seat Number : 615
Name of the Institution : EKVIRA DEVI EDUCATION SOCIETY, SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 615

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/02/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS UIKE SWATI KAILASH
Seat Number : 616
Name of the Institution : EKVIRA DEVI EDUCATION SOCIETY, SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 616
## MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

### HALL TICKET

**Sr. No.** 617  
**Date Of Exam:** 13/01/2020

| **For the:** | AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020 |
| **Date Of Birth:** | 10/05/1999 |
| **Date Of Exam:** | 14/01/2020 To 17/01/2020 |
| **Name of the Candidate:** | MISS WANKHEDE NEHA PRAKASH |
| **Seat Number:** | 617 |
| **Name of the Institution:** | EKVIRA DEVI EDUCATION SOCIETY, SCHOOL OF NURSING, WARDHA |
| **Name of the Examination:** | AUXILLARY NURSE MIDWIFERY FIRST YEAR |
| **Name of the Exam. Centre:** | FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA. |
| **Subjects:** | I IV |

**Note:**  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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## MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

### HALL TICKET

**Sr. No.** 618  
**Date Of Exam:** 13/01/2020

| **For the:** | AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020 |
| **Date Of Birth:** | 28/08/2000 |
| **Date Of Exam:** | 14/01/2020 To 17/01/2020 |
| **Name of the Candidate:** | MISS GOURKHEDE SUSHMITA DEEPAK |
| ** Seat Number:** | 618 |
| **Name of the Institution:** | SARASWATI NURSING SCHOOL GUNJKHEDA WARDHA |
| **Name of the Examination:** | AUXILLARY NURSE MIDWIFERY FIRST YEAR |
| **Name of the Exam. Centre:** | FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA. |
| **Subjects:** | II III |

**Note:**  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 21/11/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KAMBLE SAYALI ARUNRAO

Seat Number : 619

Name of the Institution : SARASWATI NURSING SCHOOL GUNJKHEDA WARDHA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects : II III IV

Signature of the Holder :

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket. 
2) Practical Examination centre shall be as directed by the MSBNPE 
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 619

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 03/01/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KHOBRAGADE ARTI KONDESHWARAO

Seat Number : 620

Name of the Institution : SARASWATI NURSING SCHOOL GUNJKHEDA WARDHA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects : II

Signature of the Holder :

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket. 
2) Practical Examination centre shall be as directed by the MSBNPE 
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 620
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAMTEKE POOJA PRABHAKAR
Seat Number : 621
Name of the Institution : SARASWATI NURSING SCHOOL GUNJKHEDA WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II III IV
Signature of the Holder :

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 621

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/06/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TEMBHARE MANJU PRAKASH
Seat Number : 622
Name of the Institution : SARASWATI NURSING SCHOOL GUNJKHEDA WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II III IV
Signature of the Holder :

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 622
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/11/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHURVE AARTI SUKHADEORAO
Seat Number : 623
Name of the Institution : PARVATIBAI SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I, IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/08/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GODGAM ARATI MOHANRAO
Seat Number : 624
Name of the Institution : PARVATIBAI SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I, IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 11/05/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS GONDANE SAVITA HIRALAL

Seat Number: 625

Name of the Institution: PARVATIBAI SCHOOL OF NURSING, WARDHA

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects: I II IV

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 625

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 09/10/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS KOLHE DAMINI ASHOK

Seat Number: 626

Name of the Institution: PARVATIBAI SCHOOL OF NURSING, WARDHA

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects: II III IV

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 626
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

Sr. No. 627

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS UMATI KALYANI HANUMANT
Seat Number : 627
Name of the Institution : PARVATIBAI SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 628

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE MAHIMA DEVIDASRAO
Seat Number : 628
Name of the Institution : NEW MAHARASHTRA INSTITUTE OF NURSING, MAHADEVPURA, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
## MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

### HALL TICKET

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>629</th>
</tr>
</thead>
</table>

**For the** : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Name of the Candidate** : MISS MARAPE SHWETA MORESHWARRAO

**Name of the Institution** : NEW MAHARASHTRA INSTITUTE OF NURSING, MAHADEVPURA, WARDHA

**Name of the Exam. Centre** : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

**Date Of Birth** : 22/05/1999

**Date Of Exam** : 14/01/2020 To 17/01/2020

**Seat Number** : 629

**Date Of Exam** : 13/01/2020

**Signature of the Holder** :

**Note:**

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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## MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

### HALL TICKET

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>630</th>
</tr>
</thead>
</table>

**For the** : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Name of the Candidate** : MISS KAMBLE PRATIKSHA MAROTI

**Name of the Institution** : Sunita Nursing School, Tal Shelu, Wardha

**Name of the Exam. Centre** : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

**Date Of Birth** : 20/09/1994

**Date Of Exam** : 14/01/2020 To 17/01/2020

**Seat Number** : 630

**Date Of Exam** : 13/01/2020

**Signature of the Holder** :

**Note:**

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/04/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE PUNAM SAKHARAM
Seat Number : 631
Name of the Institution : Sunita Nursing School, Tal Shelu, Wardha
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.
Subjects : I III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 631

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MARASKOLHE KANCHAN DNYANESHWAR
Seat Number : 632
Name of the Institution : Sunita Nursing School, Tal Shelu, Wardha
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 632
For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 11/05/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS MASRAM NAMRATA MEGHARAJ

Seat Number: 633

Name of the Institution: Sunita Nursing School, Tal Shelu, Wardha

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects: I II III IV

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 13/12/1996

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS MASRAM ARATI PRABHAKAR

Seat Number: 634

Name of the Institution: Sunita Nursing School, Tal Shelu, Wardha

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects: III IV

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/12/1991
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SALODKAR SNEHAL ANIL
Seat Number : 635
Name of the Institution : Sunita Nursing School, Tal Shelu, Wardha
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 635

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/06/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WALKONDAWAR SARIKA LAXMAN
Seat Number : 636
Name of the Institution : Sunita Nursing School, Tal Shelu, Wardha
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 636
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 637

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/10/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WARTHI PRAGATI SUBHASH
Seat Number : 637
Name of the Institution : Sunita Nursing School, Tal Shelu, Wardha
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 638

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/01/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ALONE RUPALI CHANDRASHEKHAR
Seat Number : 638
Name of the Institution : CHETNA NURSING INSTITUTE, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 19/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHAVHAN RANEE JAGDISHRAO
Seat Number : 639
Name of the Institution : CHETNA NURSING INSTITUTE, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 639

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 30/09/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MARSKOLHE PUJA RAMUJI
Seat Number : 640
Name of the Institution : CHETNA NURSING INSTITUTE, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
# Hall Ticket Details

**For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:** 13/04/2000

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** MISS MASRAM VAISHNAVI SANJAY

**Seat Number:** 641

**Name of the Institution:** CHETNA NURSING INSTITUTE, WARDHA

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

**Subjects:** IV

**Signature of the Holder:**

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**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:** 11/04/1999

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** MISS PARTETI SHITAL DATTU

**Seat Number:** 642

**Name of the Institution:** CHETNA NURSING INSTITUTE, WARDHA

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

**Subjects:** I III IV

**Signature of the Holder:**

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**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 10/10/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS TODASAM PRANJALI SUBHASH
Seat Number: 643
Name of the Institution: CHETNA NURSING INSTITUTE, WARDHA
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects: II III
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 24/12/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS WARKHADE ANUSAYA MANIKRAO
Seat Number: 644
Name of the Institution: CHETNA NURSING INSTITUTE, WARDHA
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects: II IV
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 29/04/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DHURVE DARSHANA DIWAKAR

Seat Number : 646

Name of the Institution : NANDATAI LOHAVE SCHOOL OF NURSING, WARDHA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects : I II III V VI IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 24/06/1996

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BAMBULKAR MAYURI NANDKISHOR

Seat Number : 645

Name of the Institution : NANDATAI LOHAVE SCHOOL OF NURSING, WARDHA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects : III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 13/10/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DUPARE RUTUJA PRAKASH

Seat Number : 647

Name of the Institution : NANDATAI LOHAVE SCHOOL OF NURSING, WARDHA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 647

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 04/07/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GADLING POOJA BHASKAR

Seat Number : 648

Name of the Institution : NANDATAI LOHAVE SCHOOL OF NURSING, WARDHA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 648
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 13/03/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GOSAVI POONAM DILIP

Seat Number : 649

Name of the Institution : NANDATAI LOHAVE SCHOOL OF NURSING, WARDHA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.

Subjects : II  III

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 650

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 21/07/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS INGALE MAYURI MORESHWAR

Seat Number : 650

Name of the Institution : NANDATAI LOHAVE SCHOOL OF NURSING, WARDHA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.

Subjects : III  IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KANGALE JAYA JAYRAMJI
Seat Number : 651
Name of the Institution : NANDATAI LOHAVE SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 651

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHADATKAR SHAMAL RAJESH
Seat Number : 652
Name of the Institution : NANDATAI LOHAVE SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 652
### Hall Ticket

<table>
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<th>Sr. No.</th>
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<tr>
<td><strong>For the</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<tr>
<td><strong>Date Of Birth</strong></td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS KHANDATE NIHITA SHAMRAO</td>
<td>MISS KIRNAKE PRAVINA SUBHASHRAO</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
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<td><strong>Name of the Institution</strong></td>
<td>NANDATAI LOHAVE SCHOOL OF NURSING, WARDHA</td>
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<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<td><strong>Name of the Exam. Centre</strong></td>
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<td>FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.</td>
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<td><strong>Subjects</strong></td>
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<td><strong>Signature of the Holder</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KODAPE KIRAN SUKHDEVRAO
Seat Number : 655
Name of the Institution : NANDATAI LOHAVE SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I, II, III
Signature of the Holder : 
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SADMAKE ARTI ASHOKRAO
Seat Number : 656
Name of the Institution : NANDATAI LOHAVE SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : II
Signature of the Holder : 
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 06/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SIRSAM SONAL VILAS
Seat Number : 657
Name of the Institution : NANDATAI LOHAVE SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 657

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 26/05/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TODASE NIKITA RUPRAO
Seat Number : 658
Name of the Institution : NANDATAI LOHAVE SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 658
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 659

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WARGHANE BHUNESHWARI DARSHAN
Seat Number : 659
Name of the Institution : NANDATAI LOHAVE SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 660

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/05/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WARKHADE DIPALI ARUNRAO
Seat Number : 660
Name of the Institution : NANDATAI LOHAVE SCHOOL OF NURSING, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/09/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BAGADE SHRADDHA VIJAYRAO
Seat Number : 661
Name of the Institution : KINKAR SCHOOL OF NURSING, SELOO, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/01/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NEHARE DIPALI VITTHAL
Seat Number : 662
Name of the Institution : KINKAR SCHOOL OF NURSING, SELOO, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/03/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PATIL DIKSHA BABARAO
Seat Number : 663
Name of the Institution : KINKAR SCHOOL OF NURSING, SELOO, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 663

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/03/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PATIL KAJAL BABARAO
Seat Number : 664
Name of the Institution : KINKAR SCHOOL OF NURSING, SELOO, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 664
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RATHOD POOJA DEWANLAL
Seat Number : 665
Name of the Institution : KINKAR SCHOOL OF NURSING, SELOO, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAPATE ANJALI ASHOKRAO
Seat Number : 666
Name of the Institution : KINKAR SCHOOL OF NURSING, SELOO, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SINPURE VAISHNAVI RAMESH
Seat Number : 667
Name of the Institution : KINKAR SCHOOL OF NURSING, SELOO, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS HIRAVE VANDANA BHAGIRATH
Seat Number : 668
Name of the Institution : SATAO NURSING TRAINING SCHOOL, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MADAVI POOJA NAMDEV
Seat Number : 669
Name of the Institution : SATAO NURSING TRAINING SCHOOL, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 669

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MAGAR DIKSHA RASHTRAPAL
Seat Number : 670
Name of the Institution : SATAO NURSING TRAINING SCHOOL, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 670
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 06/07/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MASRAM MADHURI BALKRISHNA

Seat Number : 671

Name of the Institution : SATAO NURSING TRAINING SCHOOL, WARDHA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects : III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 31/07/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PANDHARAM SWATI SHANKAR

Seat Number : 672

Name of the Institution : SATAO NURSING TRAINING SCHOOL, WARDHA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects : II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHELKE ACHAL MAHADEO
Seat Number : 673
Name of the Institution : SATAO NURSING TRAINING SCHOOL, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/10/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WADE SONALI PADMAKAR
Seat Number : 674
Name of the Institution : SATAO NURSING TRAINING SCHOOL, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/01/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHAMARE CHAMELI PARMESHWAR
Seat Number : 675
Name of the Institution : SATAO NURSING TRAINING SCHOOL, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/11/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BETAL ACHAL DHARMPAL
Seat Number : 676
Name of the Institution : Dimond Nursing Institute, Deoli, Wardha
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/09/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAWALE ASHWARYA VITTHALRAO
Seat Number : 677
Name of the Institution : Dimond Nursing Institute, Deoli, Wardha
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 677

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/06/1989
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TIRALE ARTI BHAGWAN
Seat Number : 678
Name of the Institution : Dimond Nursing Institute, Deoli, Wardha
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 678
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 681

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/12/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHIKTE PRATIKSHA HARIBHAU
Seat Number : 681
Name of the Institution : MAHATMA GANDHI NURSING INSTITUTE, DEOLI, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 682

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DONGARE ANJALI RAMESH
Seat Number : 682
Name of the Institution : MAHATMA GANDHI NURSING INSTITUTE, DEOLI, WARDHA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects : I III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 27/06/1987

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAWKAD SNEHA SHARAD

Seat Number : 683

Name of the Institution : MAHATMA GANDHI NURSING INSTITUTE, DEOLI, WARDHA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 683

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 15/08/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KAMBLE ARATI KISHOR

Seat Number : 684

Name of the Institution : MAHATMA GANDHI NURSING INSTITUTE, DEOLI, WARDHA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 684
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 17/08/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MESHRAM PRIYA RATAN

Seat Number : 685

Name of the Institution : MAHATMA GANDHI NURSING INSTITUTE, DEOLI, WARDHA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects : III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 22/01/1993

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MESHRAM SHILPA ASHOK

Seat Number : 686

Name of the Institution : MAHATMA GANDHI NURSING INSTITUTE, DEOLI, WARDHA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects : III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 30/04/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS MESHRAM SUJATA PREMDAS
Seat Number: 687
Name of the Institution: MAHATMA GANDHI NURSING INSTITUTE, DEOLI, WARDHA
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects: III
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 16/12/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS PARTIKE RINA RAMCHANDRAJI
Seat Number: 688
Name of the Institution: MAHATMA GANDHI NURSING INSTITUTE, DEOLI, WARDHA
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.
Subjects: I III IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
06/10/1999

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS UIKEY PRITEE GANESH

Seat Number
689

Name of the Institution
MAHATMA GANDHI NURSING INSTITUTE, DEOLI, WARDHA

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING, WARDHA.

Subjects
I  II  III

Signature of the Holder

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 689

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
17/11/2000

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS BOMBARDE SUPRAVASA VIJAY

Seat Number
690

Name of the Institution
Shri Dattatraya Prabhu Bahu. Shikshan Sanstha, Tiroda, Gondia

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects
II  III  IV

Signature of the Holder

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 690
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>691</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of the Candidate</td>
<td>MISS DHAMGAYE RUPALI HETRAM</td>
</tr>
<tr>
<td>Seat Number</td>
<td>691</td>
</tr>
<tr>
<td>Name of the Institution</td>
<td>Shri Dattatraya Prabhu Bahu. Shikshan Sanstha, Tiroda, Gondia</td>
</tr>
<tr>
<td>Name of the Exam. Centre</td>
<td>DAGA MEMORIAL HOSPITAL, NAGPUR</td>
</tr>
<tr>
<td>Subjects</td>
<td>II IV</td>
</tr>
<tr>
<td>Signature of the Holder</td>
<td></td>
</tr>
</tbody>
</table>

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>692</th>
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</thead>
<tbody>
<tr>
<td>Name of the Candidate</td>
<td>MISS GANVIR PALLAVI RAJESH</td>
</tr>
<tr>
<td>Seat Number</td>
<td>692</td>
</tr>
<tr>
<td>Name of the Institution</td>
<td>Shri Dattatraya Prabhu Bahu. Shikshan Sanstha, Tiroda, Gondia</td>
</tr>
<tr>
<td>Name of the Exam. Centre</td>
<td>DAGA MEMORIAL HOSPITAL, NAGPUR</td>
</tr>
<tr>
<td>Subjects</td>
<td>II</td>
</tr>
<tr>
<td>Signature of the Holder</td>
<td></td>
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</tbody>
</table>

**Note:**
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2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 695

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PANDHARE ROSHANI RAJHANS
Seat Number : 695
Name of the Institution : Shri Dattatraya Prabhu Bahu. Shikshan Sanstha, Tiroda, Gondia
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 696

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RANGARI SONALI SIDHDARTH
Seat Number : 696
Name of the Institution : Shri Dattatraya Prabhu Bahu. Shikshan Sanstha, Tiroda, Gondia
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 09/12/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS RAUT ACHAL RAJKUMAR

Seat Number: 697

Name of the Institution: Shri Dattatraya Prabhu Bahu. Shikshan Sanstha, Tiroda, Gondia

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects: IV

Signature of the Holder:

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 697

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 13/11/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS UIKEY MATESHWARI CHUNNILAL

Seat Number: 698

Name of the Institution: Shri Dattatraya Prabhu Bahu. Shikshan Sanstha, Tiroda, Gondia

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects: IV

Signature of the Holder:

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 698
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 30/04/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHURVE MINAKSHI VIRENDRAKUMAR
Seat Number : 699
Name of the Institution : Gondia Nursing College, Gondia
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 699

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 30/05/1991
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHURVE MEENA KALIRAM
Seat Number : 700
Name of the Institution : Gondia Nursing College, Gondia
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 700
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
27/01/2001

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS FUNDE TRIVENI LOKCHAND

Seat Number
701

Name of the Institution
Gondia Nursing College, Gondia

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects
II IV

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth
28/03/1988

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
SMT PARDHI SUNITA BABULAL
Nee(RAHANGDALE MANJUBAI MANOJ)

Seat Number
702

Name of the Institution
Gondia Nursing College, Gondia

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects
I II III IV

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHAHARE SWATI CHUNNILAL
Seat Number : 703
Name of the Institution : Gondia Nursing College, Gondia
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 703

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TEMBHURNIKAR VIBHANGI YASHWANT
Seat Number : 704
Name of the Institution : Gondia Nursing College, Gondia
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 704
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/07/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BADOLE ROHINI RAMESHWAR

Seat Number : 705

Name of the Institution : S. CHANDRA SCHOOL OF NURSING, ARJUNI GONDIA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 705

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 07/04/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DHANBHATE LAJJITA RAGHUNATH

Seat Number : 706

Name of the Institution : S. CHANDRA SCHOOL OF NURSING, ARJUNI GONDIA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. 706
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/10/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT SAVITA TIRTHANAND
Seat Number : 707
Name of the Institution : S. CHANDRA SCHOOL OF NURSING, ARJUNI GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/02/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHAHARE SHITAL NARAYAN
Seat Number : 708
Name of the Institution : S. CHANDRA SCHOOL OF NURSING, ARJUNI GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS UIKEY PAYAL SANTARAM
Seat Number : 709
Name of the Institution : S. CHANDRA SCHOOL OF NURSING, ARJUNI GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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SR. No. 709

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHOYAR NIRMALA SHIVLAL
Seat Number : 710
Name of the Institution : S.R.V. NURSING SCHOOL, DAWAKI, TAL DEORI DIST GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

REGRISTRAR

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
10/11/1999

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS BOIR NEHA RAJNATH

Seat Number :
711

Name of the Institution :
S.R.V. NURSING SCHOOL, DAWAKI, TAL DEORI DIST GONDIA

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
DAGA MEMORIAL HOSPITAL, NAGPUR

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

REGRISTRAR

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
25/06/2000

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS CHAUDHARI SUSMITA VINAYAK

Seat Number :
712

Name of the Institution :
S.R.V. NURSING SCHOOL, DAWAKI, TAL DEORI DIST GONDIA

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
DAGA MEMORIAL HOSPITAL, NAGPUR

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JANGERE BHARTI BALIRAM
Seat Number : 713
Name of the Institution : S.R.V. NURSING SCHOOL, DAWAKI, TAL DEORI DIST GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II  III  IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 713

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KORONDE DNYANESHWARI SUNDRALAL
Seat Number : 714
Name of the Institution : S.R.V. NURSING SCHOOL, DAWAKI, TAL DEORI DIST GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II  III  IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 714
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 03/08/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KOTANGALE PRATIDNYA KARNU
Seat Number: 715
Name of the Institution: S.R.V. NURSING SCHOOL, DAWAKI, TAL DEORI DIST GONDIA
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects: III
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

---

Sr. No. 716

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 26/08/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KUMBHARE ROHINI MADANLAL
Seat Number: 716
Name of the Institution: S.R.V. NURSING SCHOOL, DAWAKI, TAL DEORI DIST GONDIA
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects: III
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
18/06/1996

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS KUNJAM KAVITA SHIVLAL

Seat Number :
717

Name of the Institution :
S.R.V. NURSING SCHOOL, DAWAKI, TAL DEORI DIST GONDIA

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects :
III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 717

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
31/10/1998

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS LAMKASE MAMTA MAROTI

Seat Number :
718

Name of the Institution :
S.R.V. NURSING SCHOOL, DAWAKI, TAL DEORI DIST GONDIA

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects :
III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 718
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 28/06/2000

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS MESHRAM NISHA SHIVSHANKAR

Seat Number
: 719

Name of the Institution
: S.R.V. NURSING SCHOOL, DAWAKI, TAL DEORI DIST GONDIA

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects
: II  III  IV

Signature of the Holder
:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 719

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 30/04/2000

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS CHAUDHARI SMITA KAILAS

Seat Number
: 720

Name of the Institution
: S.R.V. NURSING SCHOOL, DAWAKI, TAL DEORI DIST GONDIA

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects
: III

Signature of the Holder
:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 720
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/02/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHENDRE VASUNDHARA ASHOK
Seat Number : 721
Name of the Institution : S.R.V. NURSING SCHOOL, DAWAKI, TAL DEORI DIST GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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SR. No. 722

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/04/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS UIKEY ROHINI SURESH
Seat Number : 722
Name of the Institution : S.R.V. NURSING SCHOOL, DAWAKI, TAL DEORI DIST GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
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<tr>
<td><strong>Date Of Birth</strong></td>
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<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS WATTI LAXMI RAMESH</td>
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<tr>
<td><strong>Seat Number</strong></td>
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**Note:**
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# MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

## HALL TICKET

**For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:** 23/01/2000

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** MISS YELLE RUPALI KUWARLAL

**Seat Number:** 725

**Name of the Institution:** S.R.V. NURSING SCHOOL, DAWAKI, TAL DEORI DIST GONDIA

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** DAGA MEMORIAL HOSPITAL, NAGPUR

**Subjects:** II, III, IV

**Signature of the Holder:**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
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## MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

## HALL TICKET

**For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:** 24/04/2000

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** MISS JAMBHULKAR PRANALI MADHU

**Seat Number:** 726

**Name of the Institution:** KAMALATAI BUDHE NURSING SCHOOL, GONDIA

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** DAGA MEMORIAL HOSPITAL, NAGPUR

**Subjects:** I, II, III

**Signature of the Holder:**

---

**Note:**
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/09/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MARKAM MAMTA RAMRATAN
Seat Number : 727
Name of the Institution : KAMALATAI BUDHE NURSING SCHOOL, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 727

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PARTETI POOJA HARASRAM
Seat Number : 728
Name of the Institution : KAMALATAI BUDHE NURSING SCHOOL, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS UIKEY MANISHA RAMU
Seat Number : 729
Name of the Institution : KAMALATAI BUDHE NURSING SCHOOL, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 729

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BAWANE KAVITA DHANESH
Seat Number : 730
Name of the Institution : HEALTH CARE NURSING SCHOOL, AMGAON, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 730
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

**Sr. No.** 731

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
20/11/1991

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS BHALADHARE ASHWINI NIRAKAR

**Seat Number**
731

**Name of the Institution**
HEALTH CARE NURSING SCHOOL, AMGAON, GONDIA

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
DAGA MEMORIAL HOSPITAL, NAGPUR

**Subjects**
III IV

**Signature of the Holder**

---

**Note:**
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**Sr. No.** 732

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
23/11/1997

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS BHASARE USHA BABULAL

**Seat Number**
732

**Name of the Institution**
HEALTH CARE NURSING SCHOOL, AMGAON, GONDIA

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
DAGA MEMORIAL HOSPITAL, NAGPUR

**Subjects**
III

**Signature of the Holder**

---

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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/02/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHAMGAYE PRAGATI NARESH
Seat Number : 733
Name of the Institution : HEALTH CARE NURSING SCHOOL, AMGAON, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHOKE JAISHREE JAISHANKAR
Seat Number : 734
Name of the Institution : HEALTH CARE NURSING SCHOOL, AMGAON, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAWRANE DIPIKA SURESH
Seat Number : 735
Name of the Institution : HEALTH CARE NURSING SCHOOL, AMGAON, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket. 
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Sr. No. 735

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JAMBHULKAR PRATIKSHA BHARAT
Seat Number : 736
Name of the Institution : HEALTH CARE NURSING SCHOOL, AMGAON, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket. 
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<tr>
<td><strong>Date Of Birth</strong></td>
<td>25/05/1999</td>
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<tr>
<td><strong>Date Of Exam</strong></td>
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<td><strong>Name of the Candidate</strong></td>
<td>MISS KUNJAM SWATI MANOHAR</td>
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<td><strong>Seat Number</strong></td>
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<tr>
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<tr>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT KANCHAN MUKUNDRAJ
Seat Number : 739
Name of the Institution : HEALTH CARE NURSING SCHOOL, AMGAON, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II III IV
Signature of the Holder : 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHAHARE ARATI RAJESH
Seat Number : 740
Name of the Institution : HEALTH CARE NURSING SCHOOL, AMGAON, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II IV
Signature of the Holder : 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHENDE TARUNA VINOD
Seat Number : 741
Name of the Institution : HEALTH CARE NURSING SCHOOL, AMGAON, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAVA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 741

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/10/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHINGADE MONALI SURYAKANT
Seat Number : 742
Name of the Institution : HEALTH CARE NURSING SCHOOL, AMGAON, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAVA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BOMBARDE SHIVANI WASUDEO
Seat Number : 743
Name of the Institution : S. CHANDRA NURSING SCHOOL, AMGAON, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 743

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/03/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAJBHIYE ASHWINI ARUN
Seat Number : 744
Name of the Institution : S. CHANDRA NURSING SCHOOL, AMGAON, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 744
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 04/05/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS MESHRAM LATA VINOD

Seat Number: 745

Name of the Institution: S. CHANDRA NURSING SCHOOL, AMGAON, GONDIA

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects: I II III IV

Signature of the Holder:

---

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 02/10/1992

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS SALAM RITU PREMLAL

Seat Number: 746

Name of the Institution: S. CHANDRA NURSING SCHOOL, AMGAON, GONDIA

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects: I II III IV

Signature of the Holder:

---

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TARONE NAINA BABULAL
Seat Number : 747
Name of the Institution : S. CHANDRA NURSING SCHOOL, AMGAON, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 747

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WADHIVE PUNAM RAJARAM
Seat Number : 748
Name of the Institution : S. CHANDRA NURSING SCHOOL, AMGAON, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 748
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT DISHA ANANTRAM
Seat Number : 751
Name of the Institution : SMT. GUNAMALA JAIN CHARITABLE TRUSTS INSTITUTE OF NURSING EDUCATION, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 751

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SONWANE JAGRUTI PUSHPRAJ
Seat Number : 752
Name of the Institution : SMT. GUNAMALA JAIN CHARITABLE TRUSTS INSTITUTE OF NURSING EDUCATION, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 752
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TEMBHUNIKAR RAKSHA ARVIND
Seat Number : 753
Name of the Institution : SMT. GUNAMALA JAIN CHARITABLE TRUSTS INSTITUTE OF NURSING EDUCATION, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>755</th>
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</table>

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 19/09/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS THAKRE SHASHIKALA RAMUNATH

Seat Number : 755

Name of the Institution : SMT. GUNAMALA JAIN CHARITABLE TRUSTS INSTITUTE OF NURSING EDUCATION, GONDIA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects : I III

Signature of the Holder :

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>756</th>
</tr>
</thead>
</table>

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 09/02/1989

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS ALE SMITA JANARDHAN

Seat Number : 756

Name of the Institution : SMT. LAXMIBAI CHANDEKAR NURSING SCHOOL, GORGAN, GONDIA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects : II III IV

Signature of the Holder :

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
24/07/1994

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS BHOYAR MUKTABAI MADUKAR

Seat Number
757

Name of the Institution
SMT. LAXMIBAI CHANDEKAR NURSING SCHOOL, GORGAON, GONDIA

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects
Ill

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

SR. No. 757

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
30/10/1992

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS JUMNAKE YUGANTARI SAHEBRAO

Seat Number
758

Name of the Institution
SMT. LAXMIBAI CHANDEKAR NURSING SCHOOL, GORGAON, GONDIA

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects
II IV

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

SR. No. 758
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the** : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth** : 01/04/2000

**Date Of Exam** : 14/01/2020 To 17/01/2020

**Name of the Candidate** : MISS KANHAKE SWAPNA RAJU

**Seat Number** : 759

**Name of the Institution** : SMT. LAXMIBAI CHANDEKAR NURSING SCHOOL, GORGAON, GONDIA

**Name of the Examination** : AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre** : DAGA MEMORIAL HOSPITAL, NAGPUR

**Subjects** : II IV

**Signature of the Holder** :

---

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**For the** : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth** : 22/10/1993

**Date Of Exam** : 14/01/2020 To 17/01/2020

**Name of the Candidate** : MISS KATHEWAR SHARDA MANSARAM

**Seat Number** : 760

**Name of the Institution** : SMT. LAXMIBAI CHANDEKAR NURSING SCHOOL, GORGAON, GONDIA

**Name of the Examination** : AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre** : DAGA MEMORIAL HOSPITAL, NAGPUR

**Subjects** : II III IV

**Signature of the Holder** :

---

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 18/02/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS NAGDEV NIDHI PRABHA RUPALI HANSRAJ

Seat Number : 761

Name of the Institution : SMT. LAXMIBAI CHANDEKAR NURSING SCHOOL, GORGAON, GONDIA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects : I II III IV

Signature of the Holder : 

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 761

13/01/2020

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 07/11/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PATIL DIVYA BHIMRAO

Seat Number : 762

Name of the Institution : SMT. LAXMIBAI CHANDEKAR NURSING SCHOOL, GORGAON, GONDIA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects : IV

Signature of the Holder : 

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 762

13/01/2020
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 03/12/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS PRADHAN RAVINA RAMCHAND

Seat Number: 763

Name of the Institution: SMT. LAXMIBAI CHANDEKAR NURSING SCHOOL, GORGAON, GONDIA

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects: III

Signature of the Holder: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth: 23/01/1995

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS RAUT PRIYANKA HEMRAJ

Seat Number: 764

Name of the Institution: SMT. LAXMIBAI CHANDEKAR NURSING SCHOOL, GORGAON, GONDIA

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects: III IV

Signature of the Holder: 

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAKHARE TARUNA KHIMKUMAR
Seat Number : 765
Name of the Institution : SMT. LAXMIBAI CHANDEKAR NURSING SCHOOL, GORGAON, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/12/1989
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHAHARE JAGESHRI PRAKASH
Seat Number : 766
Name of the Institution : SMT. LAXMIBAI CHANDEKAR NURSING SCHOOL, GORGAON, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 16/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAJBHIYE MADHURA DEWANAND

Seat Number : 771
Name of the Institution : GONDIA CITY INSTITUTE OF NURSING & PARAMEDICAL SCIENCES, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 771

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 06/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAVAD SONALI GAJENDRA

Seat Number : 772
Name of the Institution : GONDIA CITY INSTITUTE OF NURSING & PARAMEDICAL SCIENCES, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KANOJE SHARDA RAJKUMAR
Seat Number : 773
Name of the Institution : GONDIA CITY INSTITUTE OF NURSING & PARAMEDICAL SCIENCES, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : 111
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 773

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KATEWAR AARTIBAI GIRAMLAL
Seat Number : 774
Name of the Institution : GONDIA CITY INSTITUTE OF NURSING & PARAMEDICAL SCIENCES, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : 111 IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 774
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LADE JYOTI LAXMAN
Seat Number : 775
Name of the Institution : GONDIA CITY INSTITUTE OF NURSING & PARAMEDICAL SCIENCES, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 22/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BANSOD TRUPTI SHANKAR
Seat Number : 777
Name of the Institution : S.M.Nursing School, Gondia
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 11/11/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BORKAR KHUSHBU SUNIL
Seat Number : 778
Name of the Institution : S.M.Nursing School, Gondia
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/02/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS HUMNE NILAM SANJAY
Seat Number : 779
Name of the Institution : S.M.Nursing School, Gondia
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 779

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JANBANDHU SNEHA RAVINDRA
Seat Number : 780
Name of the Institution : S.M.Nursing School, Gondia
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 780
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PADOTI SANTOSHI KASHIRAM
Seat Number : 781
Name of the Institution : S.M.Nursing School, Gondia
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II III
Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 26/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHAHARE DIVYA PRAKASH
Seat Number : 782
Name of the Institution : S.M.Nursing School, Gondia
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II III IV
Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 12/08/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TEMBHEKAR KRUSHNALI PRASHANT

Seat Number : 783
Name of the Institution : S.M. Nursing School, Gondia
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAVA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 09/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BANSOD POURNIMA ANIL

Seat Number : 784
Name of the Institution : RADHABAI BAHEKAR SCHOOL OF NURSING, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAVA MEMORIAL HOSPITAL, NAGPUR
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 27/11/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BHAVE NEHA AJAY

Seat Number : 785

Name of the Institution : RADHABAI BAHEKAR SCHOOL OF NURSING, GONDIA.

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects : IV

Signature of the Holder : 

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 785

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 06/09/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BHIMTE PRAGATI OMKAR

Seat Number : 786

Name of the Institution : RADHABAI BAHEKAR SCHOOL OF NURSING, GONDIA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects : II III

Signature of the Holder : 

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Sr. No. 787

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 15/08/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS CHAVHAN DAMYANTA GENDLAL

Seat Number : 787

Name of the Institution : RADHABAI BAHEKAR SCHOOL OF NURSING, GONDIA.

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR

Signature of the Holder :

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

---

### Sr. No. 788

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 25/11/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GANVIR SHIVANI DHANANJAY

Seat Number : 788

Name of the Institution : RADHABAI BAHEKAR SCHOOL OF NURSING, GONDIA.

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR

Signature of the Holder :

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHARDE PALLAVI CHANDRASHEKAR
Seat Number : 789
Name of the Institution : RADHABAI BAHEKAR SCHOOL OF NURSING, GONDIA.
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/03/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JAMBHULKAR RAJNI VIJAY
Seat Number : 790
Name of the Institution : RADHABAI BAHEKAR SCHOOL OF NURSING, GONDIA.
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/01/1987
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KATRE VIDHESHWARI RADHELAL
Seat Number : 791
Name of the Institution : RADHABAI BAHEKAR SCHOOL OF NURSING, GONDIA.
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 791

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/10/1985
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KOHALE GITA RAMAJI
Seat Number : 792
Name of the Institution : RADHABAI BAHEKAR SCHOOL OF NURSING, GONDIA.
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 792
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 04/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAMTEKE SHWETA SUNIL
Seat Number : 793
Name of the Institution : RADHABAI BAHEKAR SCHOOL OF NURSING, GONDIA.
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 24/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT YOGITA RAMU
Seat Number : 794
Name of the Institution : RADHABAI BAHEKAR SCHOOL OF NURSING, GONDIA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT CHITRA PRAKASH
Seat Number : 795
Name of the Institution : RADHABAI BAHEKAR SCHOOL OF NURSING, GONDIA.
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 795

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TAWADE PALLAVI SHRIKISAN
Seat Number : 796
Name of the Institution : RADHABAI BAHEKAR SCHOOL OF NURSING, GONDIA.
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR
Subjects : II IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 796
## Hall Ticket

**For the**  : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**  : 15/01/1996

**Date Of Exam**  : 14/01/2020 To 17/01/2020

**Name of the Candidate**  : MISS KELUT LATA PANCHARAM

**Seat Number**  : 797

**Name of the Institution**  : K.T.S. GENERAL HOSPITAL, GONDIA

**Name of the Examination**  : AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**  : DAGA MEMORIAL HOSPITAL, NAGPUR

**Subjects**  : III

**Signature of the Holder**  :

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### Note:
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**For the**  : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**  : 16/10/1991

**Date Of Exam**  : 14/01/2020 To 17/01/2020

**Name of the Candidate**  : MISS GAJBHIYE PRIYANKA NAVINRAJ

**Seat Number**  : 798

**Name of the Institution**  : ASHWINI NURSING TRAINING SCHOOL, GONDIA

**Name of the Examination**  : AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**  : DAGA MEMORIAL HOSPITAL, NAGPUR

**Subjects**  : II III

**Signature of the Holder**  :

---

### Note:
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Sr. No. 799

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

<table>
<thead>
<tr>
<th>For the</th>
<th>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Of Birth</td>
<td>15/07/1996</td>
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<tr>
<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td>Name of the Candidate</td>
<td>MISS KUMAR MEGHA INDRAKUMAR</td>
</tr>
<tr>
<td>Seat Number</td>
<td>799</td>
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<tr>
<td>Name of the Institution</td>
<td>ASHWINI NURSING TRAINING SCHOOL, GONDIA</td>
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<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td>Name of the Exam. Centre</td>
<td>DAGA MEMORIAL HOSPITAL, NAGPUR</td>
</tr>
<tr>
<td>Subjects</td>
<td>I II III IV</td>
</tr>
<tr>
<td>Signature of the Holder</td>
<td></td>
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</tbody>
</table>

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### Sr. No. 800

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

<table>
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<tr>
<th>For the</th>
<th>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Of Birth</td>
<td>24/10/1997</td>
</tr>
<tr>
<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
</tr>
<tr>
<td>Name of the Candidate</td>
<td>MISS KUMAR DOLLY JAYKUMAR</td>
</tr>
<tr>
<td>Seat Number</td>
<td>800</td>
</tr>
<tr>
<td>Name of the Institution</td>
<td>ASHWINI NURSING TRAINING SCHOOL, GONDIA</td>
</tr>
<tr>
<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
</tr>
<tr>
<td>Name of the Exam. Centre</td>
<td>DAGA MEMORIAL HOSPITAL, NAGPUR</td>
</tr>
<tr>
<td>Subjects</td>
<td>I II III IV</td>
</tr>
<tr>
<td>Signature of the Holder</td>
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</tr>
</tbody>
</table>

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020  
Date Of Birth: 03/02/2000  
Date Of Exam: 14/01/2020 To 17/01/2020  
Name of the Candidate: MISS NAGDIVE SHWETA BHIMRAO  
Seat Number: 803  
Name of the Institution: EKVIRA SCHOOL OF NURSING, DARYAPUR, AMRAVATI  
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR  
Name of the Exam. Centre: DIST. HOSPITAL FOR WOMEN, AMRAVATI  
Subjects: II  
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020  
Date Of Birth: 26/10/1998  
Date Of Exam: 14/01/2020 To 17/01/2020  
Name of the Candidate: MISS PAWAR DEEPALI SANTOSH  
Seat Number: 804  
Name of the Institution: EKVIRA SCHOOL OF NURSING, DARYAPUR, AMRAVATI  
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR  
Name of the Exam. Centre: DIST. HOSPITAL FOR WOMEN, AMRAVATI  
Subjects: I II III  
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 09/04/1991

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SOLANKE MANGALA BHAGAWAN

Seat Number : 805

Name of the Institution : EKVIRA SCHOOL OF NURSING, DARYAPUR, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 805

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 15/09/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS THORAT DIKSHA GAJANAN

Seat Number : 806

Name of the Institution : EKVIRA SCHOOL OF NURSING, DARYAPUR, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 806
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/04/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BELSARE ANJALI FULAJI
Seat Number : 807
Name of the Institution : M.J. PAWADE NURSING SCHOOL, WARUD, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST.HOSPITAL FOR WOMEN , AMRAVATI
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 807

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/04/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHANDANE SONALI PRAKASHRAO
Seat Number : 808
Name of the Institution : M.J. PAWADE NURSING SCHOOL, WARUD, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST.HOSPITAL FOR WOMEN , AMRAVATI
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 06/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KASDEKAR SHARDA SANJU

Seat Number : 809
Name of the Institution : M.J. PAWADE NURSING SCHOOL, WARUD, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 12/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KOKODE SHITAL DAULATRAO

Seat Number : 810
Name of the Institution : M.J. PAWADE NURSING SCHOOL, WARUD, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 11/06/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KUMRE POOJA SHAMRAO

Seat Number: 811
Name of the Institution: M.J. PAWADE NURSING SCHOOL, WARUD, AMRAVATI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: DIST. HOSPITAL FOR WOMEN, AMRAVATI

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 811

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 01/06/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS MADANE ASHVINI GANPATRAO

Seat Number: 812
Name of the Institution: M.J. PAWADE NURSING SCHOOL, WARUD, AMRAVATI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: DIST. HOSPITAL FOR WOMEN, AMRAVATI

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 812
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
25/06/2000

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS NANDANWAR DISHA CHANDRASHEKHAR

Seat Number
813

Name of the Institution
M.J. PAWADE NURSING SCHOOL, WARUD, AMRAVATI

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
DIST. HOSPITAL FOR WOMEN, AMRAVATI

Subjects
III

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 813

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
16/10/2000

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS PATIL SAKSHI ARUNRAO

Seat Number
814

Name of the Institution
M.J. PAWADE NURSING SCHOOL, WARUD, AMRAVATI

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
DIST. HOSPITAL FOR WOMEN, AMRAVATI

Subjects
III

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 814
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/01/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAHANE PRTI SUNIL
Seat Number : 815
Name of the Institution : M.J. PAWADE NURSING SCHOOL, WARUD, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 815

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHILAVEKAR CHHAYA RAJU
Seat Number : 816
Name of the Institution : MELGHAT NURSING SCHOOL, PARATWADA, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 816
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BELSARE SHARDA SUKRHAM
Seat Number : 817
Name of the Institution : SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Signature of the Holder :

Subjects : I II III IV

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/09/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHUSUM BABITA MANIRAM
Seat Number : 818
Name of the Institution : SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Signature of the Holder :

Subjects : II III

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Sr. No. 819

#### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
AUXILIARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
27/07/1998

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS CHIMOTE REKHA KENGARA

**Seat Number**
819

**Name of the Institution**
SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI

**Name of the Examination**
AUXILIARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
DIST. HOSPITAL FOR WOMEN, AMRAVATI

**Subjects**
I II III IV

**Signature of the Holder**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### Sr. No. 820

#### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
AUXILIARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
01/01/1999

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS CHIMOTE LALITA RAMU

**Seat Number**
820

**Name of the Institution**
SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI

**Name of the Examination**
AUXILIARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
DIST. HOSPITAL FOR WOMEN, AMRAVATI

**Subjects**
I II III IV

**Signature of the Holder**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/07/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DAHIKAR SHITAL BISARAM
Seat Number : 821
Name of the Institution : SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST.HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/01/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DARSIMBE SHANTA HIRA
Seat Number : 822
Name of the Institution : SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST.HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/01/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHIMREKAR SUNITA PANNALAL
Seat Number : 823
Name of the Institution : SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 823

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/01/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KALE MAYURI LAXMAN
Seat Number : 824
Name of the Institution : SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 21/02/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KASDEKAR RADHA RAMSINGH

Seat Number : 825

Name of the Institution : SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI

Subjects : II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 14/09/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KASDEKAR SANCHANA RAMKISAN

Seat Number : 826

Name of the Institution : SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI

Subjects : II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/02/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHANDEKAR VISHAKA NAMDEORAO
Seat Number : 827
Name of the Institution : SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

SR. NO. 827

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/10/1985
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KOKNE PORNIMA ASHOK
Seat Number : 828
Name of the Institution : SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

SR. NO. 828
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>829</th>
<th>830</th>
</tr>
</thead>
</table>

### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

13/01/2020

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

10/06/1986

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS MAWSKAR USHA SANTOSH

**Seat Number**

829

**Name of the Institution**

SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

DIST. HOSPITAL FOR WOMEN, AMRAVATI

**Subjects**

I II III IV

**Signature of the Holder**

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

**Note:**

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**Sr. No. 830**

### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

13/01/2020

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

03/05/1999

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS MORKAR SONAL SANTULAL

**Seat Number**

830

**Name of the Institution**

SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

DIST. HOSPITAL FOR WOMEN, AMRAVATI

**Subjects**

I II III IV

**Signature of the Holder**

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

**Note:**

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 21/01/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS MORKAR CHANDA MUNGILAL

Seat Number: 831

Name of the Institution: SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: DIST. HOSPITAL FOR WOMEN, AMRAVATI

Signature of the Holder: __________

Subjects: I II III

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 831

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 12/10/1998

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS RONGE SARALA SELUKAR

Seat Number: 832

Name of the Institution: SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: DIST. HOSPITAL FOR WOMEN, AMRAVATI

Signature of the Holder: __________

Subjects: I II III IV

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 832
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAWALKAR NANDINI SANTOSH
Seat Number : 833
Name of the Institution : SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 833

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/08/1984
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SOLANKE RANJANA GOVIND
Seat Number : 834
Name of the Institution : SHRI SANT LAHANUJI MAHARAJ SCHOOL OF NURSING, DARYAPUR, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 834
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHILAVEKAR BUGAI SHANKAR
Seat Number : 835
Name of the Institution : M.J. Pawade Nursing School, Tal - Morshi, Amravati
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN , AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHUSUM ASHWINI HARIRAM
Seat Number : 836
Name of the Institution : M.J. Pawade Nursing School, Tal - Morshi, Amravati
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN , AMRAVATI
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 07/07/1994

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS CHADHAR PREMABAI AJUDDI

Seat Number : 837

Name of the Institution : M.J. Pawade Nursing School, Tal - Morshi, Amravati

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI

Subjects : I II III IV

Signature of the Holder :

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 18/06/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DAHIKAR ROSHANI BRIJLAL

Seat Number : 838

Name of the Institution : M.J. Pawade Nursing School, Tal - Morshi, Amravati

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI

Subjects : I II IV

Signature of the Holder :

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 23/05/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DHANDE VANITA NANDKISHOR

Seat Number : 839

Name of the Institution : M.J. Pawade Nursing School, Tal - Morshi, Amravati

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI

Subjects : I III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 839

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 08/07/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAYAKAWAD ROSHANI RAMESHRAO

Seat Number : 840

Name of the Institution : M.J. Pawade Nursing School, Tal - Morshi, Amravati

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI

Subjects : III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 840
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<td>Name of the Candidate</td>
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<tr>
<td>Date Of Birth</td>
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<td>DIST. HOSPITAL FOR WOMEN, AMRAVATI</td>
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<td>Subjects</td>
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<td>Signature of the Holder</td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JAWARKAR ANJALI GOPAL
Seat Number : 843
Name of the Institution : M.J. Pawade Nursing School, Tal - Morshi, Amravati
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Date Of Birth : 02/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JAWARKAR SANJANA HIRALAL
Seat Number : 844
Name of the Institution : M.J. Pawade Nursing School, Tal - Morshi, Amravati
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHADSE POOJA SUBHASHRAO
Seat Number : 845
Name of the Institution : M.J. Pawade Nursing School, Tal - Morshi, Amravati
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/11/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KUMARE DEEPA GANPATRAO
Seat Number : 846
Name of the Institution : M.J. Pawade Nursing School, Tal - Morshi, Amravati
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAHARE KAJAL DILIPRAO
Seat Number : 847
Name of the Institution : M.J. Pawade Nursing School, Tal - Morshi, Amravati
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 847

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/01/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WANKHADE ASHVINI YASHAVANTRAO
Seat Number : 848
Name of the Institution : M.J. Pawade Nursing School, Tal - Morshi, Amravati
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 848
## MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

### HALL TICKET

**For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:** 12/10/2000

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** MISS BHILAVEKAR SHEETAL MOUJILAL

**Seat Number:** 849

**Name of the Institution:** Gurumauli Institute of Nursing Science, Amravati

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** DIST. HOSPITAL FOR WOMEN, AMRAVATI

**Subjects:** I II III IV

**Signature of the Holder:**

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**Note:**
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## MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

### HALL TICKET

**For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:** 19/07/2000

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** MISS JAMBEKAR AASHA DILIP

**Seat Number:** 850

**Name of the Institution:** Gurumauli Institute of Nursing Science, Amravati

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** DIST. HOSPITAL FOR WOMEN, AMRAVATI

**Subjects:** I II III IV

**Signature of the Holder:**

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KASDEKAR ANANDI BISRAM
Seat Number : 851
Name of the Institution : Gurumauli Institute of Nursing Science, Amravati
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KASDEKAR LALITA GHASIRAM
Seat Number : 852
Name of the Institution : Gurumauli Institute of Nursing Science, Amravati
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KASDEKAR ASHWINI SHALIKRAM

Seat Number : 853
Name of the Institution : Gurumauli Institue of Nursing Science, Amravati
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST.HOSPITAL FOR WOMEN, AMRAVATI

Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 853

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MAWASKAR BABITA RAJU

Seat Number : 854
Name of the Institution : Gurumauli Institue of Nursing Science, Amravati
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST.HOSPITAL FOR WOMEN, AMRAVATI

Subjects : I II IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 854
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/01/1991

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : SMT PANDHARAM SHITAL DASHARU
                        Nee(WARKHADE SHITAL SHASHIKANT)

Seat Number : 855

Name of the Institution : Gurumauli Institue of Nursing Science, Amravati

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DIST.HOSPITAL FOR WOMEN , AMRAVATI

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 16/05/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SAWALKAR DIPALI RAJARAM

Seat Number : 856

Name of the Institution : Gurumauli Institue of Nursing Science, Amravati

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DIST.HOSPITAL FOR WOMEN , AMRAVATI

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BETHEKAR MAMTA RINGA
Seat Number : 861
Name of the Institution : SARASWATI INSTITUTE OF NURSING SCIENCES AND RESEARCH, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST.HOSPITAL FOR WOMEN, AMRAVATI
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 861

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/01/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BETHEKAR BALI BAJU
Seat Number : 862
Name of the Institution : SARASWATI INSTITUTE OF NURSING SCIENCES AND RESEARCH, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST.HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 862
Note:

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Note:

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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/10/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DhanDE SUNITA MANU
Seat Number : 865
Name of the Institution : SARASWATI INSTITUTE OF NURSING SCIENCES AND RESEARCH, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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<td><strong>HALL TICKET</strong></td>
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<td><strong>Date Of Exam</strong></td>
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<tr>
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<td>29/03/2000</td>
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<tr>
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<tr>
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<tr>
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<td>868</td>
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<tr>
<td><strong>Name of the Institution</strong></td>
<td>SARASWATI INSTITUTE OF NURSING SCIENCES AND RESEARCH, AMRAVATI</td>
</tr>
<tr>
<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td><strong>Name of the Exam. Centre</strong></td>
<td>DIST. HOSPITAL FOR WOMEN, AMRAVATI</td>
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<tr>
<td><strong>Subjects</strong></td>
<td>I II III IV</td>
</tr>
<tr>
<td><strong>Signature of the Holder</strong></td>
<td></td>
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</tbody>
</table>

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<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>869</th>
<th>870</th>
</tr>
</thead>
</table>

### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
25/12/1999

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS KASDEKAR GITA CHOTE

**Seat Number**
869

**Name of the Institution**
SARASWATI INSTITUTE OF NURSING SCIENCES AND RESEARCH, AMRAVATI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
DIST. HOSPITAL FOR WOMEN, AMRAVATI

**Subjects**
I II III IV

**Signature of the Holder**

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
14/01/1997

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS SAKOM BABITA HIRAMAN

**Seat Number**
870

**Name of the Institution**
SARASWATI INSTITUTE OF NURSING SCIENCES AND RESEARCH, AMRAVATI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
DIST. HOSPITAL FOR WOMEN, AMRAVATI

**Subjects**
I III

**Signature of the Holder**

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/10/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS ZAMARKAR NILAM BISRAM

Seat Number : 871

Name of the Institution : SARASWATI INSTITUTE OF NURSING SCIENCES AND RESEARCH, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI

Subjects : II

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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Sr. No. 871

---

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/06/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BELKAR RINA DINESH

Seat Number : 872

Name of the Institution : VIDHARBH SCHOOL OF NURSING, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI

Subjects : I III

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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### Hall Ticket Details

**Sr. No.** 873

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
11/07/1998

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS GAWAI POOJA SUNIL

**Seat Number**
873

**Name of the Institution**
VIDHARBH SCHOOL OF NURSING, AMRAVATI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
DIST. HOSPITAL FOR WOMEN, AMRAVATI

**Subjects**
II III

**Signature of the Holder**

---

**Note:**
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**Sr. No.** 874

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
03/07/2000

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS WAGHMARE SHRADDHA SHANKAR

**Seat Number**
874

**Name of the Institution**
VIDHARBH SCHOOL OF NURSING, AMRAVATI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
DIST. HOSPITAL FOR WOMEN, AMRAVATI

**Subjects**
III

**Signature of the Holder**

---

**Note:**
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/01/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAHANE MOSAMI YASHWANT
Seat Number : 875
Name of the Institution : VIDHARBH SCHOOL OF NURSING, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I, II, III, IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/05/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GONDANE KSHITIJA DNYANESHWAR
Seat Number : 876
Name of the Institution : ASHA NURSING SCHOOL, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI
Subjects : I, II, III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 11/03/1997
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KHANDEKAR SWATI RAMESH
Seat Number: 877
Name of the Institution: ASHA NURSING SCHOOL, AMRAVATI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: DIST.HOSPITAL FOR WOMEN, AMRAVATI
Subjects: III
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 17/02/2001
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KHOBRAGADE YUKTA SURENDRA
Seat Number: 878
Name of the Institution: ASHA NURSING SCHOOL, AMRAVATI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: DIST.HOSPITAL FOR WOMEN, AMRAVATI
Subjects: III
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 07/10/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MAHORE SHUBHANGI KAILAS

Seat Number : 879

Name of the Institution : ASHA NURSING SCHOOL, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI

Subjects : II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 879

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 28/07/1995

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MESHRAM RASHMI SURESH

Seat Number : 880

Name of the Institution : ASHA NURSING SCHOOL, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DIST. HOSPITAL FOR WOMEN, AMRAVATI

Subjects : III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 880
## AUXILLARY NURSE MIDWIFERY FIRST YEAR

### Hall Ticket

**Sr. No.** 881

**For the**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**  
06/12/2000

**Date Of Exam**  
14/01/2020 To 17/01/2020

**Name of the Candidate**  
MISS SAWLE NISHA MAHADEO

**Seat Number**  
881

**Name of the Institution**  
ASHA NURSING SCHOOL, AMRAVATI

**Name of the Examination**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**  
DIST. HOSPITAL FOR WOMEN, AMRAVATI

**Subjects**  
III

**Signature of the Holder**

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**Sr. No.** 882

**For the**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**  
02/10/1999

**Date Of Exam**  
14/01/2020 To 17/01/2020

**Name of the Candidate**  
MISS WASNIK SAKSHI JANARDHAN

**Seat Number**  
882

**Name of the Institution**  
ASHA NURSING SCHOOL, AMRAVATI

**Name of the Examination**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**  
DIST. HOSPITAL FOR WOMEN, AMRAVATI

**Subjects**  
III

**Signature of the Holder**

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 07/05/1989

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS CHAVHAN PRIYANKA SUDHAKAR

Seat Number : 883

Name of the Institution : SARSWATI NURSING SCHOOL, DHAMANGAON, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DIST.HOSPITAL FOR WOMEN, AMRAVATI

Subjects : III

Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 27/03/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GEDAM PRIYA ARJUN

Seat Number : 884

Name of the Institution : SARSWATI NURSING SCHOOL, DHAMANGAON, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DIST.HOSPITAL FOR WOMEN, AMRAVATI

Subjects : III

Signature of the Holder :

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Sr. No. 884
# MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

## HALL TICKET

**Sr. No.** 885

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<th>For the</th>
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<td>Date Of Birth</td>
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<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td>Name of the Candidate</td>
<td>MISS GODANGE VAISHNAVI GULABRAO</td>
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<tr>
<td>Seat Number</td>
<td>885</td>
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<tr>
<td>Name of the Institution</td>
<td>SARSWATI NURSING SCHOOL, DHAMANGAON, AMRAVATI</td>
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<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td>Name of the Exam. Centre</td>
<td>DIST. HOSPITAL FOR WOMEN, AMRAVATI</td>
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<tr>
<td>Subjects</td>
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**Sr. No.** 886

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<tr>
<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td>Name of the Candidate</td>
<td>MISS KALAMKAR POOJA RAMESHRAO</td>
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<tr>
<td>Seat Number</td>
<td>886</td>
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<tr>
<td>Name of the Institution</td>
<td>SARSWATI NURSING SCHOOL, DHAMANGAON, AMRAVATI</td>
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<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<td>Name of the Exam. Centre</td>
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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
06/11/2000

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS KAMBLE SAKSHI PREMANAND

**Seat Number**
887

**Name of the Institution**
SARSWATI NURSING SCHOOL, DHAMANGAON, AMRAVATI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
DIST.HOSPITAL FOR WOMEN, AMRAVATI

**Subjects**
I III

**Signature of the Holder**

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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
01/12/1996

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS NAGRALE PAYAL SANJAY

**Seat Number**
888

**Name of the Institution**
SARSWATI NURSING SCHOOL, DHAMANGAON, AMRAVATI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
DIST.HOSPITAL FOR WOMEN, AMRAVATI

**Subjects**
I III

**Signature of the Holder**

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth
08/08/1999

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS SONONE KUSHALATA PRAVIRAO

Seat Number
889

Name of the Institution
SARSWATI NURSING SCHOOL, DHAMANGAON, AMRAVATI

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
DIST.HOSPITAL FOR WOMEN, AMRAVATI

Subjects
I II III V VI IV

Signature of the Holder

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth
06/08/2000

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS WANKHADE PAYAL SANJAY

Seat Number
890

Name of the Institution
SARSWATI NURSING SCHOOL, DHAMANGAON, AMRAVATI

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
DIST.HOSPITAL FOR WOMEN, AMRAVATI

Subjects
III

Signature of the Holder

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KANNAKE PALLAVI SUDHAKER
Seat Number : 891
Name of the Institution : GENERAL HOSPITAL, GADCHIROLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BAWANE SAKSHITA DASHRATH
Seat Number : 892
Name of the Institution : KALYAN INSTITUTE OF NURSING EDUCATION, RAJURA, CHANDRAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects : III
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DURGE ANKITA RATAN
Seat Number : 893
Name of the Institution : KALYAN INSTITUTE OF NURSING EDUCATION, RAJURA, CHANDRAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/11/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TEKAM SONALI MANIK
Seat Number : 895
Name of the Institution : KALYAN INSTITUTE OF NURSING EDUCATION, RAJURA, CHANDRAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects : I III
Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VIRUTKAR KARISHMA ARVIND
Seat Number : 896
Name of the Institution : KALYAN INSTITUTE OF NURSING EDUCATION, RAJURA, CHANDRAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects : III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Hall Ticket Details

**For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:** 10/04/2000

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** MISS BANKAR RIYA ANIL

**Seat Number:** 897

**Name of the Institution:** PRABHADEVI SCHOOL OF NURSING, CHANDRAPUR

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** GENERAL HOSPITAL, CHANDRAPUR

**Subjects:** I II III IV

**Signature of the Holder:**

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**Note:**

1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020  
Date Of Birth : 10/12/1994  
Date Of Exam : 14/01/2020 To 17/01/2020  
Name of the Candidate : MISS MADAVI SHILPA VILAS  
Seat Number : 899  
Name of the Institution : PRABHADEVI SCHOOL OF NURSING, CHANDRAPUR  
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR  
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR  
Subjects : I II III IV  
Signature of the Holder :  

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Note:  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/02/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DUGA YASHASWINI RAMU
Seat Number : 903
Name of the Institution : DR. SALVE NURSING INSTITUTE COLLEGE, GADCHIROLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects : II  III  IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/11/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS HICHAMI RESHMA JANU
Seat Number : 904
Name of the Institution : DR. SALVE NURSING INSTITUTE COLLEGE, GADCHIROLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects : I  II  III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/04/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PUDO RUPALI HIRAMAN
Seat Number : 905
Name of the Institution : DR. SALVE NURSING INSTITUTE COLLEGE, GADCHIROLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the  : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth  : 02/06/1997
Date Of Exam  : 14/01/2020 To 17/01/2020
Name of the Candidate  : MISS VELADI MANISHA KEWATRAM

Seat Number  : 907
Name of the Institution  : DR. SALVE NURSING INSTITUTE COLLEGE, GADCHIROLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects  : I II III

Signature of the Holder  

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 907

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the  : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth  : 17/05/2000
Date Of Exam  : 14/01/2020 To 17/01/2020
Name of the Candidate  : MISS ATRAM AISHWARYA SHANKAR

Seat Number  : 908
Name of the Institution  : NAVJEEVAN NURSING SCHOOL, CHAMORSHI, GADCHIROLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects  : I II III

Signature of the Holder  

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 908
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 27/09/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS BARSAGADE SAKSHI SUNIL
Seat Number: 909
Name of the Institution: NAVJEEVAN NURSING SCHOOL, CHAMORSHI, GADCHIROLI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, CHANDRAPUR
Subjects: I II III
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 14/08/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS DURKE JYOTI VYENKATI
Seat Number: 910
Name of the Institution: NAVJEEVAN NURSING SCHOOL, CHAMORSHI, GADCHIROLI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, CHANDRAPUR
Subjects: III
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/02/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GECHCHO PAYAL CHINNA
Seat Number : 911
Name of the Institution : NAVJEEVAN NURSING SCHOOL, CHAMORSHI, GADCHIROLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects : I  II  III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 911

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/04/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JUMNAKE HINALI SURESH
Seat Number : 912
Name of the Institution : NAVJEEVAN NURSING SCHOOL, CHAMORSHI, GADCHIROLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 912
### Hall Ticket 1

**For the**: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Name of the Candidate**: MISS KANNAKE PRAJAKTA RAMESH

**Seat Number**: 913

**Name of the Institution**: NAVJEEVAN NURSING SCHOOL, CHAMORSHI, GADCHIROLI

**Name of the Examination**: AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**: GENERAL HOSPITAL, CHANDRAPUR

**Subjects**: I II III IV

**Signature of the Holder**: 

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**Note**:  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### Hall Ticket 2

**For the**: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Name of the Candidate**: MISS MADAVI NIRANJANA TANU

**Seat Number**: 914

**Name of the Institution**: NAVJEEVAN NURSING SCHOOL, CHAMORSHI, GADCHIROLI

**Name of the Examination**: AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**: GENERAL HOSPITAL, CHANDRAPUR

**Subjects**: I II III

**Signature of the Holder**: 

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**Note**:  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 915

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 07/01/1989
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MAJUMDER SUNITA SUBRATA
Seat Number : 915
Name of the Institution : NAVJEEVAN NURSING SCHOOL, CHAMORSHI, GADCHIROLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL,CHANDRAPUR
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 916

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 09/02/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM ANJALI RAMESH
Seat Number : 916
Name of the Institution : NAVJEEVAN NURSING SCHOOL, CHAMORSHI, GADCHIROLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL,CHANDRAPUR
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/02/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MOON KARISHMA RAGHUNATH
Seat Number : 917
Name of the Institution : NAVJEEVAN NURSING SCHOOL, CHAMORSHI, GADCHIROLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 917

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION
HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NAITAM JAISRI MORESHWAR
Seat Number : 918
Name of the Institution : NAVJEEVAN NURSING SCHOOL, CHAMORSHI, GADCHIROLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 918
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/02/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PRAJVITA YASHWANT RAUT
Seat Number : 919
Name of the Institution : NAVJEEVAN NURSING SCHOOL, CHAMORSHI, GADCHIROLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 919

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHAHANDE DIPALI SURESH
Seat Number : 920
Name of the Institution : SHRI SAI SCHOOL OF NURSING, ARMORI, GADCHIROLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 920
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 25/07/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS HEDO KIRAN PRAMOD

Seat Number : 921

Name of the Institution : SHRI SAI SCHOOL OF NURSING, ARMORI, GADCHIROLI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 921

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 09/08/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS LATILWAR NITAL RAJENDRA

Seat Number : 922

Name of the Institution : SHRI SAI SCHOOL OF NURSING, ARMORI, GADCHIROLI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR

Subjects : I II

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 922
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/09/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LONARE KIRAN KRUSHNAJI
Seat Number : 923
Name of the Institution : SHRI SAI SCHOOL OF NURSING, ARMORI, GADCHIROLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 923

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAMTEKE MRUGANAINA KALIDAS
Seat Number : 924
Name of the Institution : SHRI SAI SCHOOL OF NURSING, ARMORI, GADCHIROLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, CHANDRAPUR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 924
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 23/08/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SORTE ASHWINI BHASKAR

Seat Number : 925

Name of the Institution : SHRI SAI SCHOOL OF NURSING, ARMORI, GADCHIROLI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL,CHANDRAPUR

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 15/01/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS WELADI CHAITANYA GURUDAS

Seat Number : 926

Name of the Institution : SHRI SAI SCHOOL OF NURSING, ARMORI, GADCHIROLI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL,CHANDRAPUR

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 31/08/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS UIKEY DAMINA MADHUKAR
Seat Number: 927
Name of the Institution: SANT GAJANAN MAHARAJ NURSING SCHOOL, SINDE WAHI, CHANDRAPUR
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, CHANDRAPUR
Subjects: III
Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 30/07/1990
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS RAMTEKE SUNITA CHANDRABHAN
Seat Number: 928
Name of the Institution: Jijamata Insitute of Nursing, Bhadrawati, Chandrapur
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, CHANDRAPUR
Subjects: III
Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 10/05/1985
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BELEKAR ARCHANA VASANTRAO
Seat Number : 929
Name of the Institution : Rashtriy Nursing School, Rajura, Chandrapur
Name of the Exam. Centre : GENERAL HOSPITAL,CHANDRAPUR
Subjects : I II III V VI IV
Signature of the Holder :

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 929

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 14/03/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS IPPAWAR PRIYANKA SHANKAR
Seat Number : 930
Name of the Institution : Rashtriy Nursing School, Rajura, Chandrapur
Name of the Exam. Centre : GENERAL HOSPITAL,CHANDRAPUR
Subjects : I II III
Signature of the Holder :

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 930
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 30/11/1993

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS KHOBRAGADE PRACHI PRAKASH

Seat Number: 931

Name of the Institution: Rashtriy Nursing School, Rajura, Chandrapur

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, CHANDRAPUR

Subjects: I

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth: 26/11/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS NAKKAWAR KOMAL SHAMRAO

Seat Number: 932

Name of the Institution: Rashtriy Nursing School, Rajura, Chandrapur

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, CHANDRAPUR

Subjects: I IV

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 21/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SOMKUWAR KOMAL DNYANESHWAR
Seat Number : 933
Name of the Institution : Rashtriy Nursing School, Rajura, Chandrapur
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL,CHANDRAPUR
Subjects : I II
Signature of the Holder :
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 24/09/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASE SHIVANI PRABUDAS
Seat Number : 934
Name of the Institution : Rashtriy Nursing School, Rajura, Chandrapur
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL,CHANDRAPUR
Subjects : I IV
Signature of the Holder :
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/07/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ATRAM MADHURI BHIMRAO
Seat Number : 935
Name of the Institution : HELEN ROSE SCHOOL OF NURSING UMRI, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : 1
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 935

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GANVIR RIYA TARACHAND
Seat Number : 936
Name of the Institution : HELEN ROSE SCHOOL OF NURSING UMRI, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : 1
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 936
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
28/03/1999

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS NAITAM MAYURI WAMAN

Seat Number:
937

Name of the Institution:
HELEN ROSE SCHOOL OF NURSING UMRI, YAVATMAL

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, YAVATMAL

Subjects:
III

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth:
25/01/1993

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS RATHOD SIMPAL BHIKU

Seat Number:
938

Name of the Institution:
HELEN ROSE SCHOOL OF NURSING UMRI, YAVATMAL

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, YAVATMAL

Subjects:
I

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/10/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHAGAT DIKSHA GAUTAM

Seat Number : 939
Name of the Institution : SUMITRABAI THAKARE TRAINING COLLEGE OF NURSING, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL YAVATMAL

Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 939

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 20/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAYAKWAD PALLAVI KWADU

Seat Number : 940
Name of the Institution : SUMITRABAI THAKARE TRAINING COLLEGE OF NURSING, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL YAVATMAL

Subjects : I IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 940
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 01/07/1989
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS MADAVI KALPANA SHIVAJI
Seat Number: 941
Name of the Institution: SUMITRABAI THAKARE TRAINING COLLEGE OF NURSING, YAVATMAL
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, YAVATMAL
Subjects: II IV
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth: 22/08/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS PAIKRAO POOJA NAGORAO
Seat Number: 942
Name of the Institution: SUMITRABAI THAKARE TRAINING COLLEGE OF NURSING, YAVATMAL
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, YAVATMAL
Subjects: I II III V VI IV
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 09/08/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS RATHOD JAYASHRI MANOJ

Seat Number : 943

Name of the Institution : SUMITRABAI THAKARE TRAINING COLLEGE OF NURSING, YAVATMAL

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL

Subjects : II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 943

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 24/10/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS TODSAM JYOTSNA BHIMRAO

Seat Number : 944

Name of the Institution : SUMITRABAI THAKARE TRAINING COLLEGE OF NURSING, YAVATMAL

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL

Subjects : III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 944
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/07/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS UIKE PRATIBHA SUBHASH
Seat Number : 945
Name of the Institution : SUMITRABAI THAKARE TRAINING COLLEGE OF NURSING, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 945

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHAVHAN VAISHNAVI DILIP
Seat Number : 946
Name of the Institution : PADOLE NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 946
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 947

Sr. No. 948
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 16/03/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KAMBLE ARTI ASHOK

Seat Number : 949

Name of the Institution : PADOLE NURSING SCHOOL, YAVATMAL

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 949

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 19/09/1984

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MESHRAM JAYA UTTAMARAO

Seat Number : 950

Name of the Institution : PADOLE NURSING SCHOOL, YAVATMAL

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 950
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NAMURTE MAYURI KESHAV
Seat Number : 951
Name of the Institution : PADOLE NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 951

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/08/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAMTEKE SHITAL JANARDHAN
Seat Number : 952
Name of the Institution : PADOLE NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 952
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/11/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHADE RUPALI VINAYAK
Seat Number : 954
Name of the Institution : PADOLE NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 04/06/2000

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS MALGHANE USHA VASANTA

Seat Number
: 955

Name of the Institution
: TULSHIRAMJI SHEBE SCHOOL OF NURSING, PUSAD, YAVATMAL

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: GENERAL HOSPITAL, YAVATMAL

Subjects
: I II III

Signature of the Hall Ticket:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 22/11/1999

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS SANDAVKAR EKADASHI SAMBHAJI

Seat Number
: 956

Name of the Institution
: TULSHIRAMJI SHEBE SCHOOL OF NURSING, PUSAD, YAVATMAL

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: GENERAL HOSPITAL, YAVATMAL

Subjects
: II

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 31/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ATRAM JAYASHRI GANESH
Seat Number : 957
Name of the Institution : MUNGASAJI MAHARAJ NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 957

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DAKHORE SAVITA TULSIDAS
Seat Number : 958
Name of the Institution : MUNGASAJI MAHARAJ NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 958
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DEVGADKAR MANASI KASHINATH
Seat Number : 959
Name of the Institution : MUNGASAJI MAHARAJ NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 959

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/06/1986
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHODAM VARSHA RAMBHAU
Seat Number : 960
Name of the Institution : MUNGASAJI MAHARAJ NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 960
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
06/11/1999

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS MESHRAM RAJSHREE HIRAMAN

Seat Number :
961

Name of the Institution :
MUNGASAJI MAHARAJ NURSING SCHOOL,
YAVATMAL

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
GENERAL HOSPITAL ,YAVATMAL

Subjects :
I II III IV

Signature of the Holder :

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION,MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the
MSBNPE through institute authority before commencement of the examination.

Sr. No. 961

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
26/01/2000

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS MESHRAM PRIYA MAHADEO

Seat Number :
962

Name of the Institution :
MUNGASAJI MAHARAJ NURSING SCHOOL,
YAVATMAL

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
GENERAL HOSPITAL ,YAVATMAL

Subjects :
I II

Signature of the Holder :

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION,MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the
MSBNPE through institute authority before commencement of the examination.

Sr. No. 962
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/03/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MORGHADE MINAKSHI MAHADEV
Seat Number : 963
Name of the Institution : MUNGASAJI MAHARAJ NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 963

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PISE PUJA SAHEBRAO
Seat Number : 964
Name of the Institution : MUNGASAJI MAHARAJ NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 964
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/08/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TABADU DURGA WAMAN
Seat Number : 965
Name of the Institution : MUNGASAJI MAHARAJ NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 965

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS THOMBRE UMAGAURI VINOD
Seat Number : 966
Name of the Institution : MUNGASAJI MAHARAJ NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 25/02/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS UKANDE MAMTA YOGESH
Seat Number: 967
Name of the Institution: MUNGASAJI MAHARAJ NURSING SCHOOL, YAVATMAL
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, YAVATMAL
Signature of the Holder: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 967

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 03/08/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS DUMARE MANISHA SAMBHAJI
Seat Number: 968
Name of the Institution: MUNGASAJI MAHARAJ NURSING SCHOOL, DHARWA, YAVATMAL
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, YAVATMAL
Signature of the Holder: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
<table>
<thead>
<tr>
<th><strong>Sr. No.</strong></th>
<th>969</th>
</tr>
</thead>
</table>

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the** : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth** : 23/03/1999

**Date Of Exam** : 14/01/2020 To 17/01/2020

**Name of the Candidate** : MISS FUPATE ARATI ARUN

**Seat Number** : 969

**Name of the Institution** : MUNGASAJI MAHARAJ NURSING SCHOOL, DHARWA, YAVATMAL

**Name of the Examination** : AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre** : GENERAL HOSPITAL, YAVATMAL

**Subjects** : I III

**Signature of the Holder** : 

---

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

---

<table>
<thead>
<tr>
<th><strong>Sr. No.</strong></th>
<th>970</th>
</tr>
</thead>
</table>

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the** : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth** : 14/02/2000

**Date Of Exam** : 14/01/2020 To 17/01/2020

**Name of the Candidate** : MISS MADAVI SHALINI RAMESH

**Seat Number** : 970

**Name of the Institution** : MUNGASAJI MAHARAJ NURSING SCHOOL, DHARWA, YAVATMAL

**Name of the Examination** : AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre** : GENERAL HOSPITAL, YAVATMAL

**Subjects** : I III

**Signature of the Holder** : 

---

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 26/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHINDE SANJIWANI MAHENDRA
Seat Number : 971
Name of the Institution : MUNGASAJI MAHARAJ NURSING SCHOOL, Dharwa, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 971

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 12/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ATRAM SHARADA SHAMRAO
Seat Number : 972
Name of the Institution : DR. ARCHANATAI GADE PATIL SCHOOL OF NURSING LOHARA YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 972
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHAGAT MEGHA ASHOK
Seat Number : 973
Name of the Institution : DR. ARCHANATAI GADE PATIL SCHOOL OF NURSING LOHARA YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BORKAR ASHVINI DNYANESHWAR
Seat Number : 974
Name of the Institution : DR. ARCHANATAI GADE PATIL SCHOOL OF NURSING LOHARA YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
07/01/2000

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS CHANDEKAR NAMRATA SURESH

Seat Number
975

Name of the Institution
DR. ARCHANATAI GADE PATIL SCHOOL OF NURSING LOHARA YAVATMAL

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
GENERAL HOSPITAL ,YAVATMAL

Subjects
I

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 975

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
09/02/2001

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS DATAR AMRUTA SURESH

Seat Number
976

Name of the Institution
DR. ARCHANATAI GADE PATIL SCHOOL OF NURSING LOHARA YAVATMAL

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
GENERAL HOSPITAL ,YAVATMAL

Subjects
I III

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 976
### Sr. No. 977

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

10/09/1999

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS INGOLE KOMAL ARUN

**Seat Number**

977

**Name of the Institution**

DR. ARCHANATAI GADE PATIL SCHOOL OF NURSING LOHARA YAVATMAL

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

GENERAL HOSPITAL, YAVATMAL

**Subjects**

I II III IV

**Signature of the Holder**

Note:

1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### Sr. No. 978

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

14/12/1996

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS KHADE SANJIVANI TEJRAO

**Seat Number**

978

**Name of the Institution**

DR. ARCHANATAI GADE PATIL SCHOOL OF NURSING LOHARA YAVATMAL

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

GENERAL HOSPITAL, YAVATMAL

**Subjects**

I III

**Signature of the Holder**

Note:

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 03/01/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MESHRAM RUPALI BHIKUJI

Seat Number : 979

Name of the Institution : DR. ARCHANATAI GADE PATIL SCHOOL OF NURSING, LOHARA YAVATMAL

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 979

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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 23/04/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PANDOR PRATIKSHA SAHEBRAO

Seat Number : 980

Name of the Institution : DR. ARCHANATAI GADE PATIL SCHOOL OF NURSING, LOHARA YAVATMAL

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 980
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/08/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PURAM YOGITA UTTAMARAO
Seat Number : 981
Name of the Institution : DR. ARCHANATAI GADE PATIL SCHOOL OF NURSING, LOHARA YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SONTAKKE SHALINI NARAYAN
Seat Number : 982
Name of the Institution : DR. ARCHANATAI GADE PATIL SCHOOL OF NURSING, LOHARA YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Sr. No. 985

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BELE RESHMA MAROTI
Seat Number : 985
Name of the Institution : PRUTHVIRAJ DESHMUKH NURSING INSTITUTE, LOHARA, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 986

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/01/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHUSARE YOGITA BHIMRAO
Seat Number : 986
Name of the Institution : PRUTHVIRAJ DESHMUKH NURSING INSTITUTE, LOHARA, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 03/02/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PUNWATKAR ASHWINI UMESH

Seat Number : 987

Name of the Institution : PRUTHVIRAJ DESHMUKH NURSING INSTITUTE, LOHARA, YAVATMAL

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 987

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 03/04/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS ZAMRE VAISHNAVI KISHOR

Seat Number : 988

Name of the Institution : PRUTHVIRAJ DESHMUKH NURSING INSTITUTE, LOHARA, YAVATMAL

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 988
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ADE PUNAM MEGHARAJ
Seat Number : 989
Name of the Institution : SHRI SWAMI SAMARTH NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 989

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/12/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD USHA ASHOK
Seat Number : 990
Name of the Institution : SHRI SWAMI SAMARTH NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : I IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/07/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT PRAGATI AJABRAO
Seat Number : 991
Name of the Institution : SHRI SWAMI SAMARTH NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL , YAVATMAL
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 991

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/11/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TIRALE NIKHITA SURESH
Seat Number : 992
Name of the Institution : SHRI SWAMI SAMARTH NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL , YAVATMAL
Subjects : II III
Signature of the Holder :

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Sr. No. 992
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 14/01/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MARASKOLHE SARIKA VASUDEO
Seat Number : 993
Name of the Institution : SHRI VINAYAKRAOBAPU DESHMUKH NURSING SCHOOL , SAWAROAON , YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : I  IV
Signature of the Holder : 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 30/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM RESHAMA KAILAS
Seat Number : 994
Name of the Institution : SHRI VINAYAKRAOBAPU DESHMUKH NURSING SCHOOL , SAWAROAON , YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : I  IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 27/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PATIL MONIKA MILIND
Seat Number : 995
Name of the Institution : SHRI VINAYAKRAOBAPU DESHMUKH NURSING SCHOOL , SAWARGAON , YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 10/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM SNEHA SURESH
Seat Number : 996
Name of the Institution : MATOSHRI ORGANIZATION OF NURSING EDUCATION , YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : I III IV
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 24/09/1990

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MESHRAM TEJASWINI KAMLAKAR

Seat Number : 997

Name of the Institution : MATOSHRI ORGANIZATION OF NURSING EDUCATION , YAVATMAL

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL

Subjects : I II III V VI IV

Signature of the Holder : 

Note:
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Sr. No. 997

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 10/04/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS NAGRALE POOJA RAMESH

Seat Number : 998

Name of the Institution : MATOSHRI ORGANIZATION OF NURSING EDUCATION , YAVATMAL

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL

Subjects : III

Signature of the Holder : 

Note:
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Sr. No. 998
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth
09/06/1998

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS WASNIK SHRADDHA HANUMANTARAO

Seat Number
999

Name of the Institution
MATOSHRI ORGANIZATION OF NURSING EDUCATION , YAVATMAL

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
GENERAL HOSPITAL , YAVATMAL

Subjects
I II III V VI IV

Signature of the Holder

Note:
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MHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 13/06/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS ADHAGALE SONALI PRAKASH

Seat Number : 1001

Name of the Institution : Jeevan Rekha School of Nursing, Tal Umarkhed, Yavatmal

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL

Subjects : I II III IV

Signature of the Holder :

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MHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/06/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BARDE YASHODA ANIL

Seat Number : 1002

Name of the Institution : Jeevan Rekha School of Nursing, Tal Umarkhed, Yavatmal

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL

Subjects : III IV

Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/01/1988
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BELKHEDE CHANDA DEVIDAS
Seat Number : 1003
Name of the Institution : Jeevan Rekha School of Nursing, Tal Umakhed, Yavatmal
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : III IV
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/09/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DESHMANE ASHWINI KAILASRAO
Seat Number : 1004
Name of the Institution : Jeevan Rekha School of Nursing, Tal Umakhed, Yavatmal
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : I II III IV
Signature of the Holder :

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<td>IV</td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 22/09/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MUNESHWAR RAMA ASHOK

Seat Number : 1007

Name of the Institution : Jeevan Rekha School of Nursing, Tal Umarkhed, Yavatmal

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL

Subjects : I II IV

Signature of the Holder :

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Sr. No. 1007

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 14/07/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SAWATE RUPALI DILIP

Seat Number : 1008

Name of the Institution : Jeevan Rekha School of Nursing, Tal Umarkhed, Yavatmal

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL

Subjects : IV

Signature of the Holder :

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

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<tr>
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<td>MISS WATHORE ASHWINI DADARAO</td>
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

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<tr>
<td>Name of the Candidate</td>
<td>MISS BHARNE KHUSHBU HITENDRA</td>
</tr>
<tr>
<td>Seat Number</td>
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<td>Name of the Institution</td>
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<tr>
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<td>MISS GAIKWAD RUPALI BHIMRAO</td>
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<td>MISS MOHOD MANISHA PRAKASH</td>
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<tr>
<td><strong>Name of the Institution</strong></td>
<td>Sanjeevan Nursing School, Yavatmal,</td>
</tr>
<tr>
<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
</tr>
<tr>
<td><strong>Name of the Exam. Centre</strong></td>
<td>GENERAL HOSPITAL, YAVATMAL</td>
</tr>
<tr>
<td><strong>Subjects</strong></td>
<td>II III</td>
</tr>
<tr>
<td><strong>Signature of the Holder</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>1015</th>
</tr>
</thead>
<tbody>
<tr>
<td>For the</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
</tr>
<tr>
<td>Date Of Birth</td>
<td>08/08/1995</td>
</tr>
<tr>
<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
</tr>
<tr>
<td>Name of the Candidate</td>
<td>MISS BHAGAT VISHAKHA PRAKASH</td>
</tr>
<tr>
<td>Seat Number</td>
<td>1015</td>
</tr>
<tr>
<td>Name of the Institution</td>
<td>Yash Institute of Nursing, Athori Bazar, Yavatmal</td>
</tr>
<tr>
<td>Name of the Exam. Centre</td>
<td>GENERAL HOSPITAL, YAVATMAL</td>
</tr>
<tr>
<td>Subjects</td>
<td>I II III</td>
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<td>Signature of the Holder</td>
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</tbody>
</table>

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2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>1016</th>
</tr>
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<tbody>
<tr>
<td>For the</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
</tr>
<tr>
<td>Date Of Birth</td>
<td>17/05/2000</td>
</tr>
<tr>
<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
</tr>
<tr>
<td>Name of the Candidate</td>
<td>MISS BORKAR RUSHIKA DINESH</td>
</tr>
<tr>
<td>Seat Number</td>
<td>1016</td>
</tr>
<tr>
<td>Name of the Institution</td>
<td>Yash Institute of Nursing, Athori Bazar, Yavatmal</td>
</tr>
<tr>
<td>Name of the Exam. Centre</td>
<td>GENERAL HOSPITAL, YAVATMAL</td>
</tr>
<tr>
<td>Subjects</td>
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</table>

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.  
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For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
11/07/2000

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS DUKARE ACHAL ANANDRAO

Seat Number :
1017

Name of the Institution :
Yash Institute of Nursing, Athori Bazar, Yavatmal

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
GENERAL HOSPITAL, YAVATMAL

Subjects :
II

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth :
24/07/1994

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS GAIKWAD RAJSHRI DHYANESHWAR

Seat Number :
1018

Name of the Institution :
Yash Institute of Nursing, Athori Bazar, Yavatmal

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
GENERAL HOSPITAL, YAVATMAL

Subjects :
II V VI

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 23/08/1994

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GEDAM RAKHI ANIL

Seat Number : 1019

Name of the Institution : Yash Institute of Nursing, Athori Bazar, Yavatmal

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL , YAVATMAL

Subjects : II III

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1019

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 03/06/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KAMBALE SAMIKSHA DIGAMBAR

Seat Number : 1020

Name of the Institution : Yash Institute of Nursing, Athori Bazar, Yavatmal

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL , YAVATMAL

Subjects : II

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. 1020
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 06/03/1989

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KHAIRKAR SUPRIYA VASANTRAO

Seat Number : 1021

Name of the Institution : Yash Institute of Nursing, Athori Bazar, Yavatmal

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1021

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 16/05/1996

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MARATHE POOJA PYARELAL

Seat Number : 1022

Name of the Institution : Yash Institute of Nursing, Athori Bazar, Yavatmal

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL

Subjects : II

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1022
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM PAYAL MANOHAR
Seat Number : 1023
Name of the Institution : Yash Institute of Nursing, Athori Bazar, Yavatmal
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM PRATIKSHA MAHADEO
Seat Number : 1024
Name of the Institution : Yash Institute of Nursing, Athori Bazar, Yavatmal
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 07/10/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MESHRAM DURGA MANOHAR

Seat Number : 1025

Name of the Institution : Yash Institute of Nursing, Athori Bazar, Yavatmal

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL , YAVATMAL

Subjects : I II III IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 12/08/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PENDOR RESHMA DEVIDAS

Seat Number : 1026

Name of the Institution : Yash Institute of Nursing, Athori Bazar, Yavatmal

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL , YAVATMAL

Subjects : II

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 10/03/1996
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS PENDOR SARIKA MADHUKAR
Seat Number: 1027
Name of the Institution: Yash Institute of Nursing, Athori Bazar, Yavatmal
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, YAVATMAL
Subjects: I
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1027

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 08/04/1997
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS RAMTEKE PAYAL DILIPRAO
Seat Number: 1028
Name of the Institution: Yash Institute of Nursing, Athori Bazar, Yavatmal
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, YAVATMAL
Subjects: I
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1028
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 30/11/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BHARBADE NITA PURUSHOTTAM

Seat Number : 1031

Name of the Institution : SWA. RUPESHKUMAR INGOLE SCHOOL OF NURSING, YAVATMAL

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL

Subjects : I

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1031

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 26/12/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DHARNE MINAKSHI GUNAVANTRAO

Seat Number : 1032

Name of the Institution : SWA. RUPESHKUMAR INGOLE SCHOOL OF NURSING, YAVATMAL

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1032
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS FUPARE ANJALI VASUDEV
Seat Number : 1033
Name of the Institution : SWA. RUPESHKUMAR INGOLE SCHOOL OF NURSING, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1033

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/11/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MANKAR NUTAN AVINASH
Seat Number : 1034
Name of the Institution : SWA. RUPESHKUMAR INGOLE SCHOOL OF NURSING, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1034
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PATRE JAYSHRI GULABRAO
Seat Number : 1035
Name of the Institution : SWA. RUPESHKUMAR INGOLE SCHOOL OF NURSING, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHEDMAKE PALLAVI DEVIDAS
Seat Number : 1036
Name of the Institution : SWA. RUPESHKUMAR INGOLE SCHOOL OF NURSING, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 11/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAKODE POONAM SUBHASH
Seat Number : 1037
Name of the Institution : SWA. RUPESHKUMAR INGOLE SCHOOL OF NURSING, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/05/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KANAKE SWATI GANESH
Seat Number : 1039
Name of the Institution : MAHAJAN NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/12/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM NIRMALA MAHADEO
Seat Number : 1040
Name of the Institution : MAHAJAN NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/06/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM SHARDA DATTAJI
Seat Number : 1041
Name of the Institution : MAHAJAN NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1041

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NAITAM SIMA NILKANTHA
Seat Number : 1042
Name of the Institution : MAHAJAN NURSING SCHOOL, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1042
### Candidate 1:

- **For the**: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
- **Date Of Birth**: 23/10/1997
- **Date Of Exam**: 14/01/2020 To 17/01/2020
- **Name of the Candidate**: MISS PENDOR MONIKA YASHWANT
- **Seat Number**: 1043
- **Name of the Institution**: MAHAJAN NURSING SCHOOL, YAVATMAL
- **Name of the Examination**: AUXILLARY NURSE MIDWIFERY FIRST YEAR
- **Name of the Exam. Centre**: GENERAL HOSPITAL, YAVATMAL
- **Subjects**: I II III IV
- **Signature of the Holder**: 

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

### Candidate 2:

- **For the**: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
- **Date Of Birth**: 30/10/1999
- **Date Of Exam**: 14/01/2020 To 17/01/2020
- **Name of the Candidate**: MISS PENDOR SONALI YASHWANT
- **Seat Number**: 1044
- **Name of the Institution**: MAHAJAN NURSING SCHOOL, YAVATMAL
- **Name of the Examination**: AUXILLARY NURSE MIDWIFERY FIRST YEAR
- **Name of the Exam. Centre**: GENERAL HOSPITAL, YAVATMAL
- **Subjects**: I II III IV
- **Signature of the Holder**: 

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 30/06/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SHINDE PRAGATI SURESH
Seat Number: 1045
Name of the Institution: MAHAJAN NURSING SCHOOL, YAVATMAL
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, YAVATMAL
Subjects: III
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1045

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 03/03/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS TUMRAM VIDHYA VILAS
Seat Number: 1046
Name of the Institution: MAHAJAN NURSING SCHOOL, YAVATMAL
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, YAVATMAL
Subjects: I III IV
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1046
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

**For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:** 24/02/2000

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** MISSGEDAMPRATIKSHA SANTOSH

**Seat Number:** 1047

**Name of the Institution:** INDIRABAI BHOYAR SCHOOL OF NURSING, GHATANJI, YAVATMAL

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** GENERAL HOSPITAL, YAVATMAL

**Subjects:** I II III IV

**Signature of the Holder:**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

**For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:** 01/01/1999

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** MISSMESHRAMANKITA DIGAMBAR

**Seat Number:** 1048

**Name of the Institution:** INDIRABAI BHOYAR SCHOOL OF NURSING, GHATANJI, YAVATMAL

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** GENERAL HOSPITAL, YAVATMAL

**Subjects:** I II III IV

**Signature of the Holder:**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

---
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 06/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM KOMAL BHAURAO
Seat Number : 1049
Name of the Institution : INDIRABAI BHOYAR SCHOOL OF NURSING, GHATANJI, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 21/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PARCHAKE PUJA MANOHAR
Seat Number : 1050
Name of the Institution : INDIRABAI BHOYAR SCHOOL OF NURSING, GHATANJI, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT ROHINI VITHHAL
Seat Number : 1051
Name of the Institution : INDIRABAI BOYAR SCHOOL OF NURSING, GHATANJI, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1051

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SALAM MAMTA ASHOK
Seat Number : 1052
Name of the Institution : INDIRABAI BOYAR SCHOOL OF NURSING, GHATANJI, YAVATMAL
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1052
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
30/05/2001

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS GAYAKWAD RUPALI SOMESHWAR

Seat Number
1053

Name of the Institution
Varsharaj Nursing School, Wani, Yavatmal

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
GENERAL HOSPITAL, YAVATMAL

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1053

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
20/10/1994

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS LONARE DAKSHATA SHALIK

Seat Number
1054

Name of the Institution
Varsharaj Nursing School, Wani, Yavatmal

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
GENERAL HOSPITAL, YAVATMAL

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1054
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 26/09/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS AGALDHARE DNYANESHWARI NAMDEV

Seat Number : 1057

Name of the Institution : Devyani School of Nursing, Yavatmal

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL

Subjects : II

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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Sr. No. 1057

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 18/02/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BHAGAT PAYAL RAJESH

Seat Number : 1058

Name of the Institution : Devyani School of Nursing, Yavatmal

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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Sr. No. 1058
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAURKAR PAYAL SANJAY
Seat Number : 1059
Name of the Institution : Devyani School of Nursing, Yavatmal
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1059

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHODAM BHARTI PARASRAM
Seat Number : 1060
Name of the Institution : Devyani School of Nursing, Yavatmal
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>1061</th>
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<tbody>
<tr>
<td><strong>MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION</strong></td>
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<td><strong>HALL TICKET</strong></td>
<td>13/01/2020</td>
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<td><strong>Date Of Birth</strong> :</td>
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<td><strong>Date Of Exam</strong> :</td>
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<tr>
<td><strong>Name of the Candidate</strong> :</td>
<td>MISS GOSAVI USHA GOVINDA</td>
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<tr>
<td><strong>Seat Number</strong> :</td>
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<td><strong>Subjects</strong> :</td>
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<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020</td>
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<tr>
<td><strong>Date Of Birth</strong> :</td>
<td>05/08/2000</td>
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<tr>
<td><strong>Date Of Exam</strong> :</td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong> :</td>
<td>MISS KAMBLE PRITI GOUTAM</td>
</tr>
<tr>
<td><strong>Seat Number</strong> :</td>
<td>1062</td>
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<tr>
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<td>Devyani School of Nursing, Yavatmal</td>
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<tr>
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<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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**Note:**
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### HALL TICKET

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:** 07/09/1999

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** MISS KERAM SHITAL NAMDEV

**Seat Number:** 1063

**Name of the Institution:** Devyani School of Nursing, Yavatmal

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** GENERAL HOSPITAL, YAVATMAL

**Subjects:** I II III

**Signature of the Holder:**

---

### Note:

1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### HALL TICKET

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:** 03/08/2000

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** MISS MASARAM SONU JAGDISH

**Seat Number:** 1064

**Name of the Institution:** Devyani School of Nursing, Yavatmal

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** GENERAL HOSPITAL, YAVATMAL

**Subjects:** I II III IV

**Signature of the Holder:**

---

### Note:

1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/08/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM MADHURI NILKHANT
Seat Number : 1065
Name of the Institution : Devyani School of Nursing, Yavatmal
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : II, III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1065

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/10/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RANGARI RINA HARICHANDRA
Seat Number : 1066
Name of the Institution : Devyani School of Nursing, Yavatmal
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : I, II, III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1066
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/08/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS TEKAM JAYA AVADHUT

Seat Number : 1067

Name of the Institution : Devyani School of Nursing, Yavatmal

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL

Subjects : I II III

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/03/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS TEKAM POOJA DAMODHAR

Seat Number : 1068

Name of the Institution : Devyani School of Nursing, Yavatmal

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL ,YAVATMAL

Subjects : II

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS THUL PUJA SURESHRAO
Seat Number : 1069
Name of the Institution : Devyani School of Nursing, Yavatmal
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL , YAVATMAL
Subjects : II
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1069

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/10/1987
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS UAIKE VIJAYA RAJU
Seat Number : 1070
Name of the Institution : Devyani School of Nursing, Yavatmal
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL , YAVATMAL
Subjects : II III IV
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/08/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ARAKH UJJWALA SHESHRAO
Seat Number : 1071
Name of the Institution : ANURADHA NURSING SCHOOL, CHIKHALI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHALERAO SAPANA TATEBA
Seat Number : 1072
Name of the Institution : ANURADHA NURSING SCHOOL, CHIKHALI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 29/10/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KHURDE LAXMIBAI CHARANDAS

Seat Number : 1073

Name of the Institution : ANURADHA NURSING SCHOOL, CHIKHALI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA

Subjects : II V VI

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. 1073

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 07/07/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS WAKODE KOMAL VILAS

Seat Number : 1074

Name of the Institution : ANURADHA NURSING SCHOOL, CHIKHALI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA

Subjects : II

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1074
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<th>Sr. No.</th>
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<td><strong>HALL TICKET</strong> 13/01/2020</td>
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<td><strong>For the</strong> : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<tr>
<td><strong>Date Of Birth</strong> : 22/04/2000</td>
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<td><strong>Date Of Exam</strong> : 14/01/2020 To 17/01/2020</td>
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<td><strong>Name of the Candidate</strong> : MISS HIWARALE KALYANI ASHOK</td>
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<td><strong>Seat Number</strong> : 1075</td>
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<tr>
<td><strong>Name of the Institution</strong> : INDIRA BAHU. SHIKSHAN SANSTHS, SCHOOL OF NURSING, SAGWAN, BULDHANA</td>
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<td><strong>Name of the Examination</strong> : AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td><strong>Name of the Exam. Centre</strong> : GENERAL HOSPITAL, BULDHANA</td>
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<tr>
<td><strong>Date Of Birth</strong> : 14/07/1999</td>
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<td><strong>Date Of Exam</strong> : 14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong> : MISS KALASKAR PRIYANKA PRAMOD</td>
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<tr>
<td><strong>Seat Number</strong> : 1076</td>
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<td><strong>Name of the Institution</strong> : INDIRA BAHU. SHIKSHAN SANSTHS, SCHOOL OF NURSING, SAGWAN, BULDHANA</td>
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<td><strong>Name of the Examination</strong> : AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<td><strong>Name of the Exam. Centre</strong> : GENERAL HOSPITAL, BULDHANA</td>
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<td><strong>Subjects</strong> : I IV</td>
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2) Practical Examination centre shall be as directed by the MSBNPE
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SR. No. 1077

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 06/09/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PAITHANE DIPALI SANJAY

Seat Number : 1077

Name of the Institution : INDIRA BAHU. SHIKSHAN SANSTHS, SCHOOL OF NURSING, SAGWAN, BULDHANA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA

Subjects : I II

Signature of the Holder :

Note:
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13/01/2020

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 14/09/1996

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SHELE LAXMI GULABSINGH

Seat Number : 1078

Name of the Institution : INDIRA BAHU. SHIKSHAN SANSTHS, SCHOOL OF NURSING, SAGWAN, BULDHANA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA

Subjects : I II

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Sr. No. 1079

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
10/10/2000

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS YANGAD SHILPA GAJANAN

**Seat Number**
1079

**Name of the Institution**
INDIRA BAHU. SHIKSHAN SANSTHS, SCHOOL OF NURSING, SAGWAN, BULDHANA

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, BULDANA

**Subjects**
I

**Signature of the Holder**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
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---

### Sr. No. 1080

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
17/02/1998

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS GOLE VIDYA ANIL

**Seat Number**
1080

**Name of the Institution**
INDIRA BAHU SHIKSHAN SANSTHS, SCHOOL OF NURSING, BELAD MALKAPUR

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, BULDANA

**Subjects**
I II III V VI IV

**Signature of the Holder**

---

**Note:**
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<th>Sr. No.</th>
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<td>I II III V VI IV</td>
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<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<tr>
<td><strong>Date Of Birth</strong></td>
<td>15/06/2000</td>
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<tr>
<td><strong>Date Of Exam</strong></td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS INGLE PRIYA VILAS</td>
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<tr>
<td><strong>Seat Number</strong></td>
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<td><strong>Name of the Institution</strong></td>
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<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<td><strong>Name of the Exam. Centre</strong></td>
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<td><strong>Subjects</strong></td>
<td>I V VI</td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS INGLE BHAGYASHALI DILIP
Seat Number : 1083
Name of the Institution : INDIRA BAHU SHIKSHAN SANSTHS, SCHOOL OF NURSING, BELAD MALKAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA
Subjects : I, II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS INGLE RITA BHANUDAS
Seat Number : 1084
Name of the Institution : INDIRA BAHU SHIKSHAN SANSTHS, SCHOOL OF NURSING, BELAD MALKAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 31/03/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MEDHE RAJESHWARI PRAKASH
Seat Number : 1085
Name of the Institution : INDIRA BAHU SHIKSHAN SANSTHS, SCHOOL OF NURSING, BELAD MALKAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA

Signature of the Holder :

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/08/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHEGOKAR SWATI RAMESHWAR
Seat Number : 1086
Name of the Institution : INDIRA BAHU SHIKSHAN SANSTHS, SCHOOL OF NURSING, BELAD MALKAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA

Signature of the Holder :

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TAMBE SHUBHANGI SANJAY
Seat Number : 1087
Name of the Institution : INDIRA BAHU SHIKSHAN SANSTHS, SCHOOL OF NURSING, BELAD MALKAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAKODE KARUNA NIMBAJI
Seat Number : 1088
Name of the Institution : INDIRA BAHU SHIKSHAN SANSTHS, SCHOOL OF NURSING, BELAD MALKAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 29/06/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BACHHIRE POOJA CHHAGAN

Seat Number : 1089

Name of the Institution : RAJSHREE SCHOOL OF NURSING, MEHKAR, BULDANA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA

Subjects : I II III V VI IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1089

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 18/08/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KSHIRSAGAR PUJA SANTOSH

Seat Number : 1090

Name of the Institution : RAJSHREE SCHOOL OF NURSING, MEHKAR, BULDANA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Name of the Candidate: MISS TURUKMANE SAPANA PANDURANG

Signature of the Holder:

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 09/05/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS TURUKMANE SAPANA PANDURANG

Seat Number: 1091

Name of the Institution: RAJSHREE SCHOOL OF NURSING, MEHKAR, BULDANA

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, BULDANA

Subjects: I II III IV

Date Of Birth: 29/07/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS AWACHAR MANISHA HARIBHAU

Seat Number: 1092

Name of the Institution: HARSH SCHOOL OF NURSING, KHAMGAON, BULDANA

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, BULDANA

Subjects: I II III V VI IV

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 14/01/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS  PRADHAN MANISHA ARJUN
Seat Number : 1093
Name of the Institution : HARSH SCHOOL OF NURSING, KHAMGAON, BULDANA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA
Subjects : I  II  IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 21/03/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS  SURVE UJWALA SURESH
Seat Number : 1094
Name of the Institution : HARSH SCHOOL OF NURSING, KHAMGAON, BULDANA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA
Subjects : I  II  III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 17/01/1985

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS SURWADE SARIFA BABURAO

Seat Number
: 1095

Name of the Institution
: HARSH SCHOOL OF NURSING, KHAMGAON, BULDANA

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: GENERAL HOSPITAL, BULDANA

Subjects
: I

Signature of the Holder
: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHARE SANDHYA GANESH
Seat Number : 1097
Name of the Institution : JIJAMATA SCHOOL OF NURSING, BULDANA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 31/03/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD VANDANA TATERAO
Seat Number : 1098
Name of the Institution : DR. K. B. MAPRI INSTITUTE OF NURSING, LONAR, BULDHANA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA
Subjects : I II
Signature of the Holder :
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
06/03/2000

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS GHODE ARATI MAHADEO

Seat Number
1099

Name of the Institution
DR. K. B. MAPRI INSTITUTE OF NURSING, LONAR, BULDhana

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
GENERAL HOSPITAL, BULDANA

Subjects
I

Signature of the Holder

Note:
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Sr. No. 1099

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
08/05/1999

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS KANKAL DIKSHA SATYANARAYAN

Seat Number
1100

Name of the Institution
DR. K. B. MAPRI INSTITUTE OF NURSING, LONAR, BULDhana

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
GENERAL HOSPITAL, BULDANA

Subjects
I II III

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1100
Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/01/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TELGOTE POOJA SAMADHAN
Seat Number : 1103
Name of the Institution : DR. K. B. MAPRI INSTITUTE OF NURSING, LONAR, BULDHANA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAKODE GAYATRI GAUTAM
Seat Number : 1104
Name of the Institution : DR. K. B. MAPRI INSTITUTE OF NURSING, LONAR, BULDHANA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAYBOLE VAISHALI RAMRATAN
Seat Number : 1105
Name of the Institution : KALASKAR NURSING INSTITUTE, NANDURA, BULDHANA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/01/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SADANSHIV VAISHALI SURESH
Seat Number : 1106
Name of the Institution : KALASKAR NURSING INSTITUTE, NANDURA, BULDHANA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 26/03/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MORE JAI MAROTI

Seat Number : 1107

Name of the Institution : Vision Nursing School, Buldhana

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1107

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 24/12/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS CHAVRE POOJA DHANRAJ

Seat Number : 1108

Name of the Institution : Dnyandeep Vimukta Va Bhatkya Jati, Jamati Shikshan Prasarak Mandal Nursing School, Buldhana

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1108
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 22/04/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GHATE JAYASHRI ASHOK

Seat Number : 1109

Name of the Institution : Dnyandeep Vimukt Va Bhatkya Jati, Jamati Shikshan Prasarak Mandal Nursing School, Buldhana

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA

Subjects : I II IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1109

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 23/05/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS INGLE TEJSWINI ASHOK

Seat Number : 1110

Name of the Institution : Dnyandeep Vimukt Va Bhatkya Jati, Jamati Shikshan Prasarak Mandal Nursing School, Buldhana

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA

Subjects : I II

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1110
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 28/09/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SURADKAR DIKSHA GAUTAM

Seat Number : 1111

Name of the Institution : Dnyandeeep Vimukta Va Bhatkya Jati, Jamati Shikshan Prasarak Mandal Nursing School, Buldhana

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, BULDANA

Subjects : I II

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held
         in January2020
Date Of Birth : 19/01/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHAVSAGAR TRUPTI NARENDRA
Seat Number : 1113
Name of the Institution : SHARDA NURSING SCHOOL, KHAPA TUMSAR,
                         BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects :  I  II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the
   MSBNPE through institute authority before commencement of the examination.

REGISTRAR
MAHARASHTRA STATE BOARD OF
NURSING AND PARAMEDICAL
EDUCATION, MUMBAI

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held
         in January2020
Date Of Birth : 24/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GANVIR ROSHANI GULJAR
Seat Number : 1114
Name of the Institution : SHARDA NURSING SCHOOL, KHAPA TUMSAR,
                         BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects :  II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the
   MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIEDIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/04/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LONARE SAPNA NARAYAN
Seat Number : 1115
Name of the Institution : SHARDA NURSING SCHOOL, KHAPA TUMSAR, BHANDARA
Name of the Examination : AUXILLARY NURSE MIEDIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIEDIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/03/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAMTEKE KOMAL SHARMA
Seat Number : 1116
Name of the Institution : SHARDA NURSING SCHOOL, KHAPA TUMSAR, BHANDARA
Name of the Examination : AUXILLARY NURSE MIEDIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
**For the** | AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
---|---
**Date Of Birth** | 19/06/2001
**Date Of Exam** | 14/01/2020 To 17/01/2020
**Name of the Candidate** | MISS ZADE SANCHITA NIRANJAN
**Seat Number** | 1117
**Name of the Institution** | SHARDA NURSING SCHOOL, KHAPA TUMSAR, BHANDARA
**Name of the Examination** | AUXILLARY NURSE MIDWIFERY FIRST YEAR
**Name of the Exam. Centre** | GENERAL HOSPITAL, Bhandara
**Subjects** | I II
**Signature of the Holder** | 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**For the** | AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
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**Date Of Birth** | 19/01/2000
**Date Of Exam** | 14/01/2020 To 17/01/2020
**Name of the Candidate** | MISS ZADE SHUBHANGI NIRANJAN
**Seat Number** | 1118
**Name of the Institution** | SHARDA NURSING SCHOOL, KHAPA TUMSAR, BHANDARA
**Name of the Examination** | AUXILLARY NURSE MIDWIFERY FIRST YEAR
**Name of the Exam. Centre** | GENERAL HOSPITAL, Bhandara
**Subjects** | I II
**Signature of the Holder** | 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
03/10/1999

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS CHAUDHARI PRIYA DNYANESHWAR

Seat Number:
1119

Name of the Institution:
POOJA NURSING INSTITUTE, BHANDARA

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Bhandara

Subjects:
II

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
25/12/1993

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS DONGARE SHUBHEKSHA YADORAO

Seat Number:
1120

Name of the Institution:
POOJA NURSING INSTITUTE, BHANDARA

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Bhandara

Subjects:
I II III V VI

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/11/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GOSWAMI PUNAM BHAGWAT
Seat Number : 1122
Name of the Institution : POOJA NURSING INSTITUTE, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/05/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAITHWAS ANJALI MADAN
Seat Number : 1123
Name of the Institution : POOJA NURSING INSTITUTE, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1123

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MALADHARE PRIYANKA VIJAY
Seat Number : 1124
Name of the Institution : POOJA NURSING INSTITUTE, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1124
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/02/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SONEKAR SHUBHANGI YADAV
Seat Number : 1125
Name of the Institution : POOJA NURSING INSTITUTE , BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : I I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TANDEKAR SHWETA RAJESH
Seat Number : 1126
Name of the Institution : POOJA NURSING INSTITUTE , BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : I I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1127

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM NILIMA ARUN
Seat Number : 1127
Name of the Institution : PAWANRAJA NURSING SCHOOL, PAUNI, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1128

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM DIVYA DHANLAL
Seat Number : 1128
Name of the Institution : PAWANRAJA NURSING SCHOOL, PAUNI, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 21/12/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS JANBANDHU ACHAL HIRAKCHAND

Seat Number : 1129

Name of the Institution : ASHIRWAD NURSING SCHOOL OF ANM, SAKOLI BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara

Subjects : I
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 28/08/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KHOBRAGADE DAMINI RAJESH

Seat Number : 1130

Name of the Institution : ASHIRWAD NURSING SCHOOL OF ANM, SAKOLI BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara

Subjects : I II IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TEMBHURNE HITESHWARI DEVDAS
Seat Number : 1131
Name of the Institution : ASHIRWAD NURSING SCHOOL OF ANM, SAKOLI BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : I II
Signature of the Holder : 

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1132

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/02/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHADE SHIVANI SURENDRRA
Seat Number : 1132
Name of the Institution : ASHIRWAD NURSING SCHOOL OF ANM, SAKOLI BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : I II V VI IV
Signature of the Holder : 

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHAMARE SHITAL RAMESH
Seat Number : 1133
Name of the Institution : ASHIRWAD NURSING SCHOOL OF ANM, SAKOLI BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1133

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WALDE MANISHA DAYARAM
Seat Number : 1134
Name of the Institution : ASHIRWAD NURSING SCHOOL OF ANM, SAKOLI BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : V VI
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 12/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHURVE ASHWINI SUDHAKAR
Seat Number : 1135
Name of the Institution : SAI NURSING SCHOOL, TUMSAR, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/12/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PANDHARE MINAKSHI SHANKAR
Seat Number : 1137
Name of the Institution : SAI NURSING SCHOOL, TUMSAR, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1137

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/11/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SANGODE KARINA RAJESH
Seat Number : 1138
Name of the Institution : SAI NURSING SCHOOL, TUMSAR, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1138
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/09/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BEDURKAR KAJAL SHRIKRUSHNA
Seat Number : 1139
Name of the Institution : AROMIRA SCHOOL OF NURSING, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : I II III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/11/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAJBHIYE ANJALI RAJENDRA
Seat Number : 1140
Name of the Institution : AROMIRA SCHOOL OF NURSING, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : I II III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>1141</th>
<th>Name of the Candidate</th>
<th>MISS GHODSE ALISHA RAMBHAU</th>
</tr>
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<tr>
<td>Name of the Institution</td>
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<td>Name of the Examination</td>
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<td>Name of the Exam. Centre</td>
<td>GENERAL HOSPITAL, Bhandara</td>
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<tr>
<td>Subjects</td>
<td>I</td>
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</tbody>
</table>

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>1142</th>
<th>Name of the Candidate</th>
<th>MISS SARVE PALLAVI BALKRUSHNA</th>
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<td>Subjects</td>
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<td></td>
</tr>
</tbody>
</table>

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHENDE TRUPTI NARESH
Seat Number : 1143
Name of the Institution : AROMIRA SCHOOL OF NURSING, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : I III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KANEKAR DAMINI DHANRAJ
Seat Number : 1144
Name of the Institution : NAV YUVA NURSING SCHOOL, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 07/01/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KHOBRAGADE PRAGATI NILKANTH

Seat Number : 1145

Name of the Institution : NAV YUVA NURSING SCHOOL, BHANDARA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara

Subjects : III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the
MSBNPE through institute authority before commencement of the examination.

Sr. No. 1145

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 30/10/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MADAVI HARSHANA PRAKASH

Seat Number : 1146

Name of the Institution : NAV YUVA NURSING SCHOOL, BHANDARA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara

Subjects : IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the
MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/10/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NANDESHWAR PAYAL DASHRATH
Seat Number : 1147
Name of the Institution : NAV YUVA NURSING SCHOOL, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1147

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHIDAME SWATI HIRAMAN
Seat Number : 1148
Name of the Institution : NAV YUVA NURSING SCHOOL, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : I II III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1148
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/01/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BADOLE MANJUSA RAMKRUSHNA
Seat Number : 1149
Name of the Institution : G.S. NURSING SCHOOL, SAKOLI, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/11/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BADOLE NAMRATA RAMKRISHNA
Seat Number : 1150
Name of the Institution : G.S. NURSING SCHOOL, SAKOLI, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1151

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BAGDE OJASWI PRASHANT
Seat Number : 1151
Name of the Institution : G.S.NURSING SCHOOL, SAKOLI, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1152

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS FULE RUPALI HOMRAJ
Seat Number : 1152
Name of the Institution : G.S.NURSING SCHOOL, SAKOLI, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Hall Ticket

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>1153</th>
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**For the**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**  
26/08/2000

**Date Of Exam**  
14/01/2020 To 17/01/2020

**Name of the Candidate**  
MISS HUMANE AMISHA LAYESH

**Seat Number**  
1153

**Name of the Institution**  
G.S. NURSING SCHOOL, SAKOLI, BHANDARA

**Name of the Examination**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**  
GENERAL HOSPITAL, Bhandara

**Subjects**  
I II III IV

**Signature of the Holder**  

---

**Note:**  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>1154</th>
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</table>

**For the**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**  
20/10/1999

**Date Of Exam**  
14/01/2020 To 17/01/2020

**Name of the Candidate**  
MISS JAMBHULKAR SHUBHANGI MANIK

**Seat Number**  
1154

**Name of the Institution**  
G.S. NURSING SCHOOL, SAKOLI, BHANDARA

**Name of the Examination**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**  
GENERAL HOSPITAL, Bhandara

**Subjects**  
II

**Signature of the Holder**  

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**Note:**  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 24/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KANCHAN DHANIRAM RAUT
Seat Number : 1155
Name of the Institution : G.S.NURSING SCHOOL, SAKOLI, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1155

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 20/11/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MADAME NEHA JAYCHAND
Seat Number : 1156
Name of the Institution : G.S.NURSING SCHOOL, SAKOLI, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1156
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 28/02/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MADAVI ASHWINA WASUDEO

Seat Number : 1157

Name of the Institution : G.S.NURSING SCHOOL, SAKOLI, BHANDARA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara

Subjects : II III IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 16/03/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MADAVI HEMESHWARI RAMDAS

Seat Number : 1158

Name of the Institution : G.S.NURSING SCHOOL, SAKOLI, BHANDARA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara

Subjects : II III IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL
EDUCATION, MUMBAI

For the : AUXILIARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MASRAM JOSANA OMPRAKASH
Seat Number : 1159
Name of the Institution : G.S. NURSING SCHOOL, SAKOLI, BHANDARA
Name of the Examination : AUXILIARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/11/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM SHUBHANGANA KOTHIRAM
Seat Number : 1161
Name of the Institution : G.S. NURSING SCHOOL, SAKOLI, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : II III IV
Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
07/04/1992

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS PADOTI SHARDA FAGAWA

Seat Number
1163

Name of the Institution
G.S. NURSING SCHOOL, SAKOLI, BHANDARA

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
GENERAL HOSPITAL, Bhandara

Subjects
II III IV

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth
28/02/2000

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS RAMTEKE YAMINI NETAJI

Seat Number
1164

Name of the Institution
G.S. NURSING SCHOOL, SAKOLI, BHANDARA

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
GENERAL HOSPITAL, Bhandara

Subjects
II III

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
05/06/1999

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS RAMTEKE PAYAL SUDHIR

Seat Number :
1165

Name of the Institution :
G.S.NURSING SCHOOL, SAKOLI, BHANDARA

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
GENERAL HOSPITAL, Bhandara

Subjects :
II

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1165

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
08/10/2000

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS RAUT PALLAVI EKNATH

Seat Number :
1166

Name of the Institution :
G.S.NURSING SCHOOL, SAKOLI, BHANDARA

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
GENERAL HOSPITAL, Bhandara

Subjects :
II

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 16/10/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SAYAM YOGITA SHANKAR

Seat Number : 1167

Name of the Institution : G.S. NURSING SCHOOL, SAKOLI, BHANDARA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara

Subjects : II III IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 31/07/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BANSOD NAYNIKA MILIND

Seat Number : 1168

Name of the Institution : Spandan Nursing School, Pauni, Bhandara

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara

Subjects : II III IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 24/11/1991
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHALAVI BHAGYASHRI SUDHAKRAO

Seat Number : 1169
Name of the Institution : Spandan Nursing School, Pauni, Bhandara
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : II  III  IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 10/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHOBRAGADE REENA RATAN

Seat Number : 1170
Name of the Institution : Spandan Nursing School, Pauni, Bhandara
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Hall Ticket

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

13/01/2020

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

20/11/1999

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS NARNAVARE VANJAKSHI MADHUKAR

**Seat Number**

1171

**Name of the Institution**

Spandan Nursing School, Pauni, Bhandara

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

GENERAL HOSPITAL, Bhandara

**Subjects**

II III IV

**Signature of the Holder**

Note:

1) Candidate will not be allowed in examination hall without this Hall Ticket.
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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

13/01/2020

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

24/08/1998

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS PARSO SHASHIKALA KAMENSINGH

**Seat Number**

1172

**Name of the Institution**

Spandan Nursing School, Pauni, Bhandara

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

GENERAL HOSPITAL, Bhandara

**Subjects**

II III IV

**Signature of the Holder**

Note:

1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**Sr. No.** 1173

**For the**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
- 19/09/2000

**Date Of Exam**
- 14/01/2020 To 17/01/2020

**Name of the Candidate**
- MISS TEMBHURNE MAYURI MORESHWAR

**Seat Number**
- 1173

**Name of the Institution**
- Spandan Nursing School, Pauni, Bhandara

**Name of the Examination**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
- GENERAL HOSPITAL, Bhandara

**Subjects**
- II III

**Signature of the Holder**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**Sr. No.** 1174

**For the**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
- 30/11/1999

**Date Of Exam**
- 14/01/2020 To 17/01/2020

**Name of the Candidate**
- MISS VAIDYA SAPNA LAXMAN

**Seat Number**
- 1174

**Name of the Institution**
- Spandan Nursing School, Pauni, Bhandara

**Name of the Examination**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
- GENERAL HOSPITAL, Bhandara

**Subjects**
- I II III IV

**Signature of the Holder**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 21/09/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BHASHARKAR ANKITAPADMAJ

Seat Number : 1175

Name of the Institution : Indira Gandhi ANM Nursing School, Tal Bhiwapur, Nagpur

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG. EDU., NAGPUR

Signature of the Holder : REGISTRAR MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Subjects : I II III

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 23/03/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PATIL PRIYA RATIRAM

Seat Number : 1176

Name of the Institution : Indira Gandhi ANM Nursing School, Tal Bhiwapur, Nagpur

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG. EDU., NAGPUR

Signature of the Holder : REGISTRAR MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Subjects : IV

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
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<tr>
<th>Sr. No.</th>
<th>1177</th>
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<td><strong>For the</strong></td>
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<tr>
<td><strong>Date Of Birth</strong></td>
<td>23/09/2000</td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS RAMTEKE SIMRAN SANJAYKUMAR</td>
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<tr>
<td><strong>Seat Number</strong></td>
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<tr>
<td><strong>Name of the Institution</strong></td>
<td>Indira Gandhi ANM Nursing School, Tal Bhiwapur, Nagpur</td>
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<tr>
<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<td><strong>Name of the Exam. Centre</strong></td>
<td>MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR</td>
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<td><strong>Subjects</strong></td>
<td>III IV</td>
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<td><strong>Signature of the Holder</strong></td>
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</table>

**Note:**
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<thead>
<tr>
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<td><strong>For the</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<tr>
<td><strong>Date Of Birth</strong></td>
<td>16/06/2000</td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS RAMTEKE MANISHA UDDHAV</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
<td>1178</td>
</tr>
<tr>
<td><strong>Name of the Institution</strong></td>
<td>Indira Gandhi ANM Nursing School, Tal Bhiwapur, Nagpur</td>
</tr>
<tr>
<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td><strong>Name of the Exam. Centre</strong></td>
<td>MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR</td>
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<td><strong>Subjects</strong></td>
<td>I II III IV</td>
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<tr>
<td><strong>Signature of the Holder</strong></td>
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</tr>
</tbody>
</table>
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1179

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAWSAKADE MANJUSA ZITUJI
Seat Number : 1179
Name of the Institution : Indira Gandhi ANM Nursing School, Tal Bhiwapur, Nagpur
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1180

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/09/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHASARKAR MAYURI DILIP
Seat Number : 1180
Name of the Institution : SAIRAM SCHOOL OF NURSING, RAMTEK, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/03/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS HOOD CHETANA LEKHIRAM

Seat Number : 1181

Name of the Institution : SAIRAM SCHOOL OF NURSING, RAMTEK, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR

Subjects : I II IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 08/10/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS INWATE VISHAKHA RAJKUMAR

Seat Number : 1182

Name of the Institution : SAIRAM SCHOOL OF NURSING, RAMTEK, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR

Subjects : I II III IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS INWATE SUVARNA ASHOK
Seat Number : 1183
Name of the Institution : SAIRAM SCHOOL OF NURSING, RAMTEK, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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Sr. No. 1183

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS INWATE PRACHI RAJU
Seat Number : 1184
Name of the Institution : SAIRAM SCHOOL OF NURSING, RAMTEK, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1184
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 06/03/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS KUMRE PRIYANKA BANDU

Seat Number: 1185

Name of the Institution: SAIRAM SCHOOL OF NURSING, RAMTEK, NAGPUR

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: MADHURIBAI DESHMUKH INST. OF NSG. EDU., NAGPUR

Subjects: I II III IV

Signature of the Holder: REGISTRAR

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
   2) Practical Examination centre shall be as directed by the MSBNPE.
   3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 15/08/1989

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS MALGHAM HIRA DEVICHARANJI

Seat Number: 1186

Name of the Institution: SAIRAM SCHOOL OF NURSING, RAMTEK, NAGPUR

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: MADHURIBAI DESHMUKH INST. OF NSG. EDU., NAGPUR

Subjects: II IV

Signature of the Holder: REGISTRAR

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
   2) Practical Examination centre shall be as directed by the MSBNPE.
   3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/05/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MESHRAM VAISHALI YOGESH

Seat Number : 1187

Name of the Institution : SAIRAM SCHOOL OF NURSING, RAMTEK, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR

Subjects : II III IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1187

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/07/1995

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PATIL AKANKSHA VINODRAO

Seat Number : 1188

Name of the Institution : SAIRAM SCHOOL OF NURSING, RAMTEK, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR

Subjects : II III IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1188
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAKHARE MAHIMA RUPCHAND
Seat Number : 1189
Name of the Institution : SAIRAM SCHOOL OF NURSING, RAMTEK, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/04/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS UIKEY ROSHANI DAYALSINGH
Seat Number : 1190
Name of the Institution : SAIRAM SCHOOL OF NURSING, RAMTEK, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1191

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WANKHEDE PUNAM HARSHWARDHAN
Seat Number : 1191
Name of the Institution : SAIRAM SCHOOL OF NURSING, RAMTEK, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG. EDU., NAGPUR
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1192

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WARTHE SHIVANI DEVENDRA
Seat Number : 1192
Name of the Institution : SAIRAM SCHOOL OF NURSING, RAMTEK, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG. EDU., NAGPUR
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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<th>Sr. No.</th>
<th>1193</th>
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

**For the**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**  
13/09/1996

**Date Of Exam**  
14/01/2020 To 17/01/2020

**Name of the Candidate**  
MISS GAWALI RAVINA RAVINDRA

**Seat Number**  
1193

**Name of the Institution**  
ACHARYA VINoba BHAVE SCHOOL OF NURSING, KATOL, NAGPUR

**Name of the Examination**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**  
MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR

**Subjects**  
IV

**Signature of the Holder**

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**Note:**  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>1194</th>
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</thead>
</table>

### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

**For the**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**  
24/09/1999

**Date Of Exam**  
14/01/2020 To 17/01/2020

**Name of the Candidate**  
MISS KANGALI ANITA CHANDRABHAN

**Seat Number**  
1194

**Name of the Institution**  
ACHARYA VINoba BHAVE SCHOOL OF NURSING, KATOL, NAGPUR

**Name of the Examination**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**  
MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR

**Subjects**  
II III IV

**Signature of the Holder**

---

**Note:**  
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2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 13/11/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KUMBHEKAR PUSHPA GAJANAN
Seat Number: 1195
Name of the Institution: ACHARYA VINOBA BHAVE SCHOOL OF NURSING, KATOL, NAGPUR
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects: I II III IV
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/12/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AMBADE SUBHANGINI SANJAY
Seat Number : 1197
Name of the Institution : SUMANTAI WASNIK INSTITUTE OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1197

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHAGAT DIVYANEE SANJAY
Seat Number : 1198
Name of the Institution : SUMANTAI WASNIK INSTITUTE OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects : II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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Sr. No. 1198
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
   2) Practical Examination centre shall be as directed by the MSBNPE
   3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
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<tr>
<td>Seat Number</td>
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<td>Subjects</td>
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<td>Signature of the Holder</td>
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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td>Name of the Candidate</td>
<td>MISS KALE ULKA BABARAO</td>
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<tr>
<td>Seat Number</td>
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<tr>
<td>Name of the Institution</td>
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<td>Subjects</td>
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**Note:**
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/11/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KANGALE SHUBHANGI DEVIDAS
Seat Number : 1203
Name of the Institution : SUMANTAI WASNIK INSTITUTE OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1203

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHOBRAGADE KAJAL JANARDHAN
Seat Number : 1204
Name of the Institution : SUMANTAI WASNIK INSTITUTE OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1204
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 18/09/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MOTIKAR KIRTI MANOHAR
Seat Number : 1205
Name of the Institution : SUMANTAI WASNIK INSTITUTE OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1205

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 06/03/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RANGARI ASHWINI ASHOK
Seat Number : 1206
Name of the Institution : SUMANTAI WASNIK INSTITUTE OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT SHITAL BHIMRAO
Seat Number : 1207
Name of the Institution : SUMANTAI WASNIK INSTITUTE OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1207

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/06/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT NIKITA GOVINDAJI
Seat Number : 1208
Name of the Institution : SUMANTAI WASNIK INSTITUTE OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1208
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 11/06/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS CHAVHAN PRITI ANIL

Seat Number : 1209

Name of the Institution : POOJA NURSING SCHOOL, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR

Subjects : I II III IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1209

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 17/05/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DONGRE RUPALI ARUN

Seat Number : 1210

Name of the Institution : POOJA NURSING SCHOOL, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR

Subjects : II

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1210

-----------------------------------------
For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 02/11/1998

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS GHARDE MINAKSHI DADARAO

Seat Number
: 1211

Name of the Institution
: POOJA NURSING SCHOOL, NAGPUR

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR

Subjects
: I III IV

Signature of the Holder
:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 23/02/2000

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS JIBHAKATE ASHA SHAMRAO

Seat Number
: 1212

Name of the Institution
: POOJA NURSING SCHOOL, NAGPUR

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR

Subjects
: I

Signature of the Holder
:

Note:
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHADSE UJWALA DNYANESHWAR
Seat Number : 1213
Name of the Institution : POOJA NURSING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR
Subjects : I II III
Signature of the Holder : REGISTRAR MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1213

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/10/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MADAVI TINA JAYENDRA
Seat Number : 1214
Name of the Institution : POOJA NURSING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR
Subjects : I II III IV
Signature of the Holder : REGISTRAR MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. 1214

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 10/03/2000

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS MADKE RINA VIKAS

Seat Number
: 1215

Name of the Institution
: POOJA NURSING SCHOOL, NAGPUR

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR

Subjects
: I II III IV

Signature of the Holder

Note:
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2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 16/03/2001

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS MAVASKAR SHITAL SUBHASH

Seat Number
: 1216

Name of the Institution
: POOJA NURSING SCHOOL, NAGPUR

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR

Subjects
: I II III IV

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/06/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM UJWALA MUNESH
Seat Number : 1217
Name of the Institution : POOJA NURSING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1217

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM NIKITA ASHOK
Seat Number : 1218
Name of the Institution : POOJA NURSING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1218
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 25/11/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS NIKOSE SAVITA RAJU

Seat Number : 1219

Name of the Institution : POOJA NURSING SCHOOL, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR

Subjects : III

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 07/11/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS RAMTEKE MAYURI CHANDRAMANI

Seat Number : 1220

Name of the Institution : POOJA NURSING SCHOOL, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR

Subjects : I II III IV

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RANGARI ROSHNI JAGAN
Seat Number : 1221
Name of the Institution : POOJA NURSING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG. EDU., NAGPUR
Subjects : I III
Signature of the Holder :

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Sr. No. 1221

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/04/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SIDAM NANDA BHAURAO
Seat Number : 1222
Name of the Institution : POOJA NURSING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG. EDU., NAGPUR
Subjects : I III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1222
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SUDAME KAJAL CHARANDAS
Seat Number : 1223
Name of the Institution : POOJA NURSING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS THAKARE NEHA TULSIRAM
Seat Number : 1224
Name of the Institution : POOJA NURSING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR
Subjects : II
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS THAWARE MANSI DIPIRAJ
Seat Number : 1225
Name of the Institution : POOJA NURSING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG. EDU., NAGPUR
Subjects : I II III
Signature of the Holder : 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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Sr. No. 1225

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/05/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BANOTHE PRITI BHARAT
Seat Number : 1226
Name of the Institution : Aakar School of Nursing, Nagpur
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG. EDU., NAGPUR
Subjects : I II III
Signature of the Holder : 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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<td>MISS CHARBHE ARATI RAVINDRA</td>
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<td><strong>Name of the Candidate</strong></td>
<td>MISS KODAPE SNEHA WAMAN</td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/06/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS FULMALI SAYALI VIJAY
Seat Number : 1229
Name of the Institution : Tanisq School of Nursing, Nagpur
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR
Subjects : I II
Signature of the Holder :

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Sr. No. 1229

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHANDATE AANCHAL GANESH
Seat Number : 1230
Name of the Institution : Tanisq School of Nursing, Nagpur
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR
Subjects : I II
Signature of the Holder :

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Sr. No. 1230
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 12/03/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KAWATE ACHAL TULSHIRAM

Seat Number : 1233

Name of the Institution : Shree Sai School of Nursing, Umrer, Nagpur

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR

Subjects : II

Signature of the Holder :

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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Sr. No. 1233

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/04/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS RANE NISHA RAJENDRA

Seat Number : 1234

Name of the Institution : Shree Sai School of Nursing, Umrer, Nagpur

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR

Subjects : II III IV

Signature of the Holder :

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 16/12/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS BODELE ARTI ATUL

Seat Number: 1235
Name of the Institution: INDIRA GANDHI SCHOOL OF NURSING, Golcha marg, sadar, NAGPUR
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MADHURIBAI DESHMUKH INST. OF NSG. EDU., NAGPUR
Subjects: I II III IV
Signature of the Holder: 

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Sr. No. 1235

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 19/12/1997
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS CHIGHORE APEKSHA KISHOR

Seat Number: 1236
Name of the Institution: INDIRA GANDHI SCHOOL OF NURSING, Golcha marg, sadar, NAGPUR
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MADHURIBAI DESHMUKH INST. OF NSG. EDU., NAGPUR
Subjects: I II
Signature of the Holder: 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
30/09/1998

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS DHURVE KHUSHABU CHINULAL

Seat Number:
1237

Name of the Institution:
INDIRA GANDHI SCHOOL OF NURSING, Golchha marg, sadar, NAGPUR

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR

Subjects:
I II III IV

Signature of the Holder:

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/03/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LINGAYAT SHREYA PRASHANT
Seat Number : 1239
Name of the Institution : INDIRA GANDHI SCHOOL OF NURSING, Golchha marg, sadar, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG. EDU., NAGPUR
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1239

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/06/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MARSKOLHE HARSHALI NARESH
Seat Number : 1240
Name of the Institution : INDIRA GANDHI SCHOOL OF NURSING, Golchha marg, sadar, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG. EDU., NAGPUR
Subjects : I II III IV
Signature of the Holder : 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
26/06/1990

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS RAMTEKE PUNAM GHANSHYAM

Seat Number:
1243

Name of the Institution:
INDIRA GANDHI SCHOOL OF NURSING, Golchha marg, sadar, NAGPUR

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR

Subjects:
I II III IV

Signature of the Holder:

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
04/06/1999

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS RODE PALLAVI INDAL

Seat Number:
1244

Name of the Institution:
INDIRA GANDHI SCHOOL OF NURSING, Golchha marg, sadar, NAGPUR

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR

Subjects:
III

Signature of the Holder:

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

Sr. No. 1245

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAKHARE JUHI RATIRAM
Seat Number : 1245
Name of the Institution : INDIRA GANDHI SCHOOL OF NURSING, Golchha marg, sadar, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG. EDU., NAGPUR
Subjects : I II III IV
Signature of the Holder :

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Sr. No. 1246

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/01/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SALAM SHUBHANGI SUBHASH
Seat Number : 1246
Name of the Institution : INDIRA GANDHI SCHOOL OF NURSING, Golchha marg, sadar, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG. EDU., NAGPUR
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/07/1990

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SHENDE MALA SURESH

Seat Number : 1247

Name of the Institution : INDIRA GANDHI SCHOOL OF NURSING, Golchha marg, sadar, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1247

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 29/12/1990

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS TEMBHURNE SHRUTI ARVIND

Seat Number : 1248

Name of the Institution : INDIRA GANDHI SCHOOL OF NURSING, Golchha marg, sadar, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1248
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 03/03/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WADME SHRADDHA CHANDRBHAN
Seat Number : 1249
Name of the Institution : INDIRA GANDHI SCHOOL OF NURSING,Golchha marg,sadar, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 01/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BAGADE KHUSHBU NIMBADAS
Seat Number : 1250
Name of the Institution : AVATAR MEHER BABA SCHOOL OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 27/04/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BAWANE PALLAVI VASANTRAO

Seat Number : 1251

Name of the Institution : AVATAR MEHER BABA SCHOOL OF NURSING, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Signature of the Holder :

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 1251

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/09/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAWAI CHAKULI VILAS

Seat Number : 1252

Name of the Institution : AVATAR MEHER BABA SCHOOL OF NURSING, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR

Subjects : II III

Signature of the Holder :

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 1252

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE SEEMA RAJU
Seat Number : 1253
Name of the Institution : AVATAR MEHER BABA SCHOOL OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1253

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/06/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KOBRAGADE PRITI RAJKUMARI
Seat Number : 1254
Name of the Institution : AVATAR MEHER BABA SCHOOL OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1254
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LANJEWAR ANISHA ANIL
Seat Number : 1255
Name of the Institution : AVATAR MEHER BABA SCHOOL OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LENDHARE NIKITA LILADHAR
Seat Number : 1256
Name of the Institution : AVATAR MEHER BABA SCHOOL OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/07/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NIRMALKAR RAKHEE DANI
Seat Number : 1257
Name of the Institution : AVATAR MEHER BABA SCHOOL OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1257

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TEKAM SULOCHANA RAMESH
Seat Number : 1258
Name of the Institution : AVATAR MEHER BABA SCHOOL OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MADHURIBAI DESHMUKH INST. OF NSG.EDU., NAGPUR
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 19/07/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PATLE NIKITA KUNJILAL

Seat Number : 1259

Name of the Institution : MAHAL MATERNITY HOM, SON, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur

Subjects : II III

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1259

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 18/05/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BHUTE SHIVANI SANJAY

Seat Number : 1260

Name of the Institution : SWAMI VIVEKANAND MED MISSION, PARSODI, SON, KHPRI, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur

Subjects : I III

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1260
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 08/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AMBILDHUKE PRAGATI KRISHNA

Seat Number : 1261
Name of the Institution : DR. DALVI MEMORIAL HOSPITAL, SON, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur

Signature of the Holder : 

Subjects : I III

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 31/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NIMBULKAR ASHWINI SHESHRAO

Seat Number : 1262
Name of the Institution : DR. DALVI MEMORIAL HOSPITAL, SON, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur

Signature of the Holder : 

Subjects : I III IV

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 12/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SARYAM VIDYA TARACHAND

Seat Number : 1263
Name of the Institution : DR.DALVI MEMORIAL HOSPITAL, SON, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital,Nagpur
Subjects : I IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
     2) Practical Examination centre shall be as directed by the MSBNPE
     3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1263

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 22/06/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHURVE JYOTI MAYARAM

Seat Number : 1264
Name of the Institution : RIGHT VALUE INSTITUTE OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital,Nagpur
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
     2) Practical Examination centre shall be as directed by the MSBNPE
     3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
## Hall Ticket

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
21/10/1999

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS AMBADE KARISHMA SANJU

**Seat Number**
1265

**Name of the Institution**
TIRPUDE NURSING TRAINING SCHOOL, NAGPUR

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
Indira Gandhi Medical College & Hospital, Nagpur

**Subjects**
I II III IV

**Signature of the Holder**

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**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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## Hall Ticket

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
30/09/1996

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS BELEKAR NEHA LOKCHAND

**Seat Number**
1266

**Name of the Institution**
TIRPUDE NURSING TRAINING SCHOOL, NAGPUR

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
Indira Gandhi Medical College & Hospital, Nagpur

**Subjects**
II III

**Signature of the Holder**

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**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAJBHIYE TWINKLE VINOD
Seat Number : 1267
Name of the Institution : TIRPUDE NURSING TRAINING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the
MSBNPE through institute authority before commencement of the examination.

Sr. No. 1267

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/08/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAWALI JAISHREE DEVIDAS
Seat Number : 1268
Name of the Institution : TIRPUDE NURSING TRAINING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the
MSBNPE through institute authority before commencement of the examination.

Sr. No. 1268

cut
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the
MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 07/09/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS NAGRALE AACHAL BABLU

Seat Number : 1271

Name of the Institution : TIRPUDE NURSING TRAINING SCHOOL, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur

Subjects : II

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1271

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 28/05/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SAKHARE AKANKSHA UDAY

Seat Number : 1272

Name of the Institution : TIRPUDE NURSING TRAINING SCHOOL, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur

Subjects : II

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1272
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/08/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BAGADE SUSHMA BALIRAM
Seat Number : 1273
Name of the Institution : KALYANI NURSING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1273

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GANVEER PRADNYA ASHOK
Seat Number : 1274
Name of the Institution : KALYANI NURSING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1274
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/07/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KARWADE SUPRIYA ARUN
Seat Number : 1275
Name of the Institution : KALYANI NURSING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1275

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LABHANE PRAJKTA PRADIP
Seat Number : 1276
Name of the Institution : KALYANI NURSING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1276
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1277

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/10/1985
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MARASKOLHE SHALU SUKHADEO
Seat Number : 1277
Name of the Institution : KALYANI NURSING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1278

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/08/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM KARISHMA ROSHAN
Seat Number : 1278
Name of the Institution : KALYANI NURSING SCHOOL, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**  
**Date:** 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Date Of Birth</th>
<th>Date Of Exam</th>
<th>Name of the Candidate</th>
<th>Seat Number</th>
<th>Name of the Institution</th>
<th>Name of the Examination</th>
<th>Name of the Exam. Centre</th>
<th>Subjects</th>
</tr>
</thead>
<tbody>
<tr>
<td>1281</td>
<td>24/04/1999</td>
<td>14/01/2020 To 17/01/2020</td>
<td>MISS CHAVHAN MANJULA VASANTA</td>
<td>1281</td>
<td>RENUKA NURSING SCHOOL, HINGANA, NAGPUR</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
<td>Indira Gandhi Medical College &amp; Hospital, Nagpur</td>
<td>II III</td>
</tr>
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<td>1282</td>
<td>25/04/1997</td>
<td>14/01/2020 To 17/01/2020</td>
<td>MISS GEDAM SUSHILA WASUDEO</td>
<td>1282</td>
<td>RENUKA NURSING SCHOOL, HINGANA, NAGPUR</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
<td>Indira Gandhi Medical College &amp; Hospital, Nagpur</td>
<td>IV</td>
</tr>
</tbody>
</table>

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAHILKAR ANKITA ARUN
Seat Number : 1283
Name of the Institution : RENUKA NURSING SCHOOL, HINGANA, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : I III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1283

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMTHE ASHWINI RAMBAU
Seat Number : 1284
Name of the Institution : SURETECH COLLEGE OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : II
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1284
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>1285</th>
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</thead>
</table>

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

13/01/2020

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
05/06/2001

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS KATHANE MAHIMA SUNIL

**Seat Number**
1285

**Name of the Institution**
SURETECH COLLEGE OF NURSING, NAGPUR

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
Indira Gandhi Medical College & Hospital, Nagpur

**Subjects**
III

**Signature of the Holder**

---

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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<th>Sr. No.</th>
<th>1286</th>
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</table>

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

13/01/2020

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
07/02/1995

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS BIDKAR SWATI SITARAM

**Seat Number**
1286

**Name of the Institution**
ARNEJA INSTITUTE OF NURSING SCIENCES, NAGPUR

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
Indira Gandhi Medical College & Hospital, Nagpur

**Subjects**
III

**Signature of the Holder**

---

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
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<th>Sr. No.</th>
<th>1287</th>
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</table>

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 22/07/2001

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS GABJHIYE ARADHANA AJAY

Seat Number: 1287

Name of the Institution: ASHARAM SCHOOL OF NURSING, NAGPUR

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: Indira Gandhi Medical College & Hospital, Nagpur

Subjects: II, III, IV

Signature of the Holder: 

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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<th>Sr. No.</th>
<th>1288</th>
</tr>
</thead>
</table>

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 21/04/2001

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS GANVIR RUTIKSHA RAJESH

Seat Number: 1288

Name of the Institution: ASHARAM SCHOOL OF NURSING, NAGPUR

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: Indira Gandhi Medical College & Hospital, Nagpur

Subjects: II

Signature of the Holder: 

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1289

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/02/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHARAT TRUPTI SHEKHAR
Seat Number : 1289
Name of the Institution : ASHARAM SCHOOL OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : II
Signature of the Holder : 

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 1290

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/07/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KADBE AAYUSHA DNYANESHWAR
Seat Number : 1290
Name of the Institution : ASHARAM SCHOOL OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : II
Signature of the Holder : 

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/06/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS LANJEWAR SNEHAL BABAN

Seat Number : 1291

Name of the Institution : ASHARAM SCHOOL OF NURSING, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur

Subjects : II

Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 1291

--- Cut ---

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 14/03/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS LAUTRE SHRADHA MANGESH

Seat Number : 1292

Name of the Institution : ASHARAM SCHOOL OF NURSING, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur

Subjects : II

Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 1292

--- Cut ---
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 09/05/2001

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS LENDE ASHA SHIVPRAKASH

Seat Number: 1293

Name of the Institution: ASHARAM SCHOOL OF NURSING, NAGPUR

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: Indira Gandhi Medical College & Hospital, Nagpur

Signature of the Holder: 

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 18/06/2001

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS MESHRAM SHWETA BHIMESHWAR

Seat Number: 1294

Name of the Institution: ASHARAM SCHOOL OF NURSING, NAGPUR

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: Indira Gandhi Medical College & Hospital, Nagpur

Subjects: II

Signature of the Holder: 

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PADOLE AMISHA SHRAVAN
Seat Number : 1295
Name of the Institution : ASHARAM SCHOOL OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : I II III IV
Signature of the Holder : 

Note: 
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1295

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SORALE ANJALI RAMESHWAR
Seat Number : 1296
Name of the Institution : ASHARAM SCHOOL OF NURSING, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : II IV
Signature of the Holder : 

Note: 
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1296
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 16/01/1994
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS UIKEY NANDINI NATTHU

Seat Number: 1297
Name of the Institution: ASHARAM SCHOOL OF NURSING, NAGPUR
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: Indira Gandhi Medical College & Hospital, Nagpur

Subjects: II
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1297

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 15/03/1990
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS GULHANE RUTUJA VASANT

Seat Number: 1298
Name of the Institution: MATRU SEVA SANGH NURSING SCHOOL, SITABULDI, MATERNITY HOME NAGPUR
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: Indira Gandhi Medical College & Hospital, Nagpur

Subjects: I II III V VI IV
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1298
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 21/03/1999

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS URKUDE TEJSWINI HARISH

Seat Number
: 1299

Name of the Institution
: MATRU SEVA SANGH NURSING SCHOOL, SITABULDI, MATERNITY HOME NAGPUR

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: Indira Gandhi Medical College & Hospital, Nagpur

Subjects
: I II III IV

Signature of the Holder
: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1299

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 28/12/1999

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS CHAVHAN GUNJAN PRASHANT

Seat Number
: 1300

Name of the Institution
: MOTHER TERESA NURSING INSTITUTE, NAGPUR

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: Indira Gandhi Medical College & Hospital, Nagpur

Subjects
: III

Signature of the Holder
: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1300
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

12/11/2000

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS GHRARDE KOMAL PREMDAS

**Seat Number**

1301

**Name of the Institution**

MOTHER TERESA NURSING INSTITUTE, NAGPUR

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

Indira Gandhi Medical College & Hospital, Nagpur

**Subjects**

I II III IV

**Signature of the Holder**

Note:

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

28/07/1999

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS MESHRAM PRIYA BANDUJI

**Seat Number**

1302

**Name of the Institution**

MOTHER TERESA NURSING INSTITUTE, NAGPUR

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

Indira Gandhi Medical College & Hospital, Nagpur

**Subjects**

I II III

**Signature of the Holder**

Note:

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PALEWAR SNEHA LALCHAND
Seat Number : 1303
Name of the Institution : MOTHER TERESA NURSING INSTITUTE , NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1303

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT AMISHA SANJAY
Seat Number : 1304
Name of the Institution : MOTHER TERESA NURSING INSTITUTE , NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : I III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1304
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 18/04/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SAKHARE APURVA MAHENDRA

Seat Number : 1305

Name of the Institution : MOTHER TERESA NURSING INSTITUTE, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur

Subjects : I II III IV

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 17/11/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SANESHWAR ROSHANI VIJAY

Seat Number : 1306

Name of the Institution : MOTHER TERESA NURSING INSTITUTE, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur

Subjects : I II III IV

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 23/01/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SHENDE ASHWINI TARACHAND

Seat Number : 1307

Name of the Institution : MOTHER TERESA NURSING INSTITUTE, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur

Subjects : III

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 12/11/1991

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KHOBRA GADE JYOTI HIWARAJ

Seat Number : 1309

Name of the Institution : MADHUKARRAO MAHAKALKAR NURSING SCHOOL, DIGHORI, NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur

Subjects : II

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 25/06/1990

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BHOSKAR SNEHA CHANDRAPRAKASH

Seat Number : 1310

Name of the Institution : SMT. HANSABEN NURSING SCHOOL NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur

Subjects : II IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/07/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHIWANDE PALLAVI DILIP
Seat Number : 1311
Name of the Institution : SMT. HANSABEN NURSING SCHOOL NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/01/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHURVE SHUBHANGI RAJESH
Seat Number : 1312
Name of the Institution : SMT. HANSABEN NURSING SCHOOL NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 30/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS INGLE RIBECA JOHNSON
Seat Number : 1313
Name of the Institution : SMT. HANSABEN NURSING SCHOOL NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 08/01/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MESHRAM SUKANYA RAJESH

Seat Number : 1315

Name of the Institution : SMT. HANSABEN NURSING SCHOOL NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur

Subjects : II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 1315

13/01/2020

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 24/12/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MOOL DIKSHITA JANARDHAN

Seat Number : 1316

Name of the Institution : SMT. HANSABEN NURSING SCHOOL NAGPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur

Subjects : II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 1316

13/01/2020
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/08/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PANDAY DHANASHREE PRASHANT
Seat Number : 1317
Name of the Institution : SMT. HANSABEN NURSING SCHOOL NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : II
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1317

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/06/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAHANGDALE RAKHI LAXMAN
Seat Number : 1318
Name of the Institution : SMT. HANSABEN NURSING SCHOOL NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : II, III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1318
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAMTEKE PRANALI PRAMOD
Seat Number : 1319
Name of the Institution : SMT. HANSABEN NURSING SCHOOL NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1319

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RANGARI KARISHMA KULDIP
Seat Number : 1320
Name of the Institution : SMT. HANSABEN NURSING SCHOOL NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 17/10/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SAHARE JAYSHREE BHUMESHWAR
Seat Number: 1321
Name of the Institution: SMT. HANSABEN NURSING SCHOOL NAGPUR
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: Indira Gandhi Medical College & Hospital, Nagpur
Subjects: II III
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1321

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 31/10/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SHAIKH GULAFSHAN IRFAN
Seat Number: 1322
Name of the Institution: SMT. HANSABEN NURSING SCHOOL NAGPUR
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: Indira Gandhi Medical College & Hospital, Nagpur
Subjects: II III IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1322
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BAGSAR RUPALI LAXMAN
Seat Number : 1323
Name of the Institution : SUVARNA SCHOOL OF NURSING SAONER, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1323

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHOYE JAYSHRI BABULAL
Seat Number : 1324
Name of the Institution : SUVARNA SCHOOL OF NURSING SAONER, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1324
For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
10/09/1999

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS DOHALE PUNAM NAMDEO

Seat Number
1325

Name of the Institution
SUVARNA SCHOOL OF NURSING SAONER, NAGPUR

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
Indira Gandhi Medical College & Hospital, Nagpur

Subjects
II

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth
09/11/2000

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS GANAR PRACHI DILIP

Seat Number
1326

Name of the Institution
SUVARNA SCHOOL OF NURSING SAONER, NAGPUR

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
Indira Gandhi Medical College & Hospital, Nagpur

Subjects
II III IV

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
03/10/1998

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS GUMGAOKAR PRATIKSHA ASHOK

Seat Number :
1327

Name of the Institution :
SUVARNA SCHOOL OF NURSING SAONER, NAGPUR

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
Indira Gandhi Medical College & Hospital, Nagpur

Subjects :
III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1327

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
04/02/1993

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS KALE JYOTI RAJESHRAO

Seat Number :
1328

Name of the Institution :
SUVARNA SCHOOL OF NURSING SAONER, NAGPUR

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
Indira Gandhi Medical College & Hospital, Nagpur

Subjects :
I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1328
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHULAGE KAVITA PRAMOD
Seat Number : 1329
Name of the Institution : SUVARNA SCHOOL OF NURSING SAONER, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : I  III  IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1329

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM PRATIKSHA HEMRAJ
Seat Number : 1330
Name of the Institution : SUVARNA SCHOOL OF NURSING SAONER, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : II  III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
06/08/2000

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS MESHRAM PRIYANKA RAMAJI

Seat Number :
1331

Name of the Institution :
SUVARNA SCHOOL OF NURSING SAONER, NAGPUR

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
Indira Gandhi Medical College & Hospital, Nagpur

Subjects :
I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1331

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
22/01/1999

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS NANDANWAR DIPIKA PRADIPJI

Seat Number :
1332

Name of the Institution :
SUVARNA SCHOOL OF NURSING SAONER, NAGPUR

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
Indira Gandhi Medical College & Hospital, Nagpur

Subjects :
II IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1332
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAKIDDE ANKITA PRATAP
Seat Number : 1333
Name of the Institution : SUVARNA SCHOOL OF NURSING SAONER, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1333

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SIRSAM ROSHANI MORESHWAR
Seat Number : 1334
Name of the Institution : SUVARNA SCHOOL OF NURSING SAONER, NAGPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Indira Gandhi Medical College & Hospital, Nagpur
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1334
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

**Sr. No. 1335**

<table>
<thead>
<tr>
<th><strong>For the</strong></th>
<th>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Date Of Birth</strong></td>
<td>17/09/1986</td>
</tr>
<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS BARDE KIRAN KISANRAO</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
<td>1335</td>
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<tr>
<td><strong>Name of the Institution</strong></td>
<td>MAA GAYATRI SCHOOL OF NURSING, ACHALPUR, AMRAVATI</td>
</tr>
<tr>
<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
</tr>
<tr>
<td><strong>Name of the Exam. Centre</strong></td>
<td>GENERAL HOSPITAL, AMRAVATI</td>
</tr>
<tr>
<td><strong>Subjects</strong></td>
<td>III</td>
</tr>
<tr>
<td><strong>Signature of the Holder</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**Sr. No. 1336**

<table>
<thead>
<tr>
<th><strong>For the</strong></th>
<th>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Date Of Birth</strong></td>
<td>25/03/1996</td>
</tr>
<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS CHAVAN FULABAI SHOBHARAM</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
<td>1336</td>
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<tr>
<td><strong>Name of the Institution</strong></td>
<td>MAA GAYATRI SCHOOL OF NURSING, ACHALPUR, AMRAVATI</td>
</tr>
<tr>
<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
</tr>
<tr>
<td><strong>Name of the Exam. Centre</strong></td>
<td>GENERAL HOSPITAL, AMRAVATI</td>
</tr>
<tr>
<td><strong>Subjects</strong></td>
<td>II III</td>
</tr>
<tr>
<td><strong>Signature of the Holder</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHIKAR KIRAN MOTILAL
Seat Number : 1337
Name of the Institution : MAA GAYATRI SCHOOL OF NURSING, ACHALPUR, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : II, III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 15/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAWANDE DIKSHA GAJANAN
Seat Number : 1338
Name of the Institution : MAA GAYATRI SCHOOL OF NURSING, ACHALPUR, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I, II, III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/01/2020
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MANWAR YOGITA SHRIRAM
Seat Number : 1339
Name of the Institution : MAA GAYATRI SCHOOL OF NURSING, ACHALPUR, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/03/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHINDE SHIVKALA MADHAV
Seat Number : 1340
Name of the Institution : MAA GAYATRI SCHOOL OF NURSING, ACHALPUR, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS UIKE LINA TULSHIRAM
Seat Number : 1341
Name of the Institution : MAA GAYATRI SCHOOL OF NURSING, ACHALPUR, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III IV
Signature of the Holder : 

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
       2) Practical Examination centre shall be as directed by the MSBNPE.
       3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1341

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/07/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHANDANKAR SHUBHANGI YADAVRAO
Seat Number : 1342
Name of the Institution : SUJATA SCHOOL OF NURSING, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder : 

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
       2) Practical Examination centre shall be as directed by the MSBNPE.
       3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1342
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/01/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHIMOTE PRIYANKA RAMU
Seat Number : 1343
Name of the Institution : SUJATA SCHOOL OF NURSING, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

SR. NO. 1343

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHOSE SHRADDHA SHANKARRAO
Seat Number : 1344
Name of the Institution : SUJATA SCHOOL OF NURSING, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

SR. NO. 1344
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 31/03/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS RUPNARAYAN PAYAL GANESHRRAO

Seat Number: 1345

Name of the Institution: SUJATA SCHOOL OF NURSING, AMRAVATI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, AMRAVATI

Subjects: I II III IV

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 03/04/2001

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS SHENDE HEMLATA HARISHCHANDRA

Seat Number: 1346

Name of the Institution: SUJATA SCHOOL OF NURSING, AMRAVATI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, AMRAVATI

Subjects: II III

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 31/01/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SONONE DIKSHA DEVANAND
Seat Number : 1347
Name of the Institution : SUJATA SCHOOL OF NURSING, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1347

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/03/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAKODE VAISHNAVI VINOD
Seat Number : 1348
Name of the Institution : SUJATA SCHOOL OF NURSING, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1348
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ZATALE DIKSHA RUPESH
Seat Number : 1349
Name of the Institution : SUJATA SCHOOL OF NURSING, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1349

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AREKAR SHRUTI DEVENDRA
Seat Number : 1350
Name of the Institution : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1350
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 26/11/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS BELSARE ANJALI RAJU
Seat Number: 1351
Name of the Institution: DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, AMRAVATI
Subjects: II III
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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Sr. No. 1351

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 08/06/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS DHOLE VAISHNAVI DILIPRAO
Seat Number: 1352
Name of the Institution: DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, AMRAVATI
Subjects: III
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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Sr. No. 1352
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GADLING MONALI NANA
Seat Number : 1353
Name of the Institution : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/02/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS INGALE KAJAL RAJENDRA
Seat Number : 1354
Name of the Institution : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JADHAO SAMIKA SHARAD
Seat Number : 1355
Name of the Institution : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/02/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KASDEKAR USHA MANNU
Seat Number : 1356
Name of the Institution : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/11/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KASDEKAR ANJANI RAMA
Seat Number : 1357
Name of the Institution : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/03/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHANDARE PRANALI GAJANAN
Seat Number : 1358
Name of the Institution : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/11/1991
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KUPTE YOGITA RAMESH
Seat Number : 1359
Name of the Institution : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 11/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM PRIYANKA PARMANAND

Seat Number : 1361
Name of the Institution : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1361

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 30/11/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NIMBURKAR TANISHA ARUNRAO

Seat Number : 1362
Name of the Institution : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 30/01/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS PAWAR JAYSHREE ONKARAO

Seat Number: 1363
Name of the Institution: DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, AMRAVATI

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1363

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 09/07/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SARODE SAPANA RAMESH

Seat Number: 1364
Name of the Institution: DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, AMRAVATI

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1364
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
23/02/1993

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS SAWALKAR REENA SHAMRAO

Seat Number
1365

Name of the Institution
DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
GENERAL HOSPITAL, AMRAVATI

Subjects
I

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1365

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
20/10/2000

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS TANTARPALE DIPALI DIPAKRAO

Seat Number
1366

Name of the Institution
DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
GENERAL HOSPITAL, AMRAVATI

Subjects
II III

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1366
<table>
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<tr>
<th>Sr. No.</th>
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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
19/12/2000

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS THORAT PUNAM RAMESH

**Seat Number**
1367

**Name of the Institution**
DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, AMRAVATI

**Subjects**
III

**Signature of the Holder**

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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>1368</th>
</tr>
</thead>
</table>

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
25/12/2000

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS WAHILE UNNATI GORAKHNATH

**Seat Number**
1368

**Name of the Institution**
DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, AMRAVATI

**Subjects**
III

**Signature of the Holder**

---

**Note:**
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WANKHADE SAKSHI ASHOK
Seat Number : 1369
Name of the Institution : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1369

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ABHYANKAR POONAM SUDANRAO
Seat Number : 1370
Name of the Institution : UTTAMRAO UMAK MEMORIAL NURSING SCHOOL, ANJANGAON, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1370
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1371

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/08/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ATHAWALE PRAPTI SUBHASH

Seat Number : 1371
Name of the Institution : UTTAMRAO UMAK MEMORIAL NURSING SCHOOL, ANJANGAON, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1372

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHATKAR PALLAVI RUPRAO

Seat Number : 1372
Name of the Institution : UTTAMRAO UMAK MEMORIAL NURSING SCHOOL, ANJANGAON, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 09/06/2001

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS CHAVHAN MALTSHIVDAS

Seat Number
: 1373

Name of the Institution
: UTTAMRAO UMAK MEMORIAL NURSING SCHOOL, ANJANGAON, AMRAVATI

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: GENERAL HOSPITAL, AMRAVATI

Subjects
: III

Signature of the Holder
:

Note:
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Sr. No. 1373

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 15/04/2000

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS DHANDE GAYATRI RAJESH

Seat Number
: 1374

Name of the Institution
: UTTAMRAO UMAK MEMORIAL NURSING SCHOOL, ANJANGAON, AMRAVATI

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: GENERAL HOSPITAL, AMRAVATI

Subjects
: I II III

Signature of the Holder
:

Note:
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Sr. No. 1374
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 14/08/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS HIRE SHITAL JANRAO

Seat Number : 1375

Name of the Institution : UTTAMRAO UMAK MEMORIAL NURSING SCHOOL, ANJANGAON, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1375

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2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1376

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 25/09/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS INGALE BHAGYASHRI SHARD

Seat Number : 1376

Name of the Institution : UTTAMRAO UMAK MEMORIAL NURSING SCHOOL, ANJANGAON, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI

Subjects : III

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS INGOLE DIPALI MAHADEVRAO
Seat Number : 1377
Name of the Institution : UTTAMRAO UMAK MEMORIAL NURSING SCHOOL, ANJANGAON, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I III
Signature of the Holder : 

Note:
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2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 19/05/1990

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : SMT MORE SARITA DAYARAM
                        Nee (JAWARKAR SARITA SURESH)

Seat Number : 1379

Name of the Institution : UTTAMRAO UMAK MEMORIAL NURSING SCHOOL, ANJANGAON, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI

Subjects : III

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MSBNPE through institute authority before commencement of the examination.

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Sr. No. 1380

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 22/04/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SARDAR KAJAL DHANRAJ

Seat Number : 1380

Name of the Institution : UTTAMRAO UMAK MEMORIAL NURSING SCHOOL, ANJANGAON, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI

Subjects : III

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the
MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/07/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SORGIVKAR PALLAVI DIPAKPANT
Seat Number : 1381
Name of the Institution : UTTAMRAO UMAK MEMORIAL NURSING SCHOOL, ANJANGAON, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1381

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/11/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BETHEKAR JYOTI KHANU
Seat Number : 1382
Name of the Institution : KAMLABAI UMAK NURSING SCHOOL, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BETHEKAR LAXMI MUNNA
Seat Number : 1383
Name of the Institution : KAMLABAI UMAK NURSING SCHOOL, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1383

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/04/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ATHAWALE SUVARNA SUNIL
Seat Number : 1384
Name of the Institution : LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. 1384
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHOKE PADMA DADARAO
Seat Number : 1385
Name of the Institution : LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1386

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/08/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAWANDE ASHWINI SUKHDEORAO
Seat Number : 1386
Name of the Institution : LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/10/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS HIVRALE ASHVINI SUNIL
Seat Number : 1387
Name of the Institution : LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : II
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1387

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS INGOLE DIKSHA AKARAM
Seat Number : 1388
Name of the Institution : LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1388
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/07/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KALE ASHWINI DHANRAJ
Seat Number : 1389
Name of the Institution : LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1389

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHANDARE DIKSHA VINAYAK
Seat Number : 1390
Name of the Institution : LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1390
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KUMBHALWAR PRATIKSHA ATUL
Seat Number : 1391
Name of the Institution : LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : II III IV
Signature of the Holder :

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI
REGISTRAR

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/09/1987

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MESHRAM CHHAYA DHANPAL

Seat Number : 1393

Name of the Institution : LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI

Subjects : III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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13/01/2020

Sr. No. 1393

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 25/02/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MESHRAM SHITAL GUNWANT

Seat Number : 1394

Name of the Institution : LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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13/01/2020

Sr. No. 1394
**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

13/01/2020

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
10/11/1996

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS MORE DIPAWALI PURUSHOTTAMRAO

**Seat Number**
1395

**Name of the Institution**
LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, AMRAVATI

**Subjects**
I II III

**Signature of the Holder**

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**Note:**
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

13/01/2020

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
19/12/1999

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS SALAME RANI AJABRAO

**Seat Number**
1396

**Name of the Institution**
LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, AMRAVATI

**Subjects**
I II III

**Signature of the Holder**

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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Name of the Candidate</th>
<th>Date Of Birth</th>
<th>Date Of Exam</th>
<th>Name of the Institution</th>
<th>Name of the Exam. Centre</th>
<th>Seat Number</th>
<th>Signature of the Holder</th>
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<tr>
<td>1397</td>
<td>MISS SAWALKAR YOGITA HIRALAL</td>
<td>10/07/1997</td>
<td>14/01/2020 To 17/01/2020</td>
<td>LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI</td>
<td>GENERAL HOSPITAL, AMRAVATI</td>
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<td>1398</td>
<td>MISS SOLANKE BABITA BABURAO</td>
<td>21/06/1996</td>
<td>14/01/2020 To 17/01/2020</td>
<td>LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI</td>
<td>GENERAL HOSPITAL, AMRAVATI</td>
<td>1398</td>
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</tbody>
</table>
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/08/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TIDAKE HARSHARANI ARVIND
Seat Number : 1399
Name of the Institution : LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TIDKE SANJIVANI ARVINDA
Seat Number : 1400
Name of the Institution : LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/10/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS UKE SHRUTI RAVI

Seat Number : 1401

Name of the Institution : LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1401

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 21/06/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS WAGHMARE KAJAL DEVRAO

Seat Number : 1402

Name of the Institution : LAXMANRAO UMAK MEMORIAL NURSING SCHOOL, BADNERA, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI

Subjects : II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1402
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
10/05/1992

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS GAWAI ARTI MURLIDHAR

Seat Number
1405

Name of the Institution
BHAKTI VEDANT SCHOOL OF NURSING, AMRAVATI

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
GENERAL HOSPITAL, AMRAVATI

Signature of the Holder

Subjects
I II III IV

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1405

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
21/07/1997

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS GOPNARAYAN AARATI BABURAO

Seat Number
1406

Name of the Institution
BHAKTI VEDANT SCHOOL OF NURSING, AMRAVATI

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
GENERAL HOSPITAL, AMRAVATI

Signature of the Holder

Subjects
I II III IV

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1406
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/09/1989
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JAWANJAL SHILPA AWADHUT
Seat Number : 1407
Name of the Institution : BHAKTI VEDANT SCHOOL OF NURSING, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/03/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MESHRAM KAVITA NILKANTH
Seat Number : 1408
Name of the Institution : BHAKTI VEDANT SCHOOL OF NURSING, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
## Hall Ticket

### Maharashra State Board of Nursing and Paramedical Education

**For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date of Birth:** 15/06/1994

**Date of Exam:** 14/01/2020 to 17/01/2020

**Name of the Candidate:** MISS SADANSHIV MAYA RAOSAHEB

**Seat Number:** 1409

**Name of the Institution:** BHAKTI VEDANT SCHOOL OF NURSING, AMRAVATI

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** GENERAL HOSPITAL, AMRAVATI

**Subjects:** I II III

**Signature of the Holder:**

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**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### Maharashra State Board of Nursing and Paramedical Education

**For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date of Birth:** 12/12/1999

**Date of Exam:** 14/01/2020 to 17/01/2020

**Name of the Candidate:** MISS TELANGE KALPNA DIPAK

**Seat Number:** 1410

**Name of the Institution:** BHAKTI VEDANT SCHOOL OF NURSING, AMRAVATI

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** GENERAL HOSPITAL, AMRAVATI

**Subjects:** I II III IV

**Signature of the Holder:**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AKHANDE RAMBAI RAMJI
Seat Number : 1411
Name of the Institution : FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1411

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/11/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BETHEKAR MANISHA BALAJI
Seat Number : 1412
Name of the Institution : FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
- 09/11/1994

**Date Of Exam**
- 14/01/2020 To 17/01/2020

**Name of the Candidate**
- MISS BHATKAR RUPALI GOPAL

**Seat Number**
- 1413

**Name of the Institution**
- FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI

**Name of the Examination**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
- GENERAL HOSPITAL, AMRAVATI

**Subjects**
- II

**Signature of the Holder**

**Note:**
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
- 31/07/1999

**Date Of Exam**
- 14/01/2020 To 17/01/2020

**Name of the Candidate**
- MISS BHILAWEKAR SARIKA SHOBHARAM

**Seat Number**
- 1414

**Name of the Institution**
- FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI

**Name of the Examination**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
- GENERAL HOSPITAL, AMRAVATI

**Subjects**
- II III

**Signature of the Holder**

**Note:**
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### Hall Ticket

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
06/06/1995

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS CHIMOTE KAVITA SAHEBRAO

**Seat Number**
1415

**Name of the Institution**
FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, AMRAVATI

**Subjects**
I II

**Signature of the Holder**

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**Note:**
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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
26/12/1996

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS CHIMOTE GITA MUNGILAL

**Seat Number**
1416

**Name of the Institution**
FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, AMRAVATI

**Subjects**
I II III IV

**Signature of the Holder**

---

**Note:**
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2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHIKAR RINA SUKHALAL
Seat Number : 1417
Name of the Institution : FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.  
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHURVE RINA SURESH
Seat Number : 1418
Name of the Institution : FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE. 
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KASDEKAR KALPANA KALYA
Seat Number : 1419
Name of the Institution : FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1419

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/01/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KASDEKAR SONU ONKAR
Seat Number : 1420
Name of the Institution : FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1420
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/10/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KASDEKAR SUNITA ONKAR
Seat Number : 1421
Name of the Institution : FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1422

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KASDEKAR ASMITA MANSU
Seat Number : 1422
Name of the Institution : FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### HALL TICKET

**Date Of Birth:** 23/09/2000  
**Date Of Exam:** 14/01/2020 To 17/01/2020  
**Name of the Candidate:** MISS MARASKOLHE VANDANA GONDU  
**Seat Number:** 1423  
**Name of the Institution:** FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI  
**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR  
**Name of the Exam. Centre:** GENERAL HOSPITAL, AMRAVATI  
**Subjects:** I II III IV  
**Signature of the Holder:**  

---

**Note:** 1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**Date Of Birth:** 09/07/2000  
**Date Of Exam:** 14/01/2020 To 17/01/2020  
**Name of the Candidate:** MISS MORE PINKI NANDA  
**Seat Number:** 1424  
**Name of the Institution:** FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI  
**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR  
**Name of the Exam. Centre:** GENERAL HOSPITAL, AMRAVATI  
**Subjects:** II III  
**Signature of the Holder:**  

---

**Note:** 1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 18/01/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS SALAME SHAKILA BISARAM

Seat Number: 1425

Name of the Institution: FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, AMRAVATI

Subjects: I  II  III

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No.: 1425

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 22/10/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS SAWALKAR ASMITA SABULAL

Seat Number: 1426

Name of the Institution: FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, AMRAVATI

Subjects: I  II  III  IV

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No.: 1426

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>1427</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION</strong></td>
<td><strong>HALL TICKET</strong></td>
</tr>
<tr>
<td>For the</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<tr>
<td>Date Of Birth</td>
<td>12/08/2000</td>
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<td>Name of the Institution</td>
<td>FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI</td>
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<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td>Name of the Exam. Centre</td>
<td>GENERAL HOSPITAL, AMRAVATI</td>
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<tr>
<td>Subjects</td>
<td>I II III</td>
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<tr>
<td>Signature of the Holder</td>
<td></td>
</tr>
</tbody>
</table>

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>1428</th>
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<tbody>
<tr>
<td><strong>MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION</strong></td>
<td><strong>HALL TICKET</strong></td>
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<tr>
<td>For the</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 03/04/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS UIKE RENUKA SAHADEV

Seat Number : 1429

Name of the Institution : FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI

Signature of the Holder : "REGISTRAR"

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1429

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 23/10/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS WAGH MAHESHVARI MANOJ

Seat Number : 1430

Name of the Institution : FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI

Signature of the Holder : "REGISTRAR"

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
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Sr. No. 1430
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 25/05/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS YUWANE MADHURI MOTILAL

Seat Number: 1431

Name of the Institution: FLORENCE NIGHTINGLE NURSING SCHOOL, AMRAVATI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, AMRAVATI

Subjects: I II

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 17/03/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS SAWANG NEHA VILAS

Seat Number: 1432

Name of the Institution: AKANKSHA SOCIAL WELFARE AND HRDA, INSTITUTE OF NURSING EDUCATION, AKOLA

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Akola

Subjects: II

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/11/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TAKTODE ANITA MOHAN
Seat Number : 1433
Name of the Institution : AKANKSHA SOCIAL WELFARE AND HRDA, INSTITUTE OF NURSING EDUCATION, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1433

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/02/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DONGARE RAJKANYA BHIMRAO
Seat Number : 1434
Name of the Institution : MAA GANGA NURSING SCHOOL, WASHIM
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KILARE PRADNYA RAMESH
Seat Number : 1435
Name of the Institution : MAA GANGA NURSING SCHOOL, WASHIM
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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SR. NO. 1436

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/07/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MANWAR PUJA GAUTAM
Seat Number : 1436
Name of the Institution : MAA GANGA NURSING SCHOOL, WASHIM
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/01/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PATTEBHADUR SATYASHILA ASHOK
Seat Number : 1437
Name of the Institution : MAA GANAG NURSING SCHOOL, WASHIM
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS INGLE VAISHALI VILAS
Seat Number : 1438
Name of the Institution : DR VANDANTAI DHONE NURSING SCHOOL, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : V VI
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

| Sr. No. | 1439
| --- | ---

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
02/03/2000

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS JANJAL VAISHNAVI DNYANESHWAR

**Seat Number**
1439

**Name of the Institution**
DR VANDANTAI DHONE NURSING SCHOOL, AKOLA

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Akola

**Subjects**
I II III V VI IV

**Signature of the Holder**

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**Note:**
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

| Sr. No. | 1440
| --- | ---

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
09/07/2000

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS KHADE SACHI VILAS

**Seat Number**
1440

**Name of the Institution**
DR VANDANTAI DHONE NURSING SCHOOL, AKOLA

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Akola

**Subjects**
III

**Signature of the Holder**

---

**Note:**
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MANWAR KOMAL MADAN
Seat Number : 1441
Name of the Institution : DR VANDANTAI DHONE NURSING SCHOOL, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SARDAR DHAMMARAKSHA SURESH
Seat Number : 1442
Name of the Institution : DR VANDANTAI DHONE NURSING SCHOOL, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/07/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHENDAKAPURE LAKSHMI ARVIND
Seat Number : 1443
Name of the Institution : RADHIKA NURSING SCHOOL, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : II, IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Date Of Birth : 21/05/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DAMALE LINA AJABARAO
Seat Number : 1444
Name of the Institution : RADHIKA NURSING SCHOOL, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 20/06/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DONGRE NILIMA PRAKASH

Seat Number : 1445

Name of the Institution : RADHIKA NURSING SCHOOL, AKOLA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Akola

Subjects : III

Signature of the Holder : 

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**Note:**

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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 04/04/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAWAI VAISHALI DIPAK

Seat Number : 1446

Name of the Institution : RADHIKA NURSING SCHOOL, AKOLA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Akola

Subjects : III

Signature of the Holder : 

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**Note:**

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHAGAT MADHURI DILIP
Seat Number : 1449
Name of the Institution : ANGLE OF MERCY INSTITUTE OF NURSING SCIENCE, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1449

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/02/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHOJANE VIDHYA PRAKASH
Seat Number : 1450
Name of the Institution : ANGLE OF MERCY INSTITUTE OF NURSING SCIENCE, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : V VI
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1450
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 14/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DANE GAYATRI GOPAL
Seat Number : 1451
Name of the Institution : ANGLE OF MERCY INSTITUTE OF NURSING SCIENCE, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : II  III  IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1451

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 28/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHOGARE NIKITA PADMAKAR
Seat Number : 1452
Name of the Institution : ANGLE OF MERCY INSTITUTE OF NURSING SCIENCE, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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<td><strong>HALL TICKET</strong></td>
<td>13/01/2020</td>
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<tr>
<td><strong>For the</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020</td>
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<tr>
<td><strong>Date Of Birth</strong></td>
<td>25/06/2000</td>
</tr>
<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS BORKAR MANISHA DNYANDEO</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
<td>1455</td>
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<tr>
<td><strong>Name of the Institution</strong></td>
<td>MANSI COLLEGE OF NURSING, WASHIM</td>
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<tr>
<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td><strong>Name of the Exam. Centre</strong></td>
<td>GENERAL HOSPITAL, Akola</td>
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<tr>
<td><strong>Subjects</strong></td>
<td>I II</td>
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<th>1456</th>
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<td><strong>Date Of Birth</strong></td>
<td>03/04/1998</td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
</tr>
<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS DHANDE VAISHALI SHRIPAT</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
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<tr>
<td><strong>Name of the Institution</strong></td>
<td>MANSI COLLEGE OF NURSING, WASHIM</td>
</tr>
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<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td><strong>Name of the Exam. Centre</strong></td>
<td>GENERAL HOSPITAL, Akola</td>
</tr>
<tr>
<td><strong>Subjects</strong></td>
<td>I II</td>
</tr>
<tr>
<td><strong>Signature of the Holder</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/05/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE ASHWINI JANARDHAN
Seat Number : 1457
Name of the Institution : MANSI COLLEGE OF NURSING, WASHIM
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PATHADE ASHVINI SANJAY
Seat Number : 1458
Name of the Institution : MANSI COLLEGE OF NURSING, WASHIM
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/04/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHOLE POOJA SUDAM
Seat Number : 1461
Name of the Institution : Nazarene Nursing Training College, Pusad Road, Washim
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : II
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1461

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/01/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD RUPALI MADHUKAR
Seat Number : 1462
Name of the Institution : Nazarene Nursing Training College, Pusad Road, Washim
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : II
Signature of the Holder :

Note:
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Sr. No. 1462
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 20/09/1995

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MANWAR CHAITALI RAJARAM

Seat Number : 1463

Name of the Institution : Nazarene Nursing Training College, Pusad Road, Washim

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Akola

Subjects : I II III V VI IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1463

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 04/09/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SAKHARE RUPALI DURYODHAN

Seat Number : 1464

Name of the Institution : Nazarene Nursing Training College, Pusad Road, Washim

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Akola

Subjects : IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
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<th>Name of the Candidate</th>
<th>Date Of Birth</th>
<th>Date Of Exam</th>
<th>Name of the Institution</th>
<th>Name of the Exam. Centre</th>
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<th>Name of the Examination</th>
<th>Subjects</th>
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<td>Nazarene Nursing Training College, Pusad Road, Washim</td>
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<td>1466</td>
<td>MISS WATHORE POOJA GULAB</td>
<td>10/01/2000</td>
<td>14/01/2020 To 17/01/2020</td>
<td>Nazarene Nursing Training College, Pusad Road, Washim</td>
<td>GENERAL HOSPITAL, Akola</td>
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<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/01/1988
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BABARE RUPALI KISANRAO
Seat Number : 1467
Name of the Institution : MAHARSHI WALMIKI INSTITUTE OF NURSING
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : 1
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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## MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

### HALL TICKET

**Sr. No.:** 1469

**For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:** 19/02/2000

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** MISS DABHADE KRUTIKA GAJANAN

**Seat Number:** 1469

**Name of the Institution:** MAHARSHI WALMIKI INSTITUTE OF NURSING MALKAPUR, AKOLA

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** GENERAL HOSPITAL, Akola

**Subjects:** III

**Signature of the Holder:**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### HALL TICKET

**Sr. No.:** 1470

**For the:** AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:** 25/09/1999

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** MISS WARTHI SAPNA SHRAVAN

**Seat Number:** 1470

**Name of the Institution:** MAHARSHI WALMIKI INSTITUTE OF NURSING MALKAPUR, AKOLA

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** GENERAL HOSPITAL, Akola

**Subjects:** I

**Signature of the Holder:**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
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3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### Hall Ticket

**Date of Exam:** 13/01/2020

### For the

**AUXILLARY NURSE MIDWIFERY FIRST YEAR** to be held in January 2020

### Name of the Candidate

MISS BODALE SHUBHANGI VINOD

### Seat Number

1471

### Name of the Institution

AZAD HIND NURSING SCHOOL, AKOLA

### Name of the Examination

AUXILLARY NURSE MIDWIFERY FIRST YEAR

### Name of the Exam. Centre

GENERAL HOSPITAL, Akola

### Subjects

<table>
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<th>Sr. No.</th>
<th>Date Of Birth</th>
<th>Date Of Exam</th>
<th>Name of the Candidate</th>
<th>Seat Number</th>
<th>Name of the Institution</th>
<th>Name of the Examination</th>
<th>Name of the Exam. Centre</th>
<th>Signature of the Holder</th>
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</thead>
<tbody>
<tr>
<td>1471</td>
<td>12/04/1998</td>
<td>14/01/2020 To 17/01/2020</td>
<td>MISS BODALE SHUBHANGI VINOD</td>
<td>1471</td>
<td>AZAD HIND NURSING SCHOOL, AKOLA</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
<td>GENERAL HOSPITAL, Akola</td>
<td></td>
</tr>
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### Hall Ticket

**Date of Exam:** 13/01/2020

### For the

**AUXILLARY NURSE MIDWIFERY FIRST YEAR** to be held in January 2020

### Name of the Candidate

MISS PATIL ANJALI SURESH

### Seat Number

1472

### Name of the Institution

AZAD HIND NURSING SCHOOL, AKOLA

### Name of the Examination

AUXILLARY NURSE MIDWIFERY FIRST YEAR

### Name of the Exam. Centre

GENERAL HOSPITAL, Akola

### Subjects

I II III IV

### Signature of the Holder

---

### Note:

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/08/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAYBOLE NILEEMA DIGAMBAR
Seat Number : 1473
Name of the Institution : AZAD HIND NURSING SCHOOL, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SADANSHIV NEHA MUKUNDA
Seat Number : 1474
Name of the Institution : AZAD HIND NURSING SCHOOL, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/06/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AMBHORE PRIYA SANTOSH
Seat Number : 1475
Name of the Institution : MAA ANUSAYA SCHOOL OF NURSING, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : III
Signature of the Holder : 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ATHAVALE ASHWINI NAJUKRAO
Seat Number : 1476
Name of the Institution : MAA ANUSAYA SCHOOL OF NURSING, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : II, III
Signature of the Holder : 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 07/10/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAWAI YOGITA KAILAS

Seat Number : 1477

Name of the Institution : MAA ANUSAYA SCHOOL OF NURSING, AKOLA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Akola

Subjects : II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1477

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 31/03/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS INGLE MONALI PRATAP

Seat Number : 1478

Name of the Institution : MAA ANUSAYA SCHOOL OF NURSING, AKOLA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Akola

Subjects : II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1479

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/05/1988
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SIRSAT HARSHVATI PANDURANG
Seat Number : 1479
Name of the Institution : MAA ANUSAYA SCHOOL OF NURSING, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1480

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TAYDE PRIYANKA BHAGAWAN
Seat Number : 1480
Name of the Institution : MAA ANUSAYA SCHOOL OF NURSING, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VELKAR SONALI VASANTA
Seat Number : 1481
Name of the Institution : MAA ANUSAYA SCHOOL OF NURSING, AKOLA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GORE ASHWINI SHAYAMRAO
Seat Number : 1483
Name of the Institution : GENERAL HOSPITAL, WASHIM
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1483

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/10/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SATHE SANDHYA SANTOSH
Seat Number : 1484
Name of the Institution : GENERAL HOSPITAL, WASHIM
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Akola
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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<th>Sr. No.</th>
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<td><strong>HALL TICKET</strong></td>
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<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020</td>
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<td><strong>Date Of Exam</strong></td>
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<td><strong>Seat Number</strong></td>
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<td><strong>Name of the Institution</strong></td>
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<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<td><strong>Name of the Exam. Centre</strong></td>
<td>Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded</td>
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<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020</td>
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<tr>
<td><strong>Date Of Exam</strong></td>
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<tr>
<td><strong>Name of the Institution</strong></td>
<td>SHRI GURU GOVINDSINGHJI MEMORIAL HOSPITAL, SON, NANDED</td>
</tr>
<tr>
<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<td><strong>Name of the Exam. Centre</strong></td>
<td>Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded</td>
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**Sr. No.** 1487

<table>
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<tr>
<th><strong>For the</strong></th>
<th>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</th>
</tr>
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<tbody>
<tr>
<td><strong>Date Of Birth</strong></td>
<td>26/06/1999</td>
</tr>
<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS AMBATPURE AISHWARYA SANTOSH</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
<td>1487</td>
</tr>
<tr>
<td><strong>Name of the Institution</strong></td>
<td>SMT. PRAMILATAI BHALERAO SCHOOL OF NURSING, Nanded</td>
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**Sr. No.** 1488

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<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS BHISE VAISHNADEVI GANGADHAR</td>
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<tr>
<td><strong>Seat Number</strong></td>
<td>1488</td>
</tr>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/08/1983
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHULEY PRADNYA VASANTRAO
Seat Number : 1489
Name of the Institution : SMT. PRAMILATAI BHALERAO SCHOOL OF NURSING, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Signature of the Holder :

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Sr. No. 1490

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DUKARE SURYAKANTA DIGAMBAR
Seat Number : 1490
Name of the Institution : SMT. PRAMILATAI BHALERAO SCHOOL OF NURSING, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Signature of the Holder :

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<tr>
<td><strong>Date Of Birth</strong></td>
<td>05/02/1998</td>
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<tr>
<td><strong>Date Of Exam</strong></td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS GAIKWAD SARASWATI UTTAM</td>
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<td><strong>Date Of Birth</strong></td>
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<tr>
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<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS HATKAR SANDHYA MADAN</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
<td>1492</td>
</tr>
<tr>
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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

18/12/1995

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS KUDAMATHE DIPA PURUSHOTTAM

**Seat Number**

1493

**Name of the Institution**

SMT. PRAMILATAI BHALERAO SCHOOL OF NURSING, Nanded

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

**Subjects**

1

**Signature of the Holder**

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

20/04/2000

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS MARKAL RAJASHREE KISAN

**Seat Number**

1494

**Name of the Institution**

SMT. PRAMILATAI BHALERAO SCHOOL OF NURSING, Nanded

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

**Subjects**

1

**Signature of the Holder**

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MENDKE RUPA BHARAT
Seat Number : 1495
Name of the Institution : SMT. PRAMILATAI BHALERAO SCHOOL OF NURSING, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : 1
Signature of the Holder :

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Sr. No. 1495

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NAITAM ANJALI SUNIL
Seat Number : 1496
Name of the Institution : SMT. PRAMILATAI BHALERAO SCHOOL OF NURSING, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : 1
Signature of the Holder :

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Sr. No. 1496
## AUXILLARY NURSE MIDWIFERY FIRST YEAR

### Hall Ticket

#### For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

#### Date Of Birth
01/03/1997

#### Date Of Exam
14/01/2020 To 17/01/2020

#### Name of the Candidate
MISS PAWAR RUPALI RAMESH

#### Seat Number
1497

#### Name of the Institution
SMT. PRAMILATAI BHALERAO SCHOOL OF NURSING, Nanded

#### Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

#### Name of the Exam. Centre
Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

#### Subjects
I II III IV

#### Signature of the Holder

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**Sr. No. 1497**

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## AUXILLARY NURSE MIDWIFERY FIRST YEAR

### Hall Ticket

#### For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

#### Date Of Birth
02/04/2000

#### Date Of Exam
14/01/2020 To 17/01/2020

#### Name of the Candidate
MISS PAWAR SONU DILIP

#### Seat Number
1498

#### Name of the Institution
SMT. PRAMILATAI BHALERAO SCHOOL OF NURSING, Nanded

#### Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

#### Name of the Exam. Centre
Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

#### Subjects
I II III IV

#### Signature of the Holder

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**Sr. No. 1498**
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 04/02/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS RATHOD SWATI JAIHIND

Seat Number : 1499

Name of the Institution : SMT. PRAMILATAI BHALERAO SCHOOL OF NURSING, Nanded

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I II

Signature of the Holder :

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Sr. No. 1500

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 20/08/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS RATHOD MAMTA KAILAS

Seat Number : 1500

Name of the Institution : SMT. PRAMILATAI BHALERAO SCHOOL OF NURSING, Nanded

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I II III

Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 11/05/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS TUREWALE PRIYANKA DATTATREYA

Seat Number : 1501

Name of the Institution : SMT. PRAMILATAI BHALERAO SCHOOL OF NURSING, Nanded

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I III

Signature of the Holder : 

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Sr. No. : 1501

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/01/1995

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS WAGHMARE SANGITA BABU

Seat Number : 1502

Name of the Institution : SMT. PRAMILATAI BHALERAO SCHOOL OF NURSING, Nanded

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I III

Signature of the Holder : 

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Sr. No. : 1502
HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/05/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ZADTE VIDYA PUNDLIK
Seat Number : 1503
Name of the Institution : SMT. PRAMILATAI BHALERAO SCHOOL OF NURSING, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III
Signature of the Holder : 

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Sr. No. 1504

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHANDARE ARCHANA KISHAN
Seat Number : 1504
Name of the Institution : INDIRA GANDHI NURSING SCHOOL, MUKHED, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III
Signature of the Holder : 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHATE SONI HANMANT
Seat Number : 1505
Name of the Institution : INDIRA GANDHI NURSING SCHOOL, MUKHED, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III
Signature of the Holder : "REGISTRAR MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI"

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Sr. No. 1505

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHODKE MONIKA RAJU
Seat Number : 1506
Name of the Institution : INDIRA GANDHI NURSING SCHOOL, MUKHED, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I
Signature of the Holder : "REGISTRAR MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI"

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Sr. No. 1506
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 25/05/1989

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: SMT JUTULKAR LAXMI BABURAO Nee(GAWALE LAXMI MADHUKAR)

Seat Number: 1507

Name of the Institution: INDIRA GANDHI NURSING SCHOOL, MUKHED, NANDED

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects: 1

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 08/04/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS KAMBLE PRIYANKA SHANKAR

Seat Number: 1508

Name of the Institution: INDIRA GANDHI NURSING SCHOOL, MUKHED, NANDED

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects: 1

Signature of the Holder:

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/05/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHIRSE SUSHAMA GANGADHAR
Seat Number : 1509
Name of the Institution : INDIRA GANDHI NURSING SCHOOL, MUKHED, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : 
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHMARE NIKITA BALIRAM
Seat Number : 1510
Name of the Institution : INDIRA GANDHI NURSING SCHOOL, MUKHED, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : 
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BOTHINGE URMILA PANDURANG
Seat Number : 1511
Name of the Institution : RAM RATAN NURSING INSTITUTE, BHOKAR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1511

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KARANDEKAR SONUTAI ANANDA
Seat Number : 1512
Name of the Institution : RAM RATAN NURSING INSTITUTE, BHOKAR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects :
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/05/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PARCHAKE SANJANA VITTHAL

Seat Number : 1513

Name of the Institution : RAM RATAN NURSING INSTITUTE, BHOKAR, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I II IV

Signature of the Holder :

---

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 15/07/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS POTRE JYOTI DIGAMBAR

Seat Number : 1514

Name of the Institution : RAM RATAN NURSING INSTITUTE, BHOKAR, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I II

Signature of the Holder :

---

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 06/09/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS TORKAD DHURPATBAI PANDURANG
Seat Number: 1515
Name of the Institution: RAM RATAN NURSING INSTITUTE, BHOKAR, NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects: I, II
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 11/06/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS BANSODE KOMAL SANJAY
Seat Number: 1516
Name of the Institution: GOVINDRAO PAUL NURSING SCHOOL, NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects: I, II, III, IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/02/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHULE SHITAL BHASKAR
Seat Number : 1517
Name of the Institution : GOVINDRAO PAUL NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : 
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket. 
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KALE CHHAYA SAHEBRAO
Seat Number : 1518
Name of the Institution : GOVINDRAO PAUL NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : 
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket. 
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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 20/03/1991

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KUDVE NITA VITTHAL

Seat Number : 1519

Name of the Institution : GOVINDRAO PAUL NURSING SCHOOL, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I

Signature of the Holder :

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 23/12/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS LOKHANDE AARTI HARIDAS

Seat Number : 1520

Name of the Institution : GOVINDRAO PAUL NURSING SCHOOL, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I II IV

Signature of the Holder :

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
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<tr>
<th>Sr. No.</th>
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**Note:**  
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<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
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<tr>
<td><strong>Name of the Exam. Centre</strong></td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/04/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NARWADE ASHWINI SOPAN
Seat Number : 1523
Name of the Institution : GOVINDRAO PAUL NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1523

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/11/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAIKRAO SUJATA RAJARAM
Seat Number : 1524
Name of the Institution : GOVINDRAO PAUL NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1524
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

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<tr>
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<tr>
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</tbody>
</table>

**Note:**
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

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<tr>
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<tr>
<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
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<td>MISS TIBBE SWATI MAROTI</td>
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<td>Seat Number</td>
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<tr>
<td>Name of the Institution</td>
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<td>Name of the Examination</td>
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**Note:**
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1527

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 21/05/1997
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS BHISE SONALI VITTHAL
Seat Number: 1527
Name of the Institution: SWAMI RAMANAND TIRTH NURSING INSTITITUE, KANDHAR, NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects: II III
Signature of the Holder: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1528

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 05/05/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS GADAMBE SHAHUBAI NARAYAN
Seat Number: 1528
Name of the Institution: SWAMI RAMANAND TIRTH NURSING INSTITITUE, KANDHAR, NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects: 
Signature of the Holder: 

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No.  1529

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/11/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD RUPALI SURYAKANT
Seat Number : 1529
Name of the Institution : SWAMI RAMANAND TIRTH NURSING INSTITITUE, KANDHAR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

13/01/2020

Sr. No.  1530

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD SARIKA GUNDAJI
Seat Number : 1530
Name of the Institution : SWAMI RAMANAND TIRTH NURSING INSTITITUE, KANDHAR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 20/08/1996

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAIKWAD KANCHAN GUNDAJI

Seat Number : 1531

Name of the Institution : SWAMI RAMANAND TIRTH NURSING INSTITUTUE, KANDHAR, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I II III IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1531

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/06/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAVALVE SAVITA NIVRATI

Seat Number : 1532

Name of the Institution : SWAMI RAMANAND TIRTH NURSING INSTITUTUE, KANDHAR, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I II III IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1532
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 15/06/1989

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GHORPADE GANGABAI GANPAT

Seat Number : 1533

Name of the Institution : SWAMI RAMANAND TIRTH NURSING INSTITITUE, KANDHAR, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I II III

Signature of the Holder :

REGISTRAR MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1533

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 12/05/1991

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS HINGOLE SUKESHANA DATTA

Seat Number : 1534

Name of the Institution : SWAMI RAMANAND TIRTH NURSING INSTITITUE, KANDHAR, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I II III V VI IV

Signature of the Holder :

REGISTRAR MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1534
<table>
<thead>
<tr>
<th>Sr. No.</th>
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<tr>
<td><strong>MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION</strong></td>
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<td><strong>For the</strong> : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<td><strong>Date Of Birth</strong> : 22/04/2000</td>
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<td><strong>Date Of Exam</strong> : 14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong> : MISS JADHAV NEHA GULABRAO</td>
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<td><strong>Name of the Institution</strong> : SWAMI RAMANAND TIRTH NURSING INSTITITUE, KANDHAR, NANDED</td>
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<td><strong>Name of the Exam. Centre</strong> : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded</td>
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<td><strong>Subjects</strong> : I II III IV</td>
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<td><strong>Signature of the Holder</strong> :</td>
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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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<td><strong>Date Of Birth</strong> : 11/11/1996</td>
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<tr>
<td><strong>Date Of Exam</strong> : 14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong> : MISS KAMBLE DEEPA BABU</td>
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<td><strong>Name of the Institution</strong> : SWAMI RAMANAND TIRTH NURSING INSTITITUE, KANDHAR, NANDED</td>
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<td><strong>Name of the Examination</strong> : AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<td><strong>Name of the Exam. Centre</strong> : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded</td>
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<td><strong>Subjects</strong> : I II III IV</td>
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**Note:**
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/05/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SURYAVANSHI SAVITA KERBA
Seat Number : 1539
Name of the Institution : SWAMI RAMANAND TIRTH NURSING INSTITITUE, KANDHAR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1539

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SURYAWANSHI POOJA SAMBHAJI
Seat Number : 1540
Name of the Institution : SWAMI RAMANAND TIRTH NURSING INSTITITUE, KANDHAR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1540
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
- 20/09/1999

**Date Of Exam**
- 14/01/2020 To 17/01/2020

**Name of the Candidate**
- MISS BHANDARE KOMAL TEJERAO

**Seat Number**
- 1541

**Name of the Institution**
- GANGABAI PATIL NURSING SCHOOL, BILOLI, NANDED

**Name of the Examination**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
- Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

**Subjects**
- I II III IV

**Signature of the Holder**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DEVKARE SARIKA GAURAJI
Seat Number : 1543
Name of the Institution : GANGABAI PATIL NURSING SCHOOL, BILOLI, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I, II, IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 27/12/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD SWATI ANANDA
Seat Number : 1545
Name of the Institution : GANGABAI PATIL NURSING SCHOOL, BILOLI, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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Sr. No. 1545

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 05/06/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHANTEWAD DHRUPATABAI GANGARAM
Seat Number : 1546
Name of the Institution : GANGABAI PATIL NURSING SCHOOL, BILOLI, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III IV
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1546
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KOLNURE VANITA RAMESH
Seat Number : 1547
Name of the Institution : GANGABAI PATIL NURSING SCHOOL, BILOLI, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/09/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : SMT KUMBHARE MAINA DIGAMBAR
Nee(WAGHMARE MAINABAI SANJAY)
Seat Number : 1548
Name of the Institution : GANGABAI PATIL NURSING SCHOOL, BILOLI, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I, II, III, IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHELKE ASHATAI BALAJI
Seat Number : 1549
Name of the Institution : GANGABAI PATIL NURSING SCHOOL, BILOLI, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1549

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/06/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : SMT SONKAMBLE SHASHIKALA JALSING Nee(DHARMAKARE SHASHIKALA PRAKASH)
Seat Number : 1550
Name of the Institution : GANGABAI PATIL NURSING SCHOOL, BILOLI, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1550
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 03/02/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS TOGARWAD ALKA MOHANRAO

Seat Number : 1551

Name of the Institution : GANGABAI PATIL NURSING SCHOOL, BILOLI, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1551

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/09/1995

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS ADHAV JYOTI RAVSAHEB

Seat Number : 1552

Name of the Institution : MOTHER TERESA NURSING SCHOOL, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I III

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1552
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Date Of Birth: 24/10/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS DUKARE SONALI MAROTRAO
Seat Number: 1553
Name of the Institution: MOTHER TERESA NURSING SCHOOL, NANDED
Name of the Exam. Centre: Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects: I II III IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1553

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Date Of Birth: 07/12/1997
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS GAIKWAD AARTI VITTHAL
Seat Number: 1554
Name of the Institution: MOTHER TERESA NURSING SCHOOL, NANDED
Name of the Exam. Centre: Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects: I III
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1554
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAJBHARE ANJALI BHAGWAN
Seat Number : 1555
Name of the Institution : MOTHER TERESA NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr No. 1555

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAYAKWAD POOJA BALAJI
Seat Number : 1556
Name of the Institution : MOTHER TERESA NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr No. 1556
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/04/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GODBOLE PREETI RAMESH
Seat Number : 1557
Name of the Institution : MOTHER TERESA NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/10/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHELKE POOJA VYANKATI
Seat Number : 1559
Name of the Institution : MOTHER TERESA NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/11/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TOTAWAR DIVYA DILIPRAO
Seat Number : 1560
Name of the Institution : MOTHER TERESA NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/08/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHAMARE SANJEWANI ANANDA
Seat Number : 1561
Name of the Institution : MOTHER TERESA NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1561

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHAMARE SHITAL UTTAMRAO
Seat Number : 1562
Name of the Institution : MOTHER TERESA NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1562
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Date Of Birth: 15/07/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS WAGHMARE NISHIGANDHA GOUTAM
Seat Number: 1563
Signature of the Holder:

Name of the Institution: MOTHER TERESA NURSING SCHOOL, NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects: III

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

SR. NO. 1563

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 04/07/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS ADHAV SUJATA ANANDA
Seat Number: 1564
Signature of the Holder:

Name of the Institution: OMKAR NURSING SCHOOL, BILOLI, NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects: I II III IV

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/11/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DEVKARE TRUPTI MAROTI
Seat Number : 1565
Name of the Institution : OMKAR NURSING SCHOOL, BILOLI, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1565

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD KOMAL SUNIL
Seat Number : 1566
Name of the Institution : OMKAR NURSING SCHOOL, BILOLI, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 10/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAJBHARE BHARAT AMRUTA
Seat Number : 1567
Name of the Institution : OMKAR NURSING SCHOOL, BILOLI, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1567

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 26/07/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LANDGE KOMAL BALIRAM
Seat Number : 1568
Name of the Institution : OMKAR NURSING SCHOOL, BILOLI, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1568
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MANSAKRGE ARTI PRAKASH
Seat Number : 1569
Name of the Institution : OMKAR NURSING SCHOOL, BILOLI, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. 1569

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAKSHEMARE TATWASHILA ANANDA
Seat Number : 1570
Name of the Institution : OMKAR NURSING SCHOOL, BILOLI, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1570
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>1571</th>
</tr>
</thead>
</table>

### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/04/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS RAKSHESMARE PRATIKSHA ANANDA

Seat Number : 1571

Name of the Institution : OMKAR NURSING SCHOOL, BILOLI, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I II III IV

Signature of the Holder : [Signature]

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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<table>
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<th>Sr. No.</th>
<th>1572</th>
</tr>
</thead>
</table>

### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/08/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SHAHAPURKAR PRATIKSHA SAINATHRAO

Seat Number : 1572

Name of the Institution : OMKAR NURSING SCHOOL, BILOLI, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I III

Signature of the Holder : [Signature]

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 24/02/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SONKAMBLE NANDINI MADHAVRAO

Seat Number : 1573

Name of the Institution : OMKAR NURSING SCHOOL, BILOLI, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 12/05/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SONKAMBLE JYOTSANA SAMBHAJI

Seat Number : 1574

Name of the Institution : OMKAR NURSING SCHOOL, BILOLI, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 03/06/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BABILE KANHOPATRA MAROTI
Seat Number : 1575
Name of the Institution : ADARSHA NURSING SCHOOL, DEGLOOR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 25/10/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS CHITALE SARIKA MADHAVRAO
Seat Number : 1576
Name of the Institution : ADARSHA NURSING SCHOOL, DEGLOOR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 23/07/1997
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS DEVKAMBLE ASHVINI RAMESH
Seat Number: 1577
Name of the Institution: ADARSHA NURSING SCHOOL, DEGLOOR, NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects: I II III IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1577

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 25/09/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS DEVKAMBLE POOJA MADHAV
Seat Number: 1578
Name of the Institution: ADARSHA NURSING SCHOOL, DEGLOOR, NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects: I II III IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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<th>Sr. No.</th>
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<td><strong>MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION</strong></td>
<td><strong>HALL TICKET</strong> 13/01/2020</td>
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<td><strong>For the</strong></td>
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<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<td>Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded</td>
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<td><strong>For the</strong></td>
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<td><strong>Date Of Birth</strong></td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS JADHAV ASHVINI VITTHAL</td>
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<tr>
<td><strong>Seat Number</strong></td>
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<tr>
<td><strong>Name of the Institution</strong></td>
<td>ADARSHA NURSING SCHOOL, DEGLOOR, NANDED</td>
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<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<td><strong>Name of the Exam. Centre</strong></td>
<td>Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded</td>
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**Note:**
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JAMDADE BHAGYASHRI VISHWANATH
Seat Number : 1581
Name of the Institution : ADARSHA NURSING SCHOOL, DEGLOOR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1581

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JAMDADE ASHWINI GANGADHAR
Seat Number : 1582
Name of the Institution : ADARSHA NURSING SCHOOL, DEGLOOR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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Sr. No. 1582
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/06/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KANNAWAR SEEMA MAROTI
Seat Number : 1583
Name of the Institution : ADARSHA NURSING SCHOOL, DEGLOOR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1583

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/05/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MADPATTE KOMAL IRVANT
Seat Number : 1584
Name of the Institution : ADARSHA NURSING SCHOOL, DEGLOOR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1584
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
25/06/1998

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS MOHARE SUREKHA PURBHA

Seat Number:
1585

Name of the Institution:
ADARSHA NURSING SCHOOL, DEGLOOR, NANDED

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects:
I II III IV

Signature of the Holder:

Note:
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Sr. No. 1585

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
01/01/1995

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS PENETEWAD MANISHA MAROTI

Seat Number:
1586

Name of the Institution:
ADARSHA NURSING SCHOOL, DEGLOOR, NANDED

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects:
III

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1586
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1587

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/01/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS POTARE NILAWATI GAJANAN
Seat Number : 1587
Name of the Institution : ADARSHA NURSING SCHOOL, DEGLOOR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

13/01/2020

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1588

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/07/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHAIKH HINABAI CHANDSAB
Seat Number : 1588
Name of the Institution : ADARSHA NURSING SCHOOL, DEGLOOR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded
Subjects : I II III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 12/06/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS WAGHMARE KAVITA MAROTI

Seat Number : 1589

Name of the Institution : ADARSHA NURSING SCHOOL, DEGLOOR, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I II III IV

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1590

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 29/06/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS WAGHMARE SONUTAI RAGHUNATH

Seat Number : 1590

Name of the Institution : ADARSHA NURSING SCHOOL, DEGLOOR, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects : I II III IV

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1590
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 16/03/1998

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS WAGHMARE SHUBHADA RAMESH

Seat Number
: 1591

Name of the Institution
: ADARSHA NURSING SCHOOL, DEGLOOR, NANDED

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects
: I II III IV

Signature of the Holder
:  

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth
: 03/11/1999

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS LAWHALE KOMAL KONDIBA

Seat Number
: 1592

Name of the Institution
: NARMADA NURSING INSTITUTE, LOHA, NANDED

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Subjects
: III

Signature of the Holder
:  

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>1593</th>
</tr>
</thead>
</table>

### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

13/01/2020

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

04/09/1988

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS CHAVAN ASHA GANGADHAR

**Seat Number**

1594

**Name of the Institution**

MAULI INSTITUTE OF NURSING, PARBHANI

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

GENERAL HOSPITAL, Parbhani

**Subjects**

I II III

**Signature of the Holder**

Note:

1. Candidate will not be allowed in examination hall without this Hall Ticket.
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<th>Sr. No.</th>
<th>1594</th>
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</thead>
</table>

### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

13/01/2020

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

10/02/1997

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS BORKAR KIRAN SUDAM

**Seat Number**

1593

**Name of the Institution**

MAULI INSTITUTE OF NURSING, PARBHANI

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

GENERAL HOSPITAL, Parbhani

**Subjects**

II III

**Signature of the Holder**

Note:

1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

---
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DAKE MONIKA MANIKRAO
Seat Number : 1595
Name of the Institution : MAULI INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/04/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHUBADE BILKESH GANPATRAO
Seat Number : 1596
Name of the Institution : MAULI INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 03/02/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KHILLARE AMRAPALI LAXMAN

Seat Number : 1597

Name of the Institution : MAULI INSTITUTE OF NURSING, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 25/05/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KOLHAL VAISHALI SHIVAJI

Seat Number : 1598

Name of the Institution : MAULI INSTITUTE OF NURSING, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani

Subjects : I III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/02/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LAD POOJA RANGNATHRAO
Seat Number : 1599
Name of the Institution : MAULI INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : 1 2 3
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS POUL VAISHNAVI BHAGWANRAO
Seat Number : 1600
Name of the Institution : MAULI INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : 1
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Name of the Candidate</th>
<th>Date Of Birth</th>
<th>Date Of Exam</th>
<th>Name of the Institution</th>
<th>Name of the Examination</th>
<th>Name of the Exam. Centre</th>
<th>Seat Number</th>
<th>Subjects</th>
<th>Signature of the Holder</th>
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<tbody>
<tr>
<td>1601</td>
<td>MISS PURI RENUKA DATTA</td>
<td>26/11/1996</td>
<td>14/01/2020 To 17/01/2020</td>
<td>MAULI INSTITUTE OF NURSING, PARBHANI</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
<td>GENERAL HOSPITAL, Parbhani</td>
<td>1601</td>
<td>I</td>
<td></td>
</tr>
<tr>
<td>1602</td>
<td>MISS SALVE KALPANA UDDHAV</td>
<td>10/04/1998</td>
<td>14/01/2020 To 17/01/2020</td>
<td>MAULI INSTITUTE OF NURSING, PARBHANI</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
<td>GENERAL HOSPITAL, Parbhani</td>
<td>1602</td>
<td>I, II, III</td>
<td></td>
</tr>
</tbody>
</table>

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/09/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHINDE VARSHA PIRAJI
Seat Number : 1603
Name of the Institution : MAULI INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DUKARE ARCHANA BALU
Seat Number : 1605
Name of the Institution : MATOSHRI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects :  I  II  III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1605

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DUKARE VIDHYA SAHEBRAO
Seat Number : 1606
Name of the Institution : MATOSHRI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects :  I  III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1606
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 17/05/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAIKWAD ANUSAYA MAROTI

Seat Number : 1607

Name of the Institution : MATOSHRI NURSING SCHOOL, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Parbhan

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1607

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 09/12/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KAMBLE SHITAL GANGADHAR

Seat Number : 1608

Name of the Institution : MATOSHRI NURSING SCHOOL, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Parbhan

Subjects : III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1608
### Hall Ticket

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
14/09/1998

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS KAMBLE SUMITRA VILAS

**Seat Number**
1609

**Name of the Institution**
MATOSHRI NURSING SCHOOL, PARBHANI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Parbhani

**Subjects**
I II

**Signature of the Holder**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
17/04/2000

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS KANKUTE SONALI DATTA

**Seat Number**
1610

**Name of the Institution**
MATOSHRI NURSING SCHOOL, PARBHANI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Parbhani

**Subjects**
I III IV

**Signature of the Holder**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/11/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LANDGE MOHINI SANJAY
Seat Number : 1613
Name of the Institution : MATOSHRI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1613

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/03/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MAGRE RENUKA KAILASH
Seat Number : 1614
Name of the Institution : MATOSHRI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1614
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 19/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PANDE SATYBHAMA JAGDERAO
Seat Number : 1615
Name of the Institution : MATOSHRI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1617

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PATIL URMILA PREMKUMAR
Seat Number : 1617
Name of the Institution : MATOSHRI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 13/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS YELANE NITA RUKHMAJI
Seat Number : 1618
Name of the Institution : MATOSHRI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
12/07/1987

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS GAIGODHANE VARSHA VISHWANATH

**Seat Number**
1619

**Name of the Institution**
BHARATRATNA MOTHER TERSA NURSING SCHOOL, SELU, PARBHANI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Parbhani

**Signature of the Holder**

**Subjects**
I II III IV

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
15/03/1988

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS JAGDHANE SMITA SUBHASH

**Seat Number**
1620

**Name of the Institution**
BHARATRATNA MOTHER TERSA NURSING SCHOOL, SELU, PARBHANI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Parbhani

**Signature of the Holder**

**Subjects**
I II III IV

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/07/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JONDHALE PORNIMA JAYWANTRAO
Seat Number : 1621
Name of the Institution : BHARATRATNA MOTHER TERSA NURSING SCHOOL, SELU, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II III IV
Signature of the Holder : 

Note:  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/05/1984
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KALE MANISHA YEDUBA
Seat Number : 1622
Name of the Institution : BHARATRATNA MOTHER TERSA NURSING SCHOOL, SELU, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I III
Signature of the Holder : 

Note:  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/06/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE KALPANA BABANRAO
Seat Number : 1623
Name of the Institution : BHARATRATNA MOTHER TERSA NURSING SCHOOL, SELU, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : 1 2 3 4
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 03/11/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MANE ASHWINI GANESH

Seat Number : 1627

Name of the Institution : BHARATRATNA MOTHER TERSA NURSING SCHOOL, SELU, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani

Subjects : I II III IV

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. : 1627

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 08/09/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MASKE PALLAVI MILIND

Seat Number : 1628

Name of the Institution : BHARATRATNA MOTHER TERSA NURSING SCHOOL, SELU, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani

Subjects : I III IV

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. : 1628
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 23/12/1998

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS MASKE JYOTI DNYANOBA

Seat Number: 1629

Name of the Institution: BHARATRATNA MOTHER TERSA NURSING SCHOOL, SELU, PARBHANI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Parbani

Subjects: III IV

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1629

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 30/04/1998

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS MOTE KIRAN RANOJI

Seat Number: 1630

Name of the Institution: BHARATRATNA MOTHER TERSA NURSING SCHOOL, SELU, PARBHANI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Parbani

Subjects: I III IV

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1631

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/05/1986
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MUJMULE VIJAYMALA SHIVAJI
Seat Number : 1631
Name of the Institution : BHARATRATNA MOTHER TERSA NURSING SCHOOL, SELU, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1632

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/10/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHALERAO PRITEE UTTAM
Seat Number : 1632
Name of the Institution : INSTITUTE OF NURSING EDUCATION, MANWATH, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 11/09/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KAMBLE AISHWARYA SANJAY

Seat Number : 1633

Name of the Institution : INSTITUTE OF NURSING EDUCATION, MANWATH, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani

Subjects : I II IV

Signature of the Holder : REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1633

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 02/01/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MORE RANI KAILASH

Seat Number : 1634

Name of the Institution : INSTITUTE OF NURSING EDUCATION, MANWATH, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani

Subjects : I II IV

Signature of the Holder : REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1634

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 15/04/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MORE VARSHA SUBHASH

Seat Number : 1635

Name of the Institution : INSTITUTE OF NURSING EDUCATION, MANWATH, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Parbhan

Subjects : III IV

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1635

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 15/01/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS NARWADE POOJA SOMAJI

Seat Number : 1636

Name of the Institution : INSTITUTE OF NURSING EDUCATION, MANWATH, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Parbhan

Subjects : I II III IV

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1636
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BELE REKHA DIGAMBAR
Seat Number : 1637
Name of the Institution : TIRUPATI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BINDE VARSHA GOPAL
Seat Number : 1638
Name of the Institution : TIRUPATI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 10/08/1996

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS CHATSE SHILPA GAUTAM

Seat Number: 1639

Name of the Institution: TIRUPATI NURSING SCHOOL, PARBHANI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Parbhani

Subjects: I II III IV

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. 1639

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 01/07/1997

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS CHOURANGE POOJA SURESH

Seat Number: 1640

Name of the Institution: TIRUPATI NURSING SCHOOL, PARBHANI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Parbhani

Subjects: I II III IV

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. 1640
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 02/10/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DHAPASE SHITAL DEVIDAS

Seat Number : 1641

Name of the Institution : TIRUPATI NURSING SCHOOL, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani

Subjects : II IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/12/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DUDHMAL POOJA BHASKARRO

Seat Number : 1642

Name of the Institution : TIRUPATI NURSING SCHOOL, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD ROHINI PANDHARI
Seat Number : 1643
Name of the Institution : TIRUPATI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1643

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/09/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD PALLAVI BALASAHEB
Seat Number : 1644
Name of the Institution : TIRUPATI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 02/04/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAJBHAR ROHINI YASHWANT
Seat Number : 1645
Name of the Institution : TIRUPATI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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Date Of Birth : 10/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JADHAV ANITA DADARAO
Seat Number : 1646
Name of the Institution : TIRUPATI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHANDARE GANGASAGAR RAMBHAI
Seat Number : 1647
Name of the Institution : TIRUPATI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/06/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHANDARE TRIVENA PRAKASH
Seat Number : 1648
Name of the Institution : TIRUPATI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 06/06/1997

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS KHARE MANISHA HIRAMAN

Seat Number
: 1649

Name of the Institution
: TIRUPATI NURSING SCHOOL, PARBHANI

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: GENERAL HOSPITAL, Parbhani

Subjects
: II IV

Signature of the Holder

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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through Institute authority before commencement of the examination.

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**MR. NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 10/09/1999

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS KHILLARE ANJANA RAJENDRA

Seat Number
: 1650

Name of the Institution
: TIRUPATI NURSING SCHOOL, PARBHANI

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: GENERAL HOSPITAL, Parbhani

Subjects
: I II III IV

Signature of the Holder

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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through Institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/02/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LOKHANDE ASAVINI PADURANG
Seat Number : 1651
Name of the Institution : TIRUPATI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1651

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MAGHADE PRITI KESHAV
Seat Number : 1652
Name of the Institution : TIRUPATI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PARSODE SNEHAL SUBHASH
Seat Number : 1653
Name of the Institution : TIRUPATI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWAR JAYSHREE APPARAO
Seat Number : 1654
Name of the Institution : TIRUPATI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth

14/03/1996

Date Of Exam

14/01/2020 To 17/01/2020

Name of the Candidate

MISS SALVE RAKHEE VINAYAK

Seat Number

1655

Name of the Institution

TIRUPATI NURSING SCHOOL, PARBHANI

Name of the Examination

AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre

GENERAL HOSPITAL, Parbhani

Subjects

I II IV

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 07/05/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS SONWANE ANURADHA NAMDEV

Seat Number: 1657

Name of the Institution: TIRUPATI NURSING SCHOOL, PARBHANI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Parbhani

Subjects: III IV

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/09/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TEJAD POOJA ASHOK
Seat Number : 1659
Name of the Institution : TIRUPATI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/05/1986
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS YENGDE CHHAYA JAIRAM
Seat Number : 1660
Name of the Institution : TIRUPATI NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
03/04/1999

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS BELE LATA KESHAV

Seat Number :
1661

Name of the Institution :
MADHAV A.N.M. SCHOOL, PARBHANI

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
GENERAL HOSPITAL, Parbhani

Subjects :

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1661

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
25/10/1994

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS HALANE SUWANNA SHIVAJI

Seat Number :
1662

Name of the Institution :
MADHAV A.N.M. SCHOOL, PARBHANI

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
GENERAL HOSPITAL, Parbhani

Subjects :

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1662
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 25/09/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS JADHAV PRATIBHA DILIP

Seat Number: 1663

Name of the Institution: MADHAV A.N.M. SCHOOL, PARBHANI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Parbhani

Subjects: I

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth: 30/07/1990

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: SMT JAVANE ASHALATA JANARDAN Nee(CHOPADE ASHA VITTHAL)

Seat Number: 1664

Name of the Institution: MADHAV A.N.M. SCHOOL, PARBHANI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Parbhani

Subjects: I III

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 08/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBALE JYOTI PANDURANG
Seat Number : 1665
Name of the Institution : MADHAV A.N.M. SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1665

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 21/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAPATE JAYSHRI DADARAO
Seat Number : 1666
Name of the Institution : MADHAV A.N.M. SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1666
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 18/09/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KHUDE SAIRKA SONABA

Seat Number : 1667

Name of the Institution : MADHAV A.N.M. SCHOOL, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani

Subjects : I III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1667

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 07/05/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS LAKHADE BALI DATTARAO

Seat Number : 1668

Name of the Institution : MADHAV A.N.M. SCHOOL, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani

Subjects : I III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1668
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
29/01/2000

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS SHIRSATH DURGA VASANT

**Seat Number**
1669

**Name of the Institution**
MADHAV A.N.M. SCHOOL, PARBHANI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Parbhani

**Subjects**
I V VI

**Signature of the Holder**

---

**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
10/07/1990

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS UGALE RUPALI HIRAMAN

**Seat Number**
1670

**Name of the Institution**
MADHAV A.N.M. SCHOOL, PARBHANI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Parbhani

**Subjects**
II

**Signature of the Holder**

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**Note:**
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2. Practical Examination centre shall be as directed by the MSBNPE.
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Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No.: 1671

Sr. No.: 1672
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 06/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD MAMTA GANGADHARAO

Seat Number : 1673
Name of the Institution : Dr.Prafulla Patil Nursing School, Parbhani
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani

Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 08/02/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : SMT JUMBADE NISHA MADHUKAR
Nee(JADHAV NISHA NITIN)

Seat Number : 1674
Name of the Institution : Dr.Prafulla Patil Nursing School, Parbhani
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani

Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHADE PALLAVI PRAKASH
Seat Number : 1675
Name of the Institution : Dr. Prafulla Patil Nursing School, Parbhani
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/06/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHEKH HEENA SHEKHNAJIR
Seat Number : 1676
Name of the Institution : Dr. Prafulla Patil Nursing School, Parbhani
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 22/03/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS THORAT SEEMA SUBHASH
Seat Number : 1677
Name of the Institution : Dr.Prafulla Patil Nursing School, Parbhani
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 10/04/1991
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TONGRAJ INDUMATI MUNJAJI
Seat Number : 1678
Name of the Institution : Dr.Prafulla Patil Nursing School, Parbhani
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 20/04/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAMAN MEENA SUDHAKAR
Seat Number : 1679
Name of the Institution : Dr.Prafulla Patil Nursing School, Parbhani
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1679

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 08/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DABHADE POOJA GOVINDA
Seat Number : 1680
Name of the Institution : BELESHWAR INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Signature of the Holder :

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 02/01/1996

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS DHAKARE GEETA SAKHARAM

Seat Number: 1681

Name of the Institution: BELESHWAR INSTITUTE OF NURSING, PARBHANI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Parbhani

Subjects: I IV

Signature of the Holder: 

Note:
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Date Of Birth: 05/06/1988

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS DHAKRE ANUSAYA LXMAN

Seat Number: 1682

Name of the Institution: BELESHWAR INSTITUTE OF NURSING, PARBHANI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Parbhani

Subjects: II IV

Signature of the Holder: 

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 04/06/1997

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS GUNDLE KALPANA BALAJI

Seat Number: 1683

Name of the Institution: BELESHWAR INSTITUTE OF NURSING, PARBHANI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Parbhani

Subjects: I II IV

Signature of the Holder:

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Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 11/06/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS JALTE UJESHILA PANDIT

Seat Number: 1684

Name of the Institution: BELESHWAR INSTITUTE OF NURSING, PARBHANI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Parbhani

Subjects: II III IV

Signature of the Holder:

---

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**Sr. No. 1685**

<table>
<thead>
<tr>
<th>For the</th>
<th>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Of Birth</td>
<td>15/07/1996</td>
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<tr>
<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
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<td>Name of the Candidate</td>
<td>MISS KAMBLE NIKITA NARAYAN</td>
</tr>
<tr>
<td>Seat Number</td>
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</tr>
<tr>
<td>Name of the Institution</td>
<td>BELESHWAR INSTITUTE OF NURSING, PARBHANI</td>
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<tr>
<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td>Name of the Exam. Centre</td>
<td>GENERAL HOSPITAL, Parbhani</td>
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<tr>
<td>Subjects</td>
<td>I II III V VI IV</td>
</tr>
<tr>
<td>Signature of the Holder</td>
<td></td>
</tr>
</tbody>
</table>

**Note:**
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**Sr. No. 1686**

<table>
<thead>
<tr>
<th>For the</th>
<th>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Of Birth</td>
<td>28/07/1998</td>
</tr>
<tr>
<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
</tr>
<tr>
<td>Name of the Candidate</td>
<td>MISS KANKUTE POONAM PANDURANG</td>
</tr>
<tr>
<td>Seat Number</td>
<td>1686</td>
</tr>
<tr>
<td>Name of the Institution</td>
<td>BELESHWAR INSTITUTE OF NURSING, PARBHANI</td>
</tr>
<tr>
<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
</tr>
<tr>
<td>Name of the Exam. Centre</td>
<td>GENERAL HOSPITAL, Parbhani</td>
</tr>
<tr>
<td>Subjects</td>
<td>II</td>
</tr>
<tr>
<td>Signature of the Holder</td>
<td></td>
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</tbody>
</table>

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 04/06/1997

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS SALVE NAMRATA ANIL

Seat Number: 1687

Name of the Institution: BELESHWAR INSTITUTE OF NURSING, PARBHANI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Parbhani

Subjects: I II

Signature of the Holder: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 04/06/1997

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS BHADRGE BHAGYSHRI SANTOSH

Seat Number: 1688

Name of the Institution: SAKSHI NURSING SCHOOL, MANWAT, PARBHANI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Parbhani

Subjects: I II

Signature of the Holder: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAVALE DIPALI RAMDAS
Seat Number : 1689
Name of the Institution : SAKSHI NURSING SCHOOL, MANWAT, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhanı
Subjects : I III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1689

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/04/1985
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TAMBARE VANDANA RAMESH
Seat Number : 1690
Name of the Institution : SAKSHI NURSING SCHOOL, MANWAT, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1690
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 11/04/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS INGLE RAGINI MILIND
Seat Number: 1691
Name of the Institution: L.D.H.T. SCHOOL OF NURSING, HINGOLI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Parbhani
Subjects: I II
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1691

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 09/05/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KAMBLE DIPALI SAHEBRAO
Seat Number: 1692
Name of the Institution: L.D.H.T. SCHOOL OF NURSING, HINGOLI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Parbhani
Subjects: I
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1692
### Hall Ticket

**For the**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**  
01/12/1999

**Date Of Exam**  
14/01/2020 To 17/01/2020

**Name of the Candidate**  
MISS POTFADE VANMALA PAMRAO

**Seat Number**  
1693

**Name of the Institution**  
L.D.H.T. SCHOOL OF NURSING, HINGOLI

**Name of the Examination**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**  
GENERAL HOSPITAL, Parbhani

**Subjects**  
I

**Signature of the Holder**  

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**Note:**  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### Hall Ticket

**For the**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**  
11/01/2000

**Date Of Exam**  
14/01/2020 To 17/01/2020

**Name of the Candidate**  
MISS RANVIR PALLAVI PANDIT

**Seat Number**  
1694

**Name of the Institution**  
L.D.H.T. SCHOOL OF NURSING, HINGOLI

**Name of the Examination**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**  
GENERAL HOSPITAL, Parbhani

**Subjects**  
I III

**Signature of the Holder**  

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**Note:**  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/10/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHINDE ARCHANA KISAN
Seat Number : 1695
Name of the Institution : L.D.H.T. SCHOOL OF NURSING, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : 1
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1695

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WANKHEDE SHRADDHA BABAN
Seat Number : 1696
Name of the Institution : L.D.H.T. SCHOOL OF NURSING, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : 1
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Note:  
1) Candidate will not be allowed in examination hall without this Hall Ticket. 
2) Practical Examination centre shall be as directed by the MSBNPE. 
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1699

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/12/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DASUD SHITAL DILIP
Seat Number : 1699
Name of the Institution : INDIRA GANDHI A.N.M. NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1700

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/03/1987
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DASUD RAMA DILIP
Seat Number : 1700
Name of the Institution : INDIRA GANDHI A.N.M. NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/01/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHANDARE VANDANA PHULAJI
Seat Number : 1701
Name of the Institution : INDIRA GANDHI A.N.M. NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani

Subjects : I
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1701

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/07/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KALE SHOBHA DEVIDAS
Seat Number : 1702
Name of the Institution : INDIRA GANDHI A.N.M. NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani

Subjects : I III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1702
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 07/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KARHALE KIRTI KUNDLIK

Seat Number : 1703
Name of the Institution : INDIRA GANDHI A.N.M. NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1703

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 08/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KARHALE MAYA GOPINATH

Seat Number : 1704
Name of the Institution : INDIRA GANDHI A.N.M. NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1704
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 31/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHUDE SONABAI SHIVAJI
Seat Number : 1705
Name of the Institution : INDIRA GANDHI A.N.M. NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1705

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LAKHADE SONABAI RAJARAM
Seat Number : 1706
Name of the Institution : INDIRA GANDHI A.N.M. NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1706
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
08/10/1999

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS SAMUDRE DIKSHA PANDURANG

Seat Number:
1709

Name of the Institution:
INDIRA GANDHI A.N.M. NURSING SCHOOL, PARBHANI

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Parbhani

Subjects:
I, II, III

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 31/08/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TANPURE ARTI NAGORAO

Seat Number : 1711
Name of the Institution : INDIRA GANDHI A.N.M. NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 14/10/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WALKE LAXMI RANU

Seat Number : 1712
Name of the Institution : INDIRA GANDHI A.N.M. NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SIRSAT POOJA BAPU

Seat Number : 1713
Name of the Institution : INDIRA GANDHI NURSING SCHOOL, OSMANABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Osmanabad

Signature of the Holder : 
Subjects : I II III V VI IV

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/11/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE AARTI RAMHARI

Seat Number : 1714
Name of the Institution : JEEVAN JYOT AROGYA SHIKSHAN SANSTHA, SCHOOL OF NURSING, OSMANABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Osmanabad

Signature of the Holder : 
Subjects : I II

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 12/07/2001

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS MOMIN FIRDUS AZIMUDDIN

Seat Number
: 1715

Name of the Institution
: JEEVAN JYOT AROGYA SHIKSHAN SANSTHA, SCHOOL OF NURSING, OSMANABAD

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: GENERAL HOSPITAL, Osmanabad

Subjects
: I

Signature of the Holder
:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 27/07/1999

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS SAYYAD SHAMINA SHAHANUR

Seat Number
: 1716

Name of the Institution
: JEEVAN JYOT AROGYA SHIKSHAN SANSTHA, SCHOOL OF NURSING, OSMANABAD

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: GENERAL HOSPITAL, Osmanabad

Subjects
: I

Signature of the Holder
:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 23/08/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS BENDKOLI MANJU MADHUKAR
Seat Number: 1717
Name of the Institution: Late Changdevrao Banger Nursing School, Tal - Bhum, Osmanabad
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Osmanabad
Subjects: III
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1717

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 25/01/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS INGALE BUDDHAMALA JAGADEORAO
Seat Number: 1718
Name of the Institution: Late Changdevrao Banger Nursing School, Tal - Bhum, Osmanabad
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Osmanabad
Subjects: II III
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1718
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 11/06/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KAKAD ANUSHAYA CHINTU
Seat Number: 1719
Name of the Institution: Late Changdevrao Banger Nursing School, Tal - Bhum, Osmanabad
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Osmanabad
Subjects: III
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1719

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 01/11/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS NADGE ANJALI DASHRATH
Seat Number: 1720
Name of the Institution: Late Changdevrao Banger Nursing School, Tal - Bhum, Osmanabad
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Osmanabad
Subjects: II III
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1720
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 01/08/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AHER SUNITA VIJAY
Seat Number : 1721
Name of the Institution : BILL GATES NURSING SCHOOL, OSMANABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL,Osmanabad
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1721

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 07/06/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD PUJA GUNDIBA
Seat Number : 1722
Name of the Institution : BILL GATES NURSING SCHOOL, OSMANABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL,Osmanabad
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1722
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/03/1994

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DHAWARE PALLAVI DADARAO

Seat Number : 1723

Name of the Institution : RENUKA NURSING RANM SCHOOL, KALAMB, OSMANABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL,Osmanabad

Subjects : I

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1723

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 04/05/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAIKWAD DIPALI ANIL

Seat Number : 1724

Name of the Institution : RENUKA NURSING RANM SCHOOL, KALAMB, OSMANABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL,Osmanabad

Subjects : I III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1724
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/06/1988
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS HIRVE RANI BABU

Seat Number : 1725
Name of the Institution : RENUKA NURSING RANM SCHOOL, KALAMB, OSMANABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Osmanabad

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Signature of the Holder:

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MAGRE PRITI PRABHU

Seat Number : 1726
Name of the Institution : RENUKA NURSING RANM SCHOOL, KALAMB, OSMANABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Osmanabad

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Signature of the Holder:

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 15/06/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHINDE PAYAL GOKUL
Seat Number : 1727
Name of the Institution : RENUKA NURSING RANM SCHOOL, KALAMB, OSMANABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL,Osmanabad
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS THORAT SNEHA MANIK

Seat Number : 1729
Name of the Institution : RENUKA NURSING RANM SCHOOL, KALAMB, OSMANABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Osmanabad
Subjects : I III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1729

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 18/02/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BANSODE NIKITA MADHUKAR

Seat Number : 1730
Name of the Institution : K.T. PATIL SCHOOL OF NURSING, OSMANABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Osmanabad
Subjects : I IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1730
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 05/08/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SHITOLE PRITI HARI

Seat Number: 1731
Name of the Institution: K.T. PATIL SCHOOL OF NURSING, OSMANABAD
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Osmanabad

Subjects: IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 20/06/1996
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SURTE KAUSHALYA SUKHDEV

Seat Number: 1732
Name of the Institution: K.T. PATIL SCHOOL OF NURSING, OSMANABAD
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Osmanabad

Subjects: I III IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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<thead>
<tr>
<th>Sr. No.</th>
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<tr>
<td><strong>Seat Number</strong></td>
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**Note:**
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<td>14/01/2020 To 17/01/2020</td>
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<tr>
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<td>MISS GAIKWAD KADAMBARI YASHWANT</td>
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<td><strong>Seat Number</strong></td>
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<td><strong>Name of the Institution</strong></td>
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**Note:**
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For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
14/02/1986

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS JADHAV MUKTA LIMBAJI

Seat Number:
1735

Name of the Institution:
SAI NURSING COLLEGE, UMERGA, OSMANABAD

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Osmanabad

Subjects:
IV

Signature of the Holder:

Note:
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2) Practical Examination centre shall be as directed by the MSBNPE.
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For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
27/10/1999

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS POL VARSHA BALU

Seat Number:
1736

Name of the Institution:
SAI NURSING COLLEGE, UMERGA, OSMANABAD

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Osmanabad

Subjects:
IV

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHINDE RUPSHRI KALIDAS
Seat Number : 1737
Name of the Institution : SAI NURSING COLLEGE, UMERA, OSMANABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Osmanabad
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/02/1987
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SWAMI BHAGYSHALI RACHAYYA
Seat Number : 1738
Name of the Institution : SAI NURSING COLLEGE, UMERA, OSMANABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Osmanabad
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PARADAKE SARALA LALA
Seat Number : 1739
Name of the Institution : SHRI DHANESHWARI MANAV VIKAS MANDAL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : III
Signature of the Holder : REGISTRAR

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1739

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/01/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA ALKA VANKAR
Seat Number : 1740
Name of the Institution : SHRI DHANESHWARI MANAV VIKAS MANDAL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I III IV
Signature of the Holder : REGISTRAR

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1740
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/02/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA MENDARI HUTARYA
Seat Number : 1741
Name of the Institution : SHRI DHANESHWARI MANAV VIKAS MANDAL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA GEETA DILA
Seat Number : 1742
Name of the Institution : SHRI DHANESHWARI MANAV VIKAS MANDAL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 13/04/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS PAWARA KALPANA ROHIDAS
Seat Number: 1743
Name of the Institution: SHRI DHANESHWARI MANAV VIKAS MANDAL, AURANGABAD
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects: IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1743

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 12/09/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS PAWARA VAISHALI GANESH
Seat Number: 1744
Name of the Institution: SHRI DHANESHWARI MANAV VIKAS MANDAL, AURANGABAD
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects: I II III V VI IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. 1744
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/06/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA MAMTA JORDAR
Seat Number : 1745
Name of the Institution : SHRI DHANESHWARI MANAV VIKAS MANDAL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I, II, III, IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1745

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALVI LATA RAJYA
Seat Number : 1746
Name of the Institution : SHRI DHANESHWARI MANAV VIKAS MANDAL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I, III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1746
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALVI VAISHALI AATYA
Seat Number : 1747
Name of the Institution : SHRI DHANESHWARI MANAV VIKAS MANDAL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/10/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASAVE GULABI TEJALA
Seat Number : 1748
Name of the Institution : SHRI DHANESHWARI MANAV VIKAS MANDAL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : III
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

13/01/2020

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

05/05/2001

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS VASAVE AARTI MANSING

**Seat Number**

1749

**Name of the Institution**

SHRI DHANESHWARI MANAV VIKAS MANDAL, AURANGABAD

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

**Subjects**

I III IV

**Signature of the Holder**

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

**Date Of Birth**

17/10/2000

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS CHAUDHARY SEEMA VIMALKUMAR

**Seat Number**

1750

**Name of the Institution**

SHRI SAI INSTITUTE OF NURSING, JALNA

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

**Subjects**

I II III IV

**Signature of the Holder**

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/04/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DAMRE DURGA RAMESH
Seat Number : 1751
Name of the Institution : SHRI SAI INSTITUTE OF NURSING, JALNA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/10/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GUNJAL SONAL ISHWAR
Seat Number : 1752
Name of the Institution : SHRI SAI INSTITUTE OF NURSING, JALNA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1753

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/09/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MORE POONAM DIPAK
Seat Number : 1753
Name of the Institution : SHRI SAI INSTITUTE OF NURSING, JALNA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1754

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/12/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SIRSAT SHILPA VISHWAS
Seat Number : 1754
Name of the Institution : SHRI SAI INSTITUTE OF NURSING, JALNA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 30/10/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHISE SWATI SHESHRAO

Seat Number : 1755
Name of the Institution : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 03/09/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BHOYAR TRUPTI DILIP

Seat Number : 1757

Name of the Institution : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 13/06/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS CHAVAN RAVINA BABU

Seat Number : 1758

Name of the Institution : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 03/03/1998

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS PAWARA PUNAM SUTARYA

Seat Number
: 1759

Name of the Institution
: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects
: I II III V VI IV

Signature of the Holder
:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1759

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 29/03/2000

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS CHITTE SIMA DEVIDAS

Seat Number
: 1760

Name of the Institution
: MATA GIRIJA SCHOOL OF NURSING, AURANGABAD.

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects
: I II III IV

Signature of the Holder
:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1760
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
17/08/1999

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS DANKE MANGAL SHRIPAT

Seat Number :
1761

Name of the Institution :
MATA GIRIJA SCHOOL OF NURSING, AURANGABAD.

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects :
III

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1761

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
27/05/2000

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS GHORPADE SONAL RAJU

Seat Number :
1762

Name of the Institution :
MATA GIRIJA SCHOOL OF NURSING, AURANGABAD.

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects :
III

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1762
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 11/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JADHAV POOJA PRAKASH

Seat Number : 1763
Name of the Institution : MATA GIRIJA SCHOOL OF NURSING, AURANGABAD.
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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Sr. No. 1763

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 04/03/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHARAT MAMTA KADUBA

Seat Number : 1764
Name of the Institution : MATA GIRIJA SCHOOL OF NURSING, AURANGABAD.
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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Sr. No. 1764
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/11/1989
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KUCHE SARIKA BABULAL
Seat Number : 1765
Name of the Institution : MATA GIRIJA SCHOOL OF NURSING, AURANGABAD.
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1765

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWAR PRIYANKA CHAGAN
Seat Number : 1766
Name of the Institution : MATA GIRIJA SCHOOL OF NURSING, AURANGABAD.
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1766
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/05/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT SARLA PANDIT
Seat Number : 1767
Name of the Institution : MATA GIRIJA SCHOOL OF NURSING, AURANGABAD.
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAKALE POOJA CHANDRAKANT
Seat Number : 1768
Name of the Institution : MATA GIRIJA SCHOOL OF NURSING, AURANGABAD.
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/03/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SONWANE SANGITA TEJRAO

Seat Number : 1769

Name of the Institution : MATA GIRIJA SCHOOL OF NURSING, AURANGABAD.

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1769

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 23/02/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS CHAUTHMAL PALLAVI AMBADAS

Seat Number : 1770

Name of the Institution : SAKOLKAR NURSING SCHOOL, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : I III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1770
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 03/08/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DABHADE DIPALI SURESH

Seat Number : 1771

Name of the Institution : SAKOLKAR NURSING SCHOOL, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : I II III

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 08/05/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PAGARE PRIYANKA KISHOR

Seat Number : 1772

Name of the Institution : SAKOLKAR NURSING SCHOOL, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : I III

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 11/02/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SHAIKH SHAGUFTA TARANNUM ABDUL HAMID

Seat Number : 1773

Name of the Institution : SAKOLKAR NURSING SCHOOL, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : I

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 13/05/1993

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BHALERAO KAVITA TEJRAO

Seat Number : 1774

Name of the Institution : RAMKRISHANA NURSING SCHOOL, SILLOD, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GUNJAL POOJA ASHOK
Seat Number : 1775
Name of the Institution : RAMKRISHANA NURSING SCHOOL, SILLOD, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE. 
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 11/03/1993

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS JAWALE VANDANA GAUTAM

Seat Number : 1777

Name of the Institution : RAMKRISHANA NURSING SCHOOL, SILLOD, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1777

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 10/06/1995

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SHELKE KSHIPRA SURESH

Seat Number : 1778

Name of the Institution : RAMKRISHANA NURSING SCHOOL, SILLOD, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1778
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/10/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SONAWANE JAYSHREE SANJAY
Seat Number : 1779
Name of the Institution : RAMKRISHANA NURSING SCHOOL, SILLOD, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGH POOJA DADARAO
Seat Number : 1780
Name of the Institution : RAMKRISHANA NURSING SCHOOL, SILLOD, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KOKARE PRIYANKA VISHNU
Seat Number : 1781
Name of the Institution : SWATANTRA SENANI UTTAMRAOJI PATIL NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. : 1781

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT RENUKA KACHARU
Seat Number : 1782
Name of the Institution : SWATANTRA SENANI UTTAMRAOJI PATIL NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. : 1782
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 21/09/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAVIT RUSHINA BHIMSING

Seat Number : 1783

Name of the Institution : AURANGABAD NURSING SCHOOL, BHALGAON, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects :

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 21/10/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PAWAR MANISHA DOHANA

Seat Number : 1784

Name of the Institution : AURANGABAD NURSING SCHOOL, BHALGAON, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects :

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Note:
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Note:
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/03/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAIBOLE PRANALI SURYAKANT
Seat Number : 1787
Name of the Institution : PAITHAN NURSING SCHOOL, PAITHAN, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/08/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TEJAD MAYURI DEVIDAS
Seat Number : 1788
Name of the Institution : PAITHAN NURSING SCHOOL, PAITHAN, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/10/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KASBE ASHVINI SARJERAO
Seat Number : 1789
Name of the Institution : PRIYANKA GANDHI NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder : 

Note:
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2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 1789

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/04/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHINDE VAISHALI DADARAO
Seat Number : 1790
Name of the Institution : PRIYANKA GANDHI NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 1790
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<th>Sr. No.</th>
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<td><strong>Name of the Institution</strong></td>
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<td><strong>Name of the Exam. Centre</strong></td>
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<td><strong>Subjects</strong></td>
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<td><strong>Signature of the Holder</strong></td>
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**Note:**
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 28/12/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PADVI AARTI RAMSING

Seat Number : 1793
Name of the Institution : Manik Nursing School, Garkhed, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I, II, III, IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Senior No. 1793

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 02/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PADVI RAJESHWARI SHANTARAM

Seat Number : 1794
Name of the Institution : Manik Nursing School, Garkhed, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PANDIT POOJA KESHAV

Seat Number : 1795
Name of the Institution : Manik Nursing School, Garkhed, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II III
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1795

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 18/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PATLE SAPNA RAGA

Seat Number : 1796
Name of the Institution : Manik Nursing School, Garkhed, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II III
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1796
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 19/06/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS PAWAR TEJASWINI RAJU

Seat Number: 1797

Name of the Institution: Manik Nursing School, Garkhed, Aurangabad

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects: II III

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1797

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 05/06/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS PAWARA BHARTI SAYSING

Seat Number: 1798

Name of the Institution: Manik Nursing School, Garkhed, Aurangabad

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects: II III IV

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1798
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 16/03/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS PAWARA SAVITA SETA

Seat Number: 1799

Name of the Institution: Manik Nursing School, Garkhed, Aurangabad

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects: I II III

Signature of the Holder:

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 01/04/2001

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS RITTHE CHAYA MAROTI

Seat Number: 1800

Name of the Institution: Manik Nursing School, Garkhed, Aurangabad

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects: I II III

Signature of the Holder:

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/07/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SURDKAR VISHAKHA RAJENDRA
Seat Number : 1801
Name of the Institution : Manik Nursing School, Garkhed, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II III
Signature of the Holder : REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1801

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TADAVI CHANDRAKALA NAGSEN
Seat Number : 1802
Name of the Institution : Manik Nursing School, Garkhed, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II III
Signature of the Holder : REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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Sr. No. 1802
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TADAVI PRIYANKA VIJAY
Seat Number : 1803
Name of the Institution : Manik Nursing School, Garkhed, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1803

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TADVI PRATIBHA RAVLYA
Seat Number : 1804
Name of the Institution : Manik Nursing School, Garkhed, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1804
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 21/08/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS THAKARE MAYA UDESING

Seat Number : 1805

Name of the Institution : Manik Nursing School, Garkhed, Aurangabad

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : II

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1805

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 03/05/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS THAKARE VANDANA PRAKASH

Seat Number : 1806

Name of the Institution : Manik Nursing School, Garkhed, Aurangabad

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : II III IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1806

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

---
HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALVI RANJANA VASANT
Seat Number : 1807
Name of the Institution : Manik Nursing School, Garkhed, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/01/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALVI AARTI DILWARSING
Seat Number : 1808
Name of the Institution : Manik Nursing School, Garkhed, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/02/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALVI YOGITA DASHRATH
Seat Number : 1809
Name of the Institution : Manik Nursing School, Garkhed, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1809

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/07/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALVI JEMALI SAMA
Seat Number : 1810
Name of the Institution : Manik Nursing School, Garkhed, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1810
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/02/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALVI SAKU TEMBARYA
Seat Number : 1811
Name of the Institution : Manik Nursing School, Garkhed, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. 1811

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VASAVE MAYA DILVARSING
Seat Number : 1812
Name of the Institution : Manik Nursing School, Garkhed, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II IV
Signature of the Holder : 

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Sr. No. 1812
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<th>1813</th>
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
09/01/2000

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS CHAVAN AMRAPALI ASHOK

**Seat Number**
1813

**Name of the Institution**
Mathsyodari Nursing School, Tal Ambad, Jalna

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

**Subjects**
-

**Signature of the Holder**

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**Note:**
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**Sr. No.**
1814

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
06/08/2000

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS KAWALE SUJATA MUKTARAM

**Seat Number**
1814

**Name of the Institution**
Mathsyodari Nursing School, Tal Ambad, Jalna

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

**Subjects**
-

**Signature of the Holder**

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**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

Sr. No. 1815

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/01/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHARAT KIRAN DIGAMBAR
Seat Number : 1815
Name of the Institution : Mathyodari Nursing School, Tal Ambad, Jalna
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1816

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHARAT RITA VIJAY
Seat Number : 1816
Name of the Institution : Mathyodari Nursing School, Tal Ambad, Jalna
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 13/11/1986
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NATKAR SHAKUNTALA SARJERAO
Seat Number : 1817
Name of the Institution : Mathsyodari Nursing School, Tal Ambad, Jalna
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 06/01/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RANDHAVE SANDHYA SATISH
Seat Number : 1818
Name of the Institution : Mathsyodari Nursing School, Tal Ambad, Jalna
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 08/09/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SONAWANE SONALI PANDURANG
Seat Number: 1821
Name of the Institution: Mathsyodari Nursing School, Tal Ambad, Jalna
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects: I II
Signature of the Holder

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1821

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 11/04/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS ZOTE SAPNA AASARAM
Seat Number: 1822
Name of the Institution: Mathsyodari Nursing School, Tal Ambad, Jalna
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects: I II
Signature of the Holder

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1822
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MANDALE ANURADHA ANANDRAO
Seat Number : 1823
Name of the Institution : DHARTI SCHOOL OF NURSING MALEGAON RD NANGED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II III
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MARKAD NIRMALA MOHAN
Seat Number : 1824
Name of the Institution : DHARTI SCHOOL OF NURSING MALEGAON RD NANGED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II
Signature of the Holder :

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**Sr. No.** 1825

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
08/07/1997

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS MESRAM ASHWINI RAMESH

**Seat Number**
1825

**Name of the Institution**
DHARTI SCHOOL OF NURSING MALEGAON RD NANDED

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

**Subjects**
I II III IV

**Signature of the Holder**

---

**Note:**
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**Sr. No.** 1826

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
10/04/1996

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS NIWDANGE ASHWINI SIDDHARTH

**Seat Number**
1826

**Name of the Institution**
DHARTI SCHOOL OF NURSING MALEGAON RD NANDED

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

**Subjects**
II III

**Signature of the Holder**

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**Note:**
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HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 17/07/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS PAIKRAO TRISHALA BHIMRAO
Seat Number: 1827
Name of the Institution: DHARTI SCHOOL OF NURSING MALEGAON RD NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects: II III
Signature of the Holder: 

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HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 01/05/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS PAIKRAO MANISHA GANESH
Seat Number: 1828
Name of the Institution: DHARTI SCHOOL OF NURSING MALEGAON RD NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects: II III IV
Signature of the Holder: 

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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RANVIR POOJA SAMBHAJI
Seat Number : 1829
Name of the Institution : DHARTI SCHOOL OF NURSING MALEGAON RD Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II IV
Signature of the Holder : 

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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BANKAR ASHA KALYAN
Seat Number : 1830
Name of the Institution : Yeshwant Institute of Nursing, Paithan Road, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I IV
Signature of the Holder : 

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<tr>
<th>Sr. No.</th>
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<td>MISS DAKE PRITI DILIP</td>
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<tr>
<td>Seat Number</td>
<td>1831</td>
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<tr>
<td>Name of the Institution</td>
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<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<td>Name of the Exam. Centre</td>
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</tr>
<tr>
<td>Subjects</td>
<td>I II III IV</td>
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<tr>
<td>Date Of Birth</td>
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</tr>
<tr>
<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
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<td>Name of the Candidate</td>
<td>MISS GAWAI SHITAL MADAN</td>
</tr>
<tr>
<td>Seat Number</td>
<td>1832</td>
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<tr>
<td>Name of the Institution</td>
<td>Yeshwant Institute of Nursing, Paithan Road, Aurangabad</td>
</tr>
<tr>
<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td>Name of the Exam. Centre</td>
<td>MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD</td>
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<td>Subjects</td>
<td>II</td>
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<tr>
<td>Date Of Birth</td>
<td>20/06/2000</td>
</tr>
<tr>
<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

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<td><strong>For the</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
</tr>
<tr>
<td><strong>Date Of Birth</strong></td>
<td>05/01/1999</td>
</tr>
<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
</tr>
<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS GHUKASE ANITA SHIVAJI</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
<td>1833</td>
</tr>
<tr>
<td><strong>Name of the Institution</strong></td>
<td>Yeshwant Institute of Nursing, Paithan Road, Aurangabad</td>
</tr>
<tr>
<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
</tr>
<tr>
<td><strong>Name of the Exam. Centre</strong></td>
<td>MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD</td>
</tr>
<tr>
<td><strong>Subjects</strong></td>
<td>I II III IV</td>
</tr>
<tr>
<td><strong>Signature of the Holder</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>1834</th>
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</thead>
<tbody>
<tr>
<td><strong>For the</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
</tr>
<tr>
<td><strong>Date Of Birth</strong></td>
<td>13/03/2000</td>
</tr>
<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
</tr>
<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS JADHAV SHUBHANGI ASHOK</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
<td>1834</td>
</tr>
<tr>
<td><strong>Name of the Institution</strong></td>
<td>Yeshwant Institute of Nursing, Paithan Road, Aurangabad</td>
</tr>
<tr>
<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
</tr>
<tr>
<td><strong>Name of the Exam. Centre</strong></td>
<td>MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD</td>
</tr>
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<td><strong>Subjects</strong></td>
<td>II</td>
</tr>
<tr>
<td><strong>Signature of the Holder</strong></td>
<td></td>
</tr>
</tbody>
</table>

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/08/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KASBE MANISHA SHAMRAO
Seat Number : 1835
Name of the Institution : Yeshwant Institute of Nursing, Paithan Road, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1835

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/07/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MHASKE PRADNYA BHUSHAN
Seat Number : 1836
Name of the Institution : Yeshwant Institute of Nursing, Paithan Road, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. 1836
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/05/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWAR SONU CHAGAN
Seat Number : 1839
Name of the Institution : Yeshwant Institute of Nursing, Paithan Road, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III V VI IV
Signature of the Holder :

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWAR SUJATA CHANDRAKANT
Seat Number : 1840
Name of the Institution : Yeshwant Institute of Nursing, Paithan Road, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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<th>Date Of Birth</th>
<th>Date Of Exam</th>
<th>Name of the Institution</th>
<th>Seat Number</th>
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<td>1841</td>
<td>MISS RAUT SAKSHI RAVINDRA</td>
<td>25/10/2000</td>
<td>14/01/2020 To 17/01/2020</td>
<td>Yeshwant Institute of Nursing, Paithan Road, Aurangabad</td>
<td>1841</td>
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<tr>
<td>1842</td>
<td>MISS SALVE PRIYANKA VIJAY</td>
<td>12/11/1999</td>
<td>14/01/2020 To 17/01/2020</td>
<td>Yeshwant Institute of Nursing, Paithan Road, Aurangabad</td>
<td>1842</td>
</tr>
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</table>

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 25/09/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PAWARA GOWALI FOGLYA

Seat Number : 1843

Name of the Institution : Prabhavati Nursing School, Aurangabad

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 03/01/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PAWARA KAVITA LULA

Seat Number : 1844

Name of the Institution : Prabhavati Nursing School, Aurangabad

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : I II

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 04/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SATDIVE SEEMA AMBADAS
Seat Number : 1845
Name of the Institution : Prabhavati Nursing School, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No.  1845

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 05/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHISE MINA BHARAT
Seat Number : 1846
Name of the Institution : GOGANATH BABA ANM NURSING SCHOOL CHITEGAON AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the
MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/07/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHIVSANE VAISHALI KAILAS
Seat Number : 1851
Name of the Institution : SHRI GORAKSHA NURSING SCHOOL, PHULAMBRI, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : III
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDIFERY FIRST YEAR to be held in January2020

Date Of Birth : 24/05/1987

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : SMT CHOUDHARI KOMAL SHASHIKANT Nee(TRIMBAKE KOMAL ANAND)

Seat Number : 1853

Name of the Institution : SHRI GORAKSHA NURSING SCHOOL, PHULAMBRI, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : I II IV

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/06/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHARAT SHEETAL LAXMAN
Seat Number : 1855
Name of the Institution : SHRI GORAKSHA NURSING SCHOOL, PHULAMBRI, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1855

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHETRE BHARTI SUNIL
Seat Number : 1856
Name of the Institution : SHRI GORAKSHA NURSING SCHOOL, PHULAMBRI, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1856
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHILLARE ASHVINI MADHAV
Seat Number : 1857
Name of the Institution : SHRI GORAKSHA NURSING SCHOOL, PHULAMBRI, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWAR PRITI EKNATH
Seat Number : 1858
Name of the Institution : SHRI GORAKSHA NURSING SCHOOL, PHULAMBRI, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/09/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SIRSATH BHAGYSHRI SANTUKRAO
Seat Number : 1859
Name of the Institution : SHRI GORAKSHA NURSING SCHOOL, PHULAMBRI, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/04/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SONAWANE PREETI ARJUN
Seat Number : 1860
Name of the Institution : SHRI GORAKSHA NURSING SCHOOL, PHULAMBRI, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ABHANG KAVAL GAUTAM
Seat Number : 1861
Name of the Institution : MAHARAJA SAYAJIRAO GAIKWAD NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DEHADE ROHINI SHESHAO
Seat Number : 1862
Name of the Institution : MAHARAJA SAYAJIRAO GAIKWAD NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Sr. No. 1863

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
01/01/2001

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS KHARAT RADHA KAKAJI

Seat Number :
1863

Name of the Institution :
MAHARAJA SAYAJIRAO GAJKWAD NURSING SCHOOL, AURANGABAD

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects :
I II III IV

Signature of the Holder :

---

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### Sr. No. 1864

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
20/09/1999

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS SABLE PRIYANKA HARISHCHANDRA

Seat Number :
1864

Name of the Institution :
MAHARAJA SAYAJIRAO GAJKWAD NURSING SCHOOL, AURANGABAD

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects :
I II

Signature of the Holder :

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**Note:**
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2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 06/07/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : Miss Pawara Kalpana Lakadya

Seat Number : 1871

Name of the Institution : Dr. Dahipha Foundation Trust's School of Nursing, Aurangabad

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Mahatma Gandhi Mission Institute of Nursing Education, Aurangabad

Subjects : I

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

SR. NO. 1871

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 16/05/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : Miss Pawara Anita Suklal

Seat Number : 1872

Name of the Institution : Dr. Dahipha Foundation Trust's School of Nursing, Aurangabad

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : Mahatma Gandhi Mission Institute of Nursing Education, Aurangabad

Subjects : IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

SR. NO. 1872
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**Date of Exam:** 13/01/2020

<table>
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<tr>
<th>Sr. No.</th>
<th>1873</th>
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<tbody>
<tr>
<td>For the</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
</tr>
<tr>
<td>Date Of Birth</td>
<td>28/08/1994</td>
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<tr>
<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td>Name of the Candidate</td>
<td>MISS PAWARA LALITA INDRASING</td>
</tr>
<tr>
<td>Seat Number</td>
<td>1873</td>
</tr>
<tr>
<td>Name of the Institution</td>
<td>DR. DAHIPHALE MEDICAL FOUNDATION TRUST'S SCHOOL OF NURSING, AURANGABAD</td>
</tr>
<tr>
<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
</tr>
<tr>
<td>Name of the Exam. Centre</td>
<td>MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD</td>
</tr>
<tr>
<td>Subjects</td>
<td>I II IV</td>
</tr>
<tr>
<td>Signature of the Holder</td>
<td></td>
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</tbody>
</table>

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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---

<table>
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<tr>
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<td>For the</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<tr>
<td>Date Of Birth</td>
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<tr>
<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td>Name of the Candidate</td>
<td>MISS PAWARA PRAMILA MERASING</td>
</tr>
<tr>
<td>Seat Number</td>
<td>1874</td>
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<tr>
<td>Name of the Institution</td>
<td>DR. DAHIPHALE MEDICAL FOUNDATION TRUST'S SCHOOL OF NURSING, AURANGABAD</td>
</tr>
<tr>
<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<td>Name of the Exam. Centre</td>
<td>MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD</td>
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<td>Subjects</td>
<td>I IV</td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA AASHA MERSING
Seat Number : 1875
Name of the Institution : DR. DAHIPHALE MEDICAL FOUNDATION TRUST'S SCHOOL OF NURSING, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1876

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA KAVITA DADALA
Seat Number : 1876
Name of the Institution : DR. DAHIPHALE MEDICAL FOUNDATION TRUST'S SCHOOL OF NURSING, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/03/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAWARA HINA JANYA
Seat Number : 1877
Name of the Institution : DR. DHARPHALE MEDICAL FOUNDATION TRUST'S SCHOOL OF NURSING, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I
Signature of the Holder :

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REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 1877

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALVI KALPANA SHILDAR
Seat Number : 1878
Name of the Institution : DR. DHARPHALE MEDICAL FOUNDATION TRUST'S SCHOOL OF NURSING, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 1878
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 01/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS VALVI FUGI NAHLYA
Seat Number : 1879
Name of the Institution : DR. DAHIPALE MEDICAL FOUNDATION TRUST'S SCHOOL OF NURSING, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II IV
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHANEDHAR NISHA BABASAHEB
Seat Number : 1883
Name of the Institution : SAVITRIBAI PHULE NURSING SCHOOL, KANNAD, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1883

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/06/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD ASHVINI DAULAT
Seat Number : 1884
Name of the Institution : SAVITRIBAI PHULE NURSING SCHOOL, KANNAD, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1884
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

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<td><strong>Date Of Birth</strong></td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
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<td><strong>Name of the Institution</strong></td>
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<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td><strong>Name of the Exam. Centre</strong></td>
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<td><strong>Subjects</strong></td>
<td>I II III V VI IV</td>
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

#### HALL TICKET

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<td>02/08/1999</td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS GOPHANE PRIYANKA RAJESH</td>
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<td><strong>Seat Number</strong></td>
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<td><strong>Name of the Institution</strong></td>
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<td><strong>Name of the Examination</strong></td>
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<td><strong>Name of the Exam. Centre</strong></td>
<td>MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD</td>
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<td><strong>Subjects</strong></td>
<td>I II III V VI IV</td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/05/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS JADHAV SUJATA LAXMAN

Seat Number : 1887

Name of the Institution : SAVITRIBAI PHULE NURSING SCHOOL, KANNAD, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : IV

Signature of the Holder :

Note:
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Sr. No. 1887

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 20/06/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KHARAT SAVITA EKNATH

Seat Number : 1888

Name of the Institution : SAVITRIBAI PHULE NURSING SCHOOL, KANNAD, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : I II III V VI IV

Signature of the Holder :

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Sr. No. 1888
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 10/01/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS MORE PRIYANKA ANNA

Seat Number: 1889
Name of the Institution: SAVITRIBAI PHULE NURSING SCHOOL, KANAD, AURANGABAD
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects: I II III V VI IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1889

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 03/03/1997
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SATHE PRIYANKA SHIVAJEE

Seat Number: 1890
Name of the Institution: SAVITRIBAI PHULE NURSING SCHOOL, KANAD, AURANGABAD
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects: I II III V VI IV
Signature of the Holder: 

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Sr. No. 1890
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/05/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHEJWAL SANDHYA SUBHASH
Seat Number : 1891
Name of the Institution : SAVITRIBAI PHULE NURSING SCHOOL, KANNAD, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III V VI IV
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SURADKAR SADHANA ANNASAHEB
Seat Number : 1892
Name of the Institution : SAVITRIBAI PHULE NURSING SCHOOL, KANNAD, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III V VI IV
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 11/12/1996

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS TRIBHAVAN ARTI RAMDAS

Seat Number : 1893

Name of the Institution : SHEETAL NURSING SCHOOL, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : II

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1893

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/01/1995

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS TRIBHUVAN POOJA RAMDAS

Seat Number : 1894

Name of the Institution : SHEETAL NURSING SCHOOL, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : II

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1894
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 12/08/1997

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS GAIKAWAD ASHVINI DHONDU

Seat Number
: 1895

Name of the Institution
: BHARTIYA NURSING SCHOOL, AURANGABAD

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects
: I II III IV

Signature of the Holder
: 

Note:
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Sr. No. 1895

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 16/12/1999

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS GAWAI KOMAL BABAN

Seat Number
: 1896

Name of the Institution
: BHARTIYA NURSING SCHOOL, AURANGABAD

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects
: I III

Signature of the Holder
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
04/01/1985

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS GAWLI CHHAYA GAUTAM

Seat Number :
1897

Name of the Institution :
BHARTIYA NURSING SCHOOL, AURANGABAD

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects :
I

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1897

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
07/12/1990

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS JADHAV SONALI NARAYAN

Seat Number :
1898

Name of the Institution :
BHARTIYA NURSING SCHOOL, AURANGABAD

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects :
III IV

Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 15/08/1996

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS JADHAV DIPALI VIJAY

Seat Number : 1899

Name of the Institution : BHARTIYA NURSING SCHOOL, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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---

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/08/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KAMBLE PRATIKSHA RAJU

Seat Number : 1900

Name of the Institution : BHARTIYA NURSING SCHOOL, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 10/05/1998

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS KHILLARE KALYANI NAMDEV

Seat Number: 1901

Name of the Institution: BHARTIYA NURSING SCHOOL, AURANGABAD

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects: I II

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1901

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 18/06/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS MORE KAJAL VIKRAM

Seat Number: 1902

Name of the Institution: BHARTIYA NURSING SCHOOL, AURANGABAD

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects: I II III IV

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1902
### Hall Ticket

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

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<tr>
<th>Sr. No.</th>
<th>Name</th>
<th>Date Of Birth</th>
<th>Date Of Exam</th>
<th>Name of the Candidate</th>
<th>Seat Number</th>
<th>Name of the Institution</th>
<th>Name of the Examination</th>
<th>Name of the Exam. Centre</th>
<th>Subjects</th>
<th>Signature of the Holder</th>
</tr>
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<td>MISS NAVKAR CHHAYA CHARAN</td>
<td>03/03/1986</td>
<td>14/01/2020 To 17/01/2020</td>
<td>BHARTIYA NURSING SCHOOL, AURANGABAD</td>
<td>1903</td>
<td>MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
<td>MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD</td>
<td>I II III IV</td>
<td></td>
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</tbody>
</table>

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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<th>Name of the Candidate</th>
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<th>Subjects</th>
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<td>1904</td>
<td>MISS WARGHAT DIKSHA SURESH</td>
<td>18/02/1998</td>
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<td>1904</td>
<td>MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
<td>MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD</td>
<td>III IV</td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/09/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DANDGE SHITAL RAJENDRA
Seat Number : 1905
Name of the Institution : AURANGABAD NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. : 1905

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/02/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DEVRE RUCHITA PRABHAKAR
Seat Number : 1906
Name of the Institution : AURANGABAD NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : 
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. : 1906
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 25/06/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS JADHAV RUPALI SHAILENDRA

Seat Number : 1907

Name of the Institution : AURANGABAD NURSING SCHOOL, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 11/02/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KHADE KOMAL ATTMARAM

Seat Number : 1908

Name of the Institution : AURANGABAD NURSING SCHOOL, AURANGABAD

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects : I

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 02/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NARWADE PAYAL BHIKA

Seat Number : 1909
Name of the Institution : AURANGABAD NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/06/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SALVE SHEETAL NARAYAN
Seat Number : 1911
Name of the Institution : AURANGABAD NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SURYAVANSHI DIKSHA SUDAM
Seat Number : 1913
Name of the Institution : AURANGABAD NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/11/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAKEKAR HARNA VISHNU
Seat Number : 1914
Name of the Institution : AURANGABAD NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 30/12/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AVHAD SAVITRI RATNAKAR
Seat Number : 1915
Name of the Institution : SHAHNAWAZ NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 27/03/1989
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GIRE SWATI TRIMBAK
Seat Number : 1917
Name of the Institution : SHAHNAWAZ NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1917

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 04/05/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KALE SEEMA SUBHASH
Seat Number : 1918
Name of the Institution : SHAHNAWAZ NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1918
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KALE PRATIBHA NANA
Seat Number : 1919
Name of the Institution : SHAHNAWAZ NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1919

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHARAT RUPALI GANGADHAR
Seat Number : 1920
Name of the Institution : SHAHNAWAZ NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1920
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 17/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NIKALJE DURGA PANDHARINATH

Seat Number : 1921
Name of the Institution : SHAHNAWAZ NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1921

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 22/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PANPATIL SUNITA KADUBA

Seat Number : 1922
Name of the Institution : SHAHNAWAZ NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1922
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SALVE SARIKA SUNDARLAL
Seat Number : 1923
Name of the Institution : SHAHNAWAZ NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1923

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHMARE AISHWARYA BHASKAR
Seat Number : 1924
Name of the Institution : SHAHNAWAZ NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DUNBALE SAKSHI DEELIP
Seat Number : 1925
Name of the Institution : SHAHU MAHARAJ NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1925

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/06/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS HIWRALE AKANKSHA ASHOK
Seat Number : 1926
Name of the Institution : SHAHU MAHARAJ NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/12/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MHASKE BHAVANA PRAVIN
Seat Number : 1927
Name of the Institution : SHAHU MAHARAJ NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1927

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/08/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RIDLON PRITI DILIP
Seat Number : 1928
Name of the Institution : SHAHU MAHARAJ NURSING SCHOOL, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : I II III IV
Signature of the Holder : 

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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1928
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/04/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MISAL SUNITA HARI
Seat Number : 1929
Name of the Institution : Aurangabad Training School of Nursing, Shivajinagar, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PUNDAGE RAJNANDANI SUBHASH
Seat Number : 1930
Name of the Institution : Aurangabad Training School of Nursing, Shivajinagar, Aurangabad
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
07/05/1999

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS SHIRSAT MANISHA ARJUN

Seat Number
1931

Name of the Institution
Aurangabad Training School of Nursing, Shivajinagar, Aurangabad

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects
II III

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1931

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
09/01/1989

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS AVCHAR ANITA ANANDA

Seat Number
1932

Name of the Institution
MONICA NURSING SCHOOL, AURANGABAD

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects
III IV

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1932
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
29/12/1998

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS DHAKTODE JYOTI ARJUN

Seat Number :
1933

Name of the Institution :
MONICA NURSING SCHOOL, AURANGABAD

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects :
II III IV

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 10/04/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS SHEJWAL AKANSHA ASHOK

Seat Number: 1937

Name of the Institution: MONICA NURSING SCHOOL, AURANGABAD

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects: I II III IV

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1937

---

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 01/06/1992

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS TADVI SAINAD MUSA

Seat Number: 1938

Name of the Institution: MONICA NURSING SCHOOL, AURANGABAD

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Subjects: I II III IV

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1938
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 26/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JADHAV AISHWARYA RAMESH
Seat Number : 1939
Name of the Institution : CIVIL HOSPITAL, AMKHAS MAIDAN, AURANGABAD
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 27/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ACHARY SUMEDHA NANDLAL
Seat Number : 1940
Name of the Institution : INDIRA GANDHI NURSING SCHOOL, LATUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Latur
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
# Hall Ticket

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the** : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth** : 25/05/1997

**Date Of Exam** : 14/01/2020 To 17/01/2020

**Name of the Candidate** : MISS DAKORE SHITAL SAHEBRAO

**Seat Number** : 1941

**Name of the Institution** : INDIRA GANDHI NURSING SCHOOL, LATUR

**Name of the Examination** : AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre** : GENERAL HOSPITAL, Latur

**Subjects** : III IV

<table>
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<th>Sr. No.</th>
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**Signature of the Holder** :

---

**Note:**

1) Candidate will not be allowed in examination hall without this Hall Ticket.

2) Practical Examination centre shall be as directed by the MSBNPE.

3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the** : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth** : 01/01/1999

**Date Of Exam** : 14/01/2020 To 17/01/2020

**Name of the Candidate** : MISS LOKHANDE POOJA LIMBRAJ

**Seat Number** : 1942

**Name of the Institution** : INDIRA GANDHI NURSING SCHOOL, LATUR

**Name of the Examination** : AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre** : GENERAL HOSPITAL, Latur

**Subjects** : I III IV

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<th>1942</th>
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**Signature of the Holder** :

---

**Note:**

1) Candidate will not be allowed in examination hall without this Hall Ticket.

2) Practical Examination centre shall be as directed by the MSBNPE.

3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/04/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHINDE KIRAN SHIVAJI
Seat Number : 1943
Name of the Institution : INDIRA GANDHI NURSING SCHOOL, Latur
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Latur
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1943

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHMARE PRIYA JALINDAR
Seat Number : 1944
Name of the Institution : INDIRA GANDHI NURSING SCHOOL, Latur
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Latur
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1944
### Hall Ticket

**For the:**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:**
10/06/2000

**Date Of Exam:**
14/01/2020 To 17/01/2020

**Name of the Candidate:**
MISS KEDASE POOJA DHONDIRAM

**Seat Number:**
1945

**Name of the Institution:**
G.B. PATIL SCHOOL OF NURSING, UDGIR, LATUR

**Name of the Examination:**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:**
GENERAL HOSPITAL, Latur

**Subjects:**
I II III IV

**Signature of the Holder:**

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### Hall Ticket

**For the:**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth:**
22/08/2000

**Date Of Exam:**
14/01/2020 To 17/01/2020

**Name of the Candidate:**
MISS WADEKAR RESHMA SUBHASH

**Seat Number:**
1946

**Name of the Institution:**
G.B. PATIL SCHOOL OF NURSING, UDGIR, LATUR

**Name of the Examination:**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:**
GENERAL HOSPITAL, Latur

**Subjects:**
II III

**Signature of the Holder:**

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Hall Ticket

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

13/01/2020

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<td>Date Of Birth</td>
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<td>MISS BORASA PRATIMA PANDURANG</td>
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<td>Name of the Institution</td>
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<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<td>Subjects</td>
<td>III</td>
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<td>Signature of the Holder</td>
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**Note:**

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### Hall Ticket

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

13/01/2020

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<th>Sr. No.</th>
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<td>For the</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<td>Date Of Birth</td>
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<td>Date Of Exam</td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td>Name of the Candidate</td>
<td>MISS HADAL MAMATA CHANDU</td>
</tr>
<tr>
<td>Seat Number</td>
<td>1948</td>
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<tr>
<td>Name of the Institution</td>
<td>YASHWANT NURSING TRAINING SCHOOL, AHMADPUR, LATUR</td>
</tr>
<tr>
<td>Name of the Examination</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td>Name of the Exam. Centre</td>
<td>GENERAL HOSPITAL, Latur</td>
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<td>Subjects</td>
<td>IV</td>
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<td>Signature of the Holder</td>
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</table>

**Note:**

1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 25/07/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KALWALE SHITAL DATTATRYA

Seat Number : 1949

Name of the Institution : YASHWANT NURSING TRAINING SCHOOL, AHMADPUR, LATUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Latur

Subjects : IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1949

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 22/10/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS VARANGADE ANKITA KRISHNA

Seat Number : 1950

Name of the Institution : YASHWANT NURSING TRAINING SCHOOL, AHMADPUR, LATUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Latur

Subjects : IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1950
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/11/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE VAISHALI GAUTAM
Seat Number : 1951
Name of the Institution : LATE MAHALINGE SWAMI NURSING SCHOOL, LATUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Latur
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 19/06/2000
Name of the Candidate : MISS WAGHMARE PRADNYA DILIP
Seat Number : 1952
Name of the Institution : LATE MAHALINGE SWAMI NURSING SCHOOL, LATUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Latur
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 04/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BANSODE PAYAL KAMLAKAR
Seat Number : 1953
Name of the Institution : New Vision School of Nursing, Latur
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Latur
Subjects : I II III V VI IV
Signature of the Holder : [Signature]

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 07/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JADHAV NEHA SUBHASH
Seat Number : 1954
Name of the Institution : New Vision School of Nursing, Latur
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Latur
Subjects : III
Signature of the Holder : [Signature]
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 06/01/2001

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS SHIVNE ROHINI SANJAY

Seat Number: 1955

Name of the Institution: New Vision School of Nursing, Latur

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Latur

Subjects: I III IV

Signature of the Holder: 

Note:

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1955

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 03/07/1998

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS HEMADE PUNAM GUNA

Seat Number: 1956

Name of the Institution: Sarojini Naidu School of Nursing, Chakur, Latur

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Latur

Subjects: III

Signature of the Holder: 

Note:

1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT ALKA DEVARAM
Seat Number : 1957
Name of the Institution : Sarojini Naidu School of Nursing, Chakur, Latur
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Latur
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1957

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/05/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE ANURADHA VITTHAL
Seat Number : 1958
Name of the Institution : DAYEE INSTITUTE OF NURSING, LATUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Latur
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1958
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date of Birth : 15/05/1993
Date of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MEHER SUPRIYA SHANKARRAO
Seat Number : 1959
Name of the Institution : DAYEE INSTITUTE OF NURSING, LATUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Latur
Subjects : II
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date of Birth : 08/09/2001
Date of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SABLE POOJA NARAYAN
Seat Number : 1960
Name of the Institution : DAYEE INSTITUTE OF NURSING, LATUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Latur
Subjects : I
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/03/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS JONDHALE YASHWANTI SHIVAJI

Seat Number : 1961

Name of the Institution : PUSHPAI NURSING SCHOOL, AHMEDPUR, LATUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Latur

Subjects : I II III V VI IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 11/04/1986

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KAMBLE NANDANA VITTHAL

Seat Number : 1962

Name of the Institution : PUSHPAI NURSING SCHOOL, AHMEDPUR, LATUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Latur

Subjects : III

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 05/06/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS TARUDE VAISHNAVI BALAJI
Seat Number: 1963
Name of the Institution: PUSHPAI NURSING SCHOOL, AHMEDPUR, LATUR
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Latur
Subjects: I II III V VI IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1963

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 20/08/1995
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS TARUDE JAYSHRI LAXMAN
Seat Number: 1964
Name of the Institution: PUSHPAI NURSING SCHOOL, AHMEDPUR, LATUR
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: GENERAL HOSPITAL, Latur
Subjects: I II III V VI IV
Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1964
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 04/05/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS WAGHMARE RAMABAI DINKAR

Seat Number: 1965

Name of the Institution: PUSHPAI NURSING SCHOOL, AHMEDPUR, LATUR

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Latur

Subjects: I II III V VI IV

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1966

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 02/11/1996

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS WAGHMARE JYOTI PRALHAD

Seat Number: 1966

Name of the Institution: PUSHPAI NURSING SCHOOL, AHMEDPUR, LATUR

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: GENERAL HOSPITAL, Latur

Subjects: I II III V VI IV

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
13/08/1999

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS KAMBLE KAJAL GANGADHAR

Seat Number:
1967

Name of the Institution:
SAVITHRIBAI PULE NURSING SCHOOL, JALKOT, LATUR

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
GENERAL HOSPITAL, Latur

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

13/01/2020

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
19/05/2000

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS RATHOD PRIYANKA RAJARAM

**Seat Number**
1969

**Name of the Institution**
SAVITHRIBAI PULE NURSING SCHOOL, JALKOT, LATUR

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
GENERAL HOSPITAL, Latur

**Signature of the Holder**

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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

13/01/2020

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
04/04/1999

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS BIRHADE PALLAVI GANPATI

**Seat Number**
1970

**Name of the Institution**
RAJMATA AHILYA DEVI INSTITUTION OF NURSING, PARBHANI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

**Subjects**
I II III IV

**Signature of the Holder**

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**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 02/07/1991

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAYAKWAD JYOTI CHIMAJI

Seat Number : 1971

Name of the Institution : RAJMATA AHILYA DEVI INSTITUTION OF NURSING, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Signature of the Holder:

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
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Date Of Birth : 01/10/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GHANSAWANT SPANA KISHOR

Seat Number : 1972

Name of the Institution : RAJMATA AHILYA DEVI INSTITUTION OF NURSING, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Signature of the Holder:

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
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2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/03/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHANDARE BABYTAI GANGADHAR
Seat Number : 1973
Name of the Institution : RAJMATA AHILYA DEVI INSTITUTION OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II III
Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 1973

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MANWATE SHITAL KERBA
Seat Number : 1974
Name of the Institution : RAJMATA AHILYA DEVI INSTITUTION OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II III IV
Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 1974
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/11/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NETANE SWAPNA RAMESHWAR
Seat Number : 1975
Name of the Institution : RAJMATA AHILYA DEVI INSTITUTION OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : II III
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1975

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/10/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NIKALJE SHILPA BHASKAR
Seat Number : 1976
Name of the Institution : RAJMATA AHILYA DEVI INSTITUTION OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : II III
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1976
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 15/01/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS NIKHATE ALKA GANGADHAR
Seat Number: 1977
Name of the Institution: RAJMATA AHILYA DEVI INSTITUTION OF NURSING, PARBHANI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects: I II III
Signature of the Holder: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. 1977

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 09/03/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS THORAT USHA PRALHAD
Seat Number: 1978
Name of the Institution: RAJMATA AHILYA DEVI INSTITUTION OF NURSING, PARBHANI
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects: I II III
Signature of the Holder: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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Sr. No. 1978
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 26/05/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS BHAGAT SEEMA SANJAY

Seat Number: 1979

Name of the Institution: KAI. MUNIRAM NIKE NURSING SCHOOL, SONPETH, PARBHANI

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Subjects: [ ]

Signature of the Holder: [ ]

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 1981

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE UJWALA DNYANOBA
Seat Number : 1981
Name of the Institution : KAI. MUNIRAM NIKE NURSING SCHOOL, SONPETH, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1982

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/02/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHADSE RUPALI DEORAO
Seat Number : 1982
Name of the Institution : KAI. MUNIRAM NIKE NURSING SCHOOL, SONPETH, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects :
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 04/03/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KSHIRSAGAR AYODHYA DNYANOBA

Seat Number : 1983

Name of the Institution : KAI. MUNIRAM NIKE NURSING SCHOOL, SONPETH, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Subjects : IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 16/10/1995

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS RATHOD PRIYANKA SURESH

Seat Number : 1984

Name of the Institution : KAI. MUNIRAM NIKE NURSING SCHOOL, SONPETH, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Subjects : I II

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NARWADE PRATIKSHA BHAURAO
Seat Number : 1985
Name of the Institution : SHRAVNI INSTISUTE OF NURSING, BASMAT, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 1985

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/03/1989
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAIKRAO TAI GANPAT
Seat Number : 1986
Name of the Institution : SHRAVNI INSTISUTE OF NURSING, BASMAT, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 1986
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
21/11/1999

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS AVCHAR NIKITA RAMESHWAR

**Seat Number**
1987

**Name of the Institution**
SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

**Subjects**
I  II  IV

**Signature of the Holder**

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**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
24/04/1998

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS RASAL POOJA RAMESH

**Seat Number**
1988

**Name of the Institution**
SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

**Subjects**
I  II  III  IV

**Signature of the Holder**

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**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAKODE VAISHALI SUKHDEV
Seat Number : 1989
Name of the Institution : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II
Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SUGANDHE PRAJAWATI RAGHUNATHRAO
Seat Number : 1990
Name of the Institution : TORJA NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : IV
Signature of the Holder : 

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 07/09/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BALKHANDE VIJAYAKHA BANDU

Seat Number : 1991

Name of the Institution : INDIRA GANDHI NURSING SCHOOL, BASMAT, HINGOLI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Subjects : III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 24/10/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAYKWAD VANDANA RAJARAM

Seat Number : 1992

Name of the Institution : INDIRA GANDHI NURSING SCHOOL, BASMAT, HINGOLI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Subjects : III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JADHAV RANI BHARAT
Seat Number : 1993
Name of the Institution : INDIRA GANDHI NURSING SCHOOL, BASMAT, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1993

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LOKHANDE RUPALI RAOSAHEB
Seat Number : 1994
Name of the Institution : INDIRA GANDHI NURSING SCHOOL, BASMAT, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/01/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SURYAWANSHI KALPANA MARIBA

Seat Number : 1995

Name of the Institution : INDIRA GANDHI NURSING SCHOOL, BASMAT, HINGOLI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 1995

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 13/05/1997

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS THORAT POONAM UTTAM

Seat Number : 1996

Name of the Institution : INDIRA GANDHI NURSING SCHOOL, BASMAT, HINGOLI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Subjects : I III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 1996
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<td><strong>HALL TICKET</strong></td>
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<td><strong>Date Of Exam</strong></td>
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**Note:**
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**Note:**
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2) Practical Examination centre shall be as directed by the MSBNPE.
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 20/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DUDHALKAR DROPADA APPARAO
Seat Number : 1999
Name of the Institution : YESHWANT INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II III IV
Signature of the Holder : REGISTRAR

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 09/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHANDARE SUNITA RESHMAJI
Seat Number : 2000
Name of the Institution : YESHWANT INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II III IV
Signature of the Holder : REGISTRAR

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KURUDE KOMAL BABAN
Seat Number : 2001
Name of the Institution : YESHWANT INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I, II, III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2001

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAGADE PUNAM SANJAY
Seat Number : 2002
Name of the Institution : YESHWANT INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I, II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2002
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/12/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DAHALANE PRATIMA SAHEBRAO
Seat Number : 2003
Name of the Institution : MOTHER TERESA NURSING SCHOOL, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ITAKARE RUPA BALKRUSHNA
Seat Number : 2004
Name of the Institution : MOTHER TERESA NURSING SCHOOL, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JOGDAND PUJA NAGORAO
Seat Number : 2005
Name of the Institution : MOTHER TERESA NURSING SCHOOL, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II III
Signature of the Holder :

Note:
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REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Sr. No. 2006

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE JYOTI ANANTA
Seat Number : 2006
Name of the Institution : MOTHER TERESA NURSING SCHOOL, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : II III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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<td>MISS MAGHADE BHAGYARATHA NAMDEV</td>
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Note:
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<tr>
<td>Name of the Candidate</td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 07/06/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS A SOLE SAGAR DEVRAO

Seat Number : 2009

Name of the Institution : Anandital Bengal Nursing School, Sengaon, Hingoli

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : SHRI SURES HDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Subjects : I II III IV

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. : 2009

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 20/05/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GHOTEKAR KAVITA LIMBAJI

Seat Number : 2010

Name of the Institution : Anandital Bengal Nursing School, Sengaon, Hingoli

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : SHRI SURES HDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Subjects : I II III

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. : 2010
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/06/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHUGE AMRAPALI CHANDRABHAN
Seat Number : 2011
Name of the Institution : Anandital Bengal Nursing School, Sengaon, Hingoli
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/07/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHILLARE ROHINI SHESHRAO
Seat Number : 2012
Name of the Institution : Anandital Bengal Nursing School, Sengaon, Hingoli
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/03/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ASOLE KOMAL MAROTI
Seat Number : 2013
Name of the Institution : V.B.N. NURSING SCHOOL, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2013

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BELE PRIYANKA BALAJI
Seat Number : 2014
Name of the Institution : V.B.N. NURSING SCHOOL, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2014
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BOLAKE BHAVANA SHAMRAO
Seat Number : 2015
Name of the Institution : V.B.N. NURSING SCHOOL, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : [ ]
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2015

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHAGE SONALI VILASRAO
Seat Number : 2016
Name of the Institution : V.B.N. NURSING SCHOOL, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : [ ]
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2016
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/04/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHANWE VANITA RAMRAO
Seat Number : 2017
Name of the Institution : V.B.N. NURSING SCHOOL, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHABALE ASMITA KISHAN
Seat Number : 2018
Name of the Institution : V.B.N. NURSING SCHOOL, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects :
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/05/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHARAT SARIKA PURUSHOTTAM
Seat Number : 2019
Name of the Institution : V.B.N. NURSING SCHOOL, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2019

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : SMT KHARWADE JAYASHREE MADHAV
Nee(VANJARE JAYASHREE DHONDABA)
Seat Number : 2020
Name of the Institution : V.B.N. NURSING SCHOOL, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2020
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/06/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : SMT RATHOD ARUNA ATMARAM
                      Nee(JADHAV ARUNA MADANRAO)
Seat Number : 2021
Name of the Institution : V.B.N. NURSING SCHOOL, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2021

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/05/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RATHOD JAYA GANESH
Seat Number : 2022
Name of the Institution : V.B.N. NURSING SCHOOL, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 03/03/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS BAGATE SHITAL SHRIRANG
Seat Number: 2023
Name of the Institution: BLESSING INSTITUTE OF NURSING, PARBHANI
Name of the Exam. Centre: SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects: I II
Signature of the Holder: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth: 22/01/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS DHABE PALLAVI ASHOK
Seat Number: 2024
Name of the Institution: BLESSING INSTITUTE OF NURSING, PARBHANI
Name of the Exam. Centre: SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects: I
Signature of the Holder: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/11/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD ROHINI PRALHAD
Seat Number : 2025
Name of the Institution : BLESSING INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II III IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2025

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/02/1987
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHANDARE REKHA GANGADHAR
Seat Number : 2026
Name of the Institution : BLESSING INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 09/02/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KURWALE VIDHYA ASHOK

Seat Number : 2027

Name of the Institution : BLESSING INSTITUTE OF NURSING, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Subjects : I II IV

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2027

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 02/05/1989

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MORE MANISHA YASHVANT

Seat Number : 2028

Name of the Institution : BLESSING INSTITUTE OF NURSING, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Subjects : I II

Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2028
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/07/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NATKAR SANDHYA EKNATH
Seat Number : 2029
Name of the Institution : BLESSING INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PARADHE SANTOSHI SATISH
Seat Number : 2030
Name of the Institution : BLESSING INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 28/07/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS RANDIVE PRATIKSHA RAJESH

Seat Number : 2031

Name of the Institution : BLESSING INSTITUTE OF NURSING, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Subjects : I II III IV

Signature of the Holder :

Note:
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Sr. No. 2031

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 17/09/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SALVE SANDHYA VASANT

Seat Number : 2032

Name of the Institution : BLESSING INSTITUTE OF NURSING, PARBHANI

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Subjects : I II III IV

Signature of the Holder :

Note:
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Sr. No. 2032
**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
26/12/1999

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS SALVE PRATIKSHA SANJAY

**Seat Number**
2033

**Name of the Institution**
BLESSING INSTITUTE OF NURSING, PARBHANI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

**Subjects**
I III

**Signature of the Holder**

---

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
13/05/1996

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS SONWANE DEEPALI NAMDEO

**Seat Number**
2034

**Name of the Institution**
BLESSING INSTITUTE OF NURSING, PARBHANI

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

**Subjects**
I II III

**Signature of the Holder**

---

**Note:**
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/08/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SURPAM ASHWINI NARAYAN
Seat Number : 2035
Name of the Institution : BLESSING INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2035

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/08/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHMARE JANABAI BALIRAM
Seat Number : 2036
Name of the Institution : BLESSING INSTITUTE OF NURSING, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2036
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>2037</th>
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<td><strong>MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION</strong></td>
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<td><strong>HALL TICKET</strong></td>
<td>13/01/2020</td>
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<td><strong>For the</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<td><strong>Date Of Birth</strong></td>
<td>10/05/1997</td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<td><strong>Name of the Candidate</strong></td>
<td>MISS WAVLE NISHA BHASKAR</td>
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<td><strong>Seat Number</strong></td>
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<tr>
<td><strong>Name of the Institution</strong></td>
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<td><strong>Name of the Exam. Centre</strong></td>
<td>SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI</td>
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<tr>
<td><strong>Subjects</strong></td>
<td>II III</td>
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<tr>
<td><strong>Signature of the Holder</strong></td>
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</tr>
</tbody>
</table>

**Note:**
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<table>
<thead>
<tr>
<th>Sr. No.</th>
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<tr>
<td><strong>HALL TICKET</strong></td>
<td>13/01/2020</td>
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<tr>
<td><strong>For the</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<tr>
<td><strong>Date Of Birth</strong></td>
<td>02/04/2000</td>
</tr>
<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS GAIKWAD KOMAL PREMDAS</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
<td>2038</td>
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<tr>
<td><strong>Name of the Institution</strong></td>
<td>LOTUS NURSING INSTITUTE, NANDED</td>
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<tr>
<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td><strong>Name of the Exam. Centre</strong></td>
<td>MOTHER TERESA NURSING SCHOOL, NANDED</td>
</tr>
<tr>
<td><strong>Subjects</strong></td>
<td>I</td>
</tr>
<tr>
<td><strong>Signature of the Holder</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Note:**
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/03/1991
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS HANMANTE SUJATA NIVARTI
Seat Number : 2039
Name of the Institution : LOTUS NURSING INSTITUTE, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2039

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/03/2001
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KALE AARTI ASHOKRAO
Seat Number : 2040
Name of the Institution : LOTUS NURSING INSTITUTE, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2040
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 26/01/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KAMBLE VARSHA SAHEBRAO
Seat Number: 2041
Name of the Institution: LOTUS NURSING INSTITUTE, NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MOTHER TERESA NURSING SCHOOL, NANDED
Subjects: I III
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 05/10/1987
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KAMBLE JAYASHRI VENKAT
Seat Number: 2042
Name of the Institution: LOTUS NURSING INSTITUTE, NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MOTHER TERESA NURSING SCHOOL, NANDED
Subjects: I
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAWLE SONALI ASHOK
Seat Number : 2043
Name of the Institution : LOTUS NURSING INSTITUTE, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : 1
Signature of the Holder : 

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2043

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KSHIRSAGAR SUSMITA UTTAM
Seat Number : 2044
Name of the Institution : LOTUS NURSING INSTITUTE, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : 1
Signature of the Holder : 

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2044
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 31/03/2001

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MALHARE SAPANA CHANDRAKANT

Seat Number : 2045

Name of the Institution : LOTUS NURSING INSTITUTE, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 01/06/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS PAIKRAO SUKESHNI RAVAN

Seat Number : 2046

Name of the Institution : LOTUS NURSING INSTITUTE, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAIKRAO ABOLI GANESH
Seat Number : 2047
Name of the Institution : LOTUS NURSING INSTITUTE, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through Institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/04/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHUTNARE SNEHA RAMESHWAR

Seat Number : 2049
Name of the Institution : DR. G. A. GAIKWAD INSTITUTE OF NURSING, DEGLOOR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Ms. Bhutnare Sneha Rameshwar

Sr. No. 2049

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD KOMAL TULSHIRAM

Seat Number : 2050
Name of the Institution : DR. G. A. GAIKWAD INSTITUTE OF NURSING, DEGLOOR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Note:  
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 2053

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NIVLIKAR SUMEDHA BABURAO
Seat Number : 2053
Name of the Institution : DR. G. A. GAIKWAD INSTITUTE OF NURSING, DEGLOOR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Signature of the Holder : 

Subjects : I

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2054

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/05/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHINDE ANITA TUKARAM
Seat Number : 2054
Name of the Institution : DR. G. A. GAIKWAD INSTITUTE OF NURSING, DEGLOOR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Signature of the Holder : 

Subjects : I II III

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 18/08/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS WAGHMARE KIRTI DATTATRAY

Seat Number : 2055

Name of the Institution : DR. G. A. GAIKWAD INSTITUTE OF NURSING, DEGLOOR, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : I II

Signature of the Holder : REGISTRAR

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2055

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 18/10/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS WAGHMARE ANITA SHANKAR

Seat Number : 2056

Name of the Institution : DR. G. A. GAIKWAD INSTITUTE OF NURSING, DEGLOOR, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : I II III IV

Signature of the Holder : REGISTRAR

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2056
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DONGRE MADHURI DASHRATH
Seat Number : 2057
Name of the Institution : GENERAL HOSPITAL, JALANA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : II IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2057

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/08/1986
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : SMT KUSALKAR MIRABAI BALCHAND Nee(MORE MIRA KAILASH)
Seat Number : 2058
Name of the Institution : GENERAL HOSPITAL, JALANA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 06/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHADRE DIKSHA DILIP

Seat Number : 2059
Name of the Institution : Sharadrao Nursing College, Naigona Nanded
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : I  III  IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 01/12/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHALE CHAYA BHASKAR

Seat Number : 2060
Name of the Institution : Sharadrao Nursing College, Naigona Nanded
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : I  II  III  IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
## MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

### HALL TICKET

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>2061</th>
</tr>
</thead>
</table>

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020  
Date Of Birth : 07/07/1994  
Date Of Exam : 14/01/2020 To 17/01/2020  
Name of the Candidate : MISS DHARMEKAR PADMIN SUDAM  
Seat Number : 2061  
Name of the Institution : Sharadrao Nursing College, Naigona Nanded  
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR  
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED  
Subjects : I II III IV  
Signature of the Holder : 

Note:  1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>2062</th>
</tr>
</thead>
</table>

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020  
Date Of Birth : 20/10/1995  
Date Of Exam : 14/01/2020 To 17/01/2020  
Name of the Candidate : MISS DHODI SONAL GULAB  
Seat Number : 2062  
Name of the Institution : Sharadrao Nursing College, Naigona Nanded  
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR  
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED  
Subjects : II  
Signature of the Holder : 

Note:  1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### Sr. No. 2063

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

13/01/2020

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

10/06/1998

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS GAIKWAD INDUTAI RAMDAS

**Seat Number**

2063

**Name of the Institution**

Sharadrao Nursing College, Naigona Nanded

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

MOTHER TERESA NURSING SCHOOL, NANDED

**Subjects**

I II III IV

**Signature of the Holder**

Note:

1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### Sr. No. 2064

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

13/01/2020

**For the**

AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**

03/01/1994

**Date Of Exam**

14/01/2020 To 17/01/2020

**Name of the Candidate**

MISS GAIKWAD MALVIKA MARUTI

**Seat Number**

2064

**Name of the Institution**

Sharadrao Nursing College, Naigona Nanded

**Name of the Examination**

AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**

MOTHER TERESA NURSING SCHOOL, NANDED

**Subjects**

I II

**Signature of the Holder**

Note:

1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD SHIVKANTA DHONDIBA
Seat Number : 2065
Name of the Institution : Sharadrao Nursing College, Naigona Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2065

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/07/1987
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAJBHARE ARCHANA BALIRAM
Seat Number : 2066
Name of the Institution : Sharadrao Nursing College, Naigona Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2066
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
21/05/2001

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS ITUR SWATI JACOL

Seat Number :
2067

Name of the Institution :
Sharadrao Nursing College, Naigona Nanded

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
MOTHER TERESA NURSING SCHOOL, NANDED

Subjects :
I

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
15/05/1998

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS NAKLIKAR MANGAL YADAV

Seat Number :
2068

Name of the Institution :
Sharadrao Nursing College, Naigona Nanded

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
MOTHER TERESA NURSING SCHOOL, NANDED

Subjects :
I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the  :  AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth  :  03/04/2000
Date Of Exam  :  14/01/2020 To 17/01/2020
Name of the Candidate  :  MISS PAWAR ASHVINI MADHAV
Seat Number  :  2069
Name of the Institution  :  Sharadrao Nursing College, Naigona Nanded
Name of the Examination  :  AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre  :  MOTHER TERESA NURSING SCHOOL, NANDED
Subjects  :  I II III
Signature of the Holder  :

Note:  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the  :  AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth  :  25/05/2000
Date Of Exam  :  14/01/2020 To 17/01/2020
Name of the Candidate  :  MISS SIRSE MOHINI RAJESH
Seat Number  :  2070
Name of the Institution  :  Sharadrao Nursing College, Naigona Nanded
Name of the Examination  :  AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre  :  MOTHER TERESA NURSING SCHOOL, NANDED
Subjects  :  I II
Signature of the Holder  :

Note:  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/06/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SURYAVANSHI SHIVKANTA LALU
Seat Number : 2071
Name of the Institution : Sharadrao Nursing College, Naigona Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 03/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TURYA AMRUTA KRISHNA
Seat Number : 2072
Name of the Institution : Sharadrao Nursing College, Naigona Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHMARE PUNAM ANANDA
Seat Number : 2073
Name of the Institution : Sharadrao Nursing College, Naigona Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2073

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHMARE SHEETAL BALAJI
Seat Number : 2074
Name of the Institution : Sharadrao Nursing College, Naigona Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II
Signature of the Holder :

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Sr. No. 2074
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<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS WANNE RANI KHANDU</td>
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<td>MOTHER TERESA NURSING SCHOOL, NANDED</td>
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<td><strong>Subjects</strong></td>
<td>I II III IV</td>
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<tr>
<td><strong>Date Of Birth</strong></td>
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<tr>
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<td><strong>Date Of Birth</strong> : 20/01/1996</td>
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<tr>
<td><strong>Name of the Candidate</strong> : MISS DHUTADE ANITA SUDHAKAR</td>
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<td><strong>Date Of Exam</strong> : 14/01/2020 To 17/01/2020</td>
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<td><strong>Name of the Candidate</strong> : MISS GAVHANDE LAXMIBAI MANIK</td>
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<td><strong>Seat Number</strong> : 2078</td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/02/1989
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS HANUMANTE DIKSHA NAMDEV
Seat Number : 2079
Name of the Institution : Satabai Landge Nursing School, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : II III IV
Signature of the Holder :

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Sr. No. 2079

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS HATKAR PALLAVI GANESH
Seat Number : 2080
Name of the Institution : Satabai Landge Nursing School, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II IV
Signature of the Holder :

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Sr. No. 2080
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/12/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE PRIYANKA SATTAJI
Seat Number : 2081
Name of the Institution : Satabai Landge Nursing School, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : II III IV
Signature of the Holder :

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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/05/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE KAVITA VYANKATRAO
Seat Number : 2082
Name of the Institution : Satabai Landge Nursing School, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : II
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 02/07/1991
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KARHALE SANGITA MAROTI
Seat Number : 2083
Name of the Institution : Satabai Landge Nursing School, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III IV
Signature of the Holder : 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 09/11/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KOKARE DIKSHA BHIMRAO
Seat Number : 2084
Name of the Institution : Satabai Landge Nursing School, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : III IV
Signature of the Holder : 

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### Hall Ticket Details

#### Sr. No. 2087

**For the** : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020  
**Date Of Birth** : 05/01/2000  
**Date Of Exam** : 14/01/2020 To 17/01/2020  
**Name of the Candidate** : MISS NARWADE SUJATA SAHEBRAO  
**Seat Number** : 2087  
**Name of the Institution** : Satabai Landge Nursing School, Nanded  
**Name of the Examination** : AUXILLARY NURSE MIDWIFERY FIRST YEAR  
**Name of the Exam. Centre** : MOTHER TERESA NURSING SCHOOL, NANDED  
**Subjects** : II  
**Signature of the Holder** : 

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### Hall Ticket Details

#### Sr. No. 2088

**For the** : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020  
**Date Of Birth** : 17/06/2000  
**Date Of Exam** : 14/01/2020 To 17/01/2020  
**Name of the Candidate** : MISS ODHANE SEEMA JANARDHAN  
**Seat Number** : 2088  
**Name of the Institution** : Satabai Landge Nursing School, Nanded  
**Name of the Examination** : AUXILLARY NURSE MIDWIFERY FIRST YEAR  
**Name of the Exam. Centre** : MOTHER TERESA NURSING SCHOOL, NANDED  
**Subjects** : II III IV  
**Signature of the Holder** : 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 17/11/1999

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS POHARE ISHA MOTIRAM

Seat Number: 2089

Name of the Institution: Satabai Landge Nursing School, Nanded

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: MOTHER TERESA NURSING SCHOOL, NANDED

Subjects: IV

Signature of the Holder: 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 30/05/1987

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS SARPATE ARCHANA BABURAO

Seat Number: 2090

Name of the Institution: Satabai Landge Nursing School, Nanded

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: MOTHER TERESA NURSING SCHOOL, NANDED

Subjects: II III IV

Signature of the Holder: 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SURYAWANSHI USHATAI BALIRAM
Seat Number : 2091
Name of the Institution : Satabai Landge Nursing School, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : II
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/09/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS YADAV KOMAL ANIL
Seat Number : 2092
Name of the Institution : Satabai Landge Nursing School, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III IV
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD MANISHA RAMRAO
Seat Number : 2093
Name of the Institution : Indira Gandhi School of Nursing, Loha, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : II
Signature of the Holder : 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NAMULE SWATI MADHAV
Seat Number : 2094
Name of the Institution : Indira Gandhi School of Nursing, Loha, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : II
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/12/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAPKAL JAYSHREE ASHOK
Seat Number : 2095
Name of the Institution : Indira Gandhi School of Nursing, Loha, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2095

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/05/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAKODE YOGITA VINOD
Seat Number : 2096
Name of the Institution : Indira Gandhi School of Nursing, Loha, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2096
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/07/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WANKHADE SAPANA GANESH
Seat Number : 2097
Name of the Institution : Indira Gandhi School of Nursing, Loha, Nanded
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2097

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2098
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/03/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DEVKAMBLE NANDA DEVIDAS
Seat Number : 2099
Name of the Institution : GANSHANTI NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : 1
Signature of the Holder :

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION
HALL TICKET
13/01/2020

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2099

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/03/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHUPPE SAMIKSHA DAMODHAR
Seat Number : 2100
Name of the Institution : GANSHANTI NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : 1
Signature of the Holder :

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION
HALL TICKET
13/01/2020

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/07/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JADHAV JAYMALA SAMBHAJI
Seat Number : 2103
Name of the Institution : GANSHANTI NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2103

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/05/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE SUWRNA MAROTI
Seat Number : 2104
Name of the Institution : GANSHANTI NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 15/06/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KARANDKAR MADHURI BALAJI

Seat Number: 2105
Name of the Institution: GANSHANTI NURSING SCHOOL, NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MOTHER TERESA NURSING SCHOOL, NANDED

Signature of the Holder: 
Subjects: I II III IV

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 16/01/1996
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS MESHRAM PUNAM RAMESH

Seat Number: 2106
Name of the Institution: GANSHANTI NURSING SCHOOL, NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MOTHER TERESA NURSING SCHOOL, NANDED

Signature of the Holder: 
Subjects: 1

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 23/09/1995

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MUNESHWAR SUSHAMA BHIMRAO

Seat Number : 2107

Name of the Institution : GANSHANTI NURSING SCHOOL, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : I

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2107

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 18/06/1993

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS NIRMALE RUKHMIN PURBHAJI

Seat Number : 2108

Name of the Institution : GANSHANTI NURSING SCHOOL, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2108
Note:  1) Candidate will not be allowed in examination hall without this Hall Ticket.
         2) Practical Examination centre shall be as directed by the MSBNPE
         3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No.  2109

Sr. No.  2110
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**Sr. No.** 2111

**Date Of Birth** 10/06/1999

**Date Of Exam** 14/01/2020 To 17/01/2020

**Name of the Candidate** MISS SURYATAL MANISHA GANGADHAR

**Seat Number** 2111

**Name of the Institution** GANSHANTI NURSING SCHOOL, NANDED

**Name of the Examination** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre** MOTHER TERESA NURSING SCHOOL, NANDED

**Subjects** III

**Signature of the Holder**

---

**Note:**

1) Candidate will not be allowed in examination hall without this Hall Ticket.

2) Practical Examination centre shall be as directed by the MSBNPE

3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**Sr. No.** 2112

**Date Of Birth** 20/06/1999

**Date Of Exam** 14/01/2020 To 17/01/2020

**Name of the Candidate** MISS VAIDYA PRIYANKA RAMJI

**Seat Number** 2112

**Name of the Institution** GANSHANTI NURSING SCHOOL, NANDED

**Name of the Examination** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre** MOTHER TERESA NURSING SCHOOL, NANDED

**Subjects** I III IV

**Signature of the Holder**

---

**Note:**

1) Candidate will not be allowed in examination hall without this Hall Ticket.

2) Practical Examination centre shall be as directed by the MSBNPE

3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 17/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHMARE RAJESHWARI ROHIDAS
Seat Number : 2113
Name of the Institution : GANSHANTI NURSING SCHOOL, NANDER
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDER
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2113

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 22/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ATHAWALE SHITAL BHIMRAO
Seat Number : 2114
Name of the Institution : BHIVRAJ KALANTRI NURSING INSTITUTE, NANDER
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDER
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2114
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 21/01/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS BHALERAO ROHINI SAHEBRAO
Seat Number: 2115
Name of the Institution: BHIVRAJ KALANTRI NURSING INSTITUTE, NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MOTHER TERESA NURSING SCHOOL, NANDED
Subjects: 
Signature of the Holder: 

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2115

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 07/03/2000
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS DHAWALE SHRIDEVI SURESH
Seat Number: 2116
Name of the Institution: BHIVRAJ KALANTRI NURSING INSTITUTE, NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MOTHER TERESA NURSING SCHOOL, NANDED
Subjects: 
Signature of the Holder: 

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GADEKAR DIPALI GOPINATH
Seat Number : 2117
Name of the Institution : BHIVRAJ KALANTRI NURSING INSTITUTE, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2117

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/04/1989
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD DIKSHA BALAJI
Seat Number : 2118
Name of the Institution : BHIVRAJ KALANTRI NURSING INSTITUTE, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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Sr. No. 2118
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE 
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/04/1984
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS HATKAR LATA BALAJI
Seat Number : 2121
Name of the Institution : BHIVRAJ KALANTRI NURSING INSTITUTE, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I
Signature of the Holder :

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

REGISTRAR

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2121

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE KOMAL DAMODHAR
Seat Number : 2122
Name of the Institution : BHIVRAJ KALANTRI NURSING INSTITUTE, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III
Signature of the Holder :

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

REGISTRAR

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2122
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SONKAMBALE MEENA GANGADHAR
Seat Number : 2123
Name of the Institution : BHIVRAJ KALANTRI NURSING INSTITUTE, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/01/1985
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TOMKE GANGASAGAR LAXMAN
Seat Number : 2124
Name of the Institution : BHIVRAJ KALANTRI NURSING INSTITUTE, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 12/04/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS WAGHMARE GANGUTAI ADELOO

Seat Number : 2125

Name of the Institution : BHIVRAJ KALANTRI NURSING INSTITUTE, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : I II

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 07/07/1987

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS WAGHMARE JAYKRANTI SHESHERAO

Seat Number : 2126

Name of the Institution : BHIVRAJ KALANTRI NURSING INSTITUTE, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>2127</th>
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<td><strong>MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION</strong></td>
<td><strong>HALL TICKET</strong></td>
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<td>: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<td>: 14/05/2000</td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>: 14/01/2020 To 17/01/2020</td>
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<td><strong>Name of the Candidate</strong></td>
<td>: MISS BOLAKE DHURPATA PANDURANG</td>
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<td><strong>Seat Number</strong></td>
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<td><strong>Name of the Institution</strong></td>
<td>: RAJMATA JIJAU NURSING SCHOOL, NANDED</td>
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<tr>
<td><strong>Name of the Examination</strong></td>
<td>: AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<td><strong>Date Of Birth</strong></td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>: 14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>: MISS CHIRANGE KARTIKA VISHNU</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
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<td><strong>Name of the Institution</strong></td>
<td>: RAJMATA JIJAU NURSING SCHOOL, NANDED</td>
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<tr>
<td><strong>Name of the Examination</strong></td>
<td>: AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
</tr>
<tr>
<td><strong>Name of the Exam. Centre</strong></td>
<td>: MOTHER TERESA NURSING SCHOOL, NANDED</td>
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<tr>
<td><strong>Subjects</strong></td>
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<td><strong>Signature of the Holder</strong></td>
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**Note:**
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2) Practical Examination centre shall be as directed by the MSBNPE
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<th>Sr. No.</th>
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<tbody>
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<td><strong>For the</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<tr>
<td><strong>Date Of Birth</strong></td>
<td>30/03/1997</td>
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<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS GAVALE MANJUSHARANI GANGADHAR</td>
</tr>
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<td><strong>Seat Number</strong></td>
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<tr>
<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td><strong>Name of the Exam. Centre</strong></td>
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<tr>
<td><strong>Subjects</strong></td>
<td>I II III IV</td>
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<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</td>
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<td><strong>Date Of Birth</strong></td>
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<td><strong>Date Of Exam</strong></td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS HANMANTE SARASWATI GANGADHAR</td>
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<td><strong>Seat Number</strong></td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/12/1987
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS HANWATE VANDANA MADHAV
Seat Number : 2131
Name of the Institution : RAJMATA JJIAU NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/11/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JADHAV DIPANJALI MALHARIRAO
Seat Number : 2132
Name of the Institution : RAJMATA JJIAU NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KASBE JYOTI ANANDRAO
Seat Number : 2133
Name of the Institution : RAJMATA JJIAU NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2133

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHADE SANDHYA EKNATH
Seat Number : 2134
Name of the Institution : RAJMATA JJIAU NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** MISS KOKARE PRATIKSHA NAGORAO

**Seat Number:** 2135

**Name of the Institution:** RAJMATA JIJAU NURSING SCHOOL, NANDED

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** MOTHER TERESA NURSING SCHOOL, NANDED

**Subjects:** III

**Signature of the Holder:**

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Note:
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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**Date Of Exam:** 14/01/2020 To 17/01/2020

**Name of the Candidate:** MISS LONDHE PRIYANKA BABURAO

**Seat Number:** 2136

**Name of the Institution:** RAJMATA JIJAU NURSING SCHOOL, NANDED

**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre:** MOTHER TERESA NURSING SCHOOL, NANDED

**Subjects:** III IV

**Signature of the Holder:**

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Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LONE DIPALI SONAJI
Seat Number : 2137
Name of the Institution : RAJMATI JIJAU NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/06/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NARWADE MEERA NAGORAO
Seat Number : 2138
Name of the Institution : RAJMATI JIJAU NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/12/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PARDE ASHWINI SANJAY
Seat Number : 2139
Name of the Institution : RAJMATA JIJAU NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III IV
Signature of the Holder : 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SAWATE POOJA RAMESH
Seat Number : 2140
Name of the Institution : RAJMATA JIJAU NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III
Signature of the Holder : 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 19/08/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS SONALE KRANTI RAYBAN

Seat Number : 2141

Name of the Institution : RAJMA T JIJAU NURSING SCHOOL, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 04/03/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS WAYWALE MAYAWATI GOUTAM

Seat Number : 2142

Name of the Institution : RAJMA T JIJAU NURSING SCHOOL, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AMTE SANGHMITRA SANJAY
Seat Number : 2143
Name of the Institution : MUKTAI NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I III
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BAHADURE PALLAVI LAXMAN
Seat Number : 2144
Name of the Institution : MUKTAI NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I III IV
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 06/06/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAWALE ASHVINI DADARAO

Seat Number : 2145

Name of the Institution : MUKTAI NURSING SCHOOL, NANDED

Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : 1

Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
- 22/04/1998

**Date Of Exam**
- 14/01/2020 To 17/01/2020

**Name of the Candidate**
- MISS ISHWARE SUPRIYA SANJAY

**Seat Number**
- 2147

**Name of the Institution**
- MUKTAI NURSING SCHOOL, NANDED

**Name of the Examination**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
- MOTHER TERESA NURSING SCHOOL, NANDED

**Subjects**
- I II III IV

**Signature of the Holder**
- [Signature]

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
- 24/06/1998

**Date Of Exam**
- 14/01/2020 To 17/01/2020

**Name of the Candidate**
- MISS PANDIT PRIYANKA DIGAMBAR

**Seat Number**
- 2148

**Name of the Institution**
- MUKTAI NURSING SCHOOL, NANDED

**Name of the Examination**
- AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
- MOTHER TERESA NURSING SCHOOL, NANDED

**Subjects**
- I

**Signature of the Holder**
- [Signature]

**Note:**
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/12/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS POHARE SONALEE RAOSAHEB
Seat Number : 2149
Name of the Institution : MUKTAI NURSING SCHOOL, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/06/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BHADANGE PRATIBHA VITTHAL

Seat Number : 2153

Name of the Institution : MOTHER TERESA NURSING INSTITUTE, KANDHAR, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : I

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 30/12/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS DWAREYAMUNA ANANDRAO

Seat Number : 2154

Name of the Institution : MOTHER TERESA NURSING INSTITUTE, KANDHAR, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : I II

Signature of the Holder :

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<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<td><strong>Seat Number</strong></td>
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<td><strong>Name of the Institution</strong></td>
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<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<td><strong>For the</strong></td>
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<tr>
<td><strong>Date Of Birth</strong></td>
<td>02/03/2001</td>
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<tr>
<td><strong>Date Of Exam</strong></td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
<td>MISS GAIKWAD MEGHA BHAGWAN</td>
</tr>
<tr>
<td><strong>Seat Number</strong></td>
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<tr>
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<tr>
<td><strong>Subjects</strong></td>
<td>1</td>
</tr>
<tr>
<td><strong>Signature of the Holder</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Note:**

1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAJBHARE BHAGYASHRI RAOSAHEB
Seat Number : 2157
Name of the Institution : MOTHER TERESA NURSING INSTITUTE, KANDHAR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2157

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/06/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAVHANDE SUREKHA MADHAV
Seat Number : 2158
Name of the Institution : MOTHER TERESA NURSING INSTITUTE, KANDHAR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2158
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 14/05/2000

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS GOPALE JYOTI DEVIDAS

Seat Number
: 2159

Name of the Institution
: MOTHER TERESA NURSING INSTITUTE, KANDHAR, NANDED

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: MOTHER TERESA NURSING SCHOOL, NANDED

Subjects
: I

Signature of the Holder
:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
: 03/07/1987

Date Of Exam
: 14/01/2020 To 17/01/2020

Name of the Candidate
: MISS JONDHALE SARIKA BABURAO

Seat Number
: 2160

Name of the Institution
: MOTHER TERESA NURSING INSTITUTE, KANDHAR, NANDED

Name of the Examination
: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
: MOTHER TERESA NURSING SCHOOL, NANDED

Subjects
: I III

Signature of the Holder
:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 01/01/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KHILLARE SUJATA DASHARATH
Seat Number: 2161

Name of the Institution: MOTHER TERESA NURSING INSTITUTE, KANDHAR, NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MOTHER TERESA NURSING SCHOOL, NANDED

Subjects: I

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2161

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth: 10/04/1998
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS LONE BABITA UTTAM
Seat Number: 2162

Name of the Institution: MOTHER TERESA NURSING INSTITUTE, KANDHAR, NANDED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MOTHER TERESA NURSING SCHOOL, NANDED

Subjects: I

Signature of the Holder: 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2162
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MENTHEWAD SARASWATI BHIMRAO
Seat Number : 2163
Name of the Institution : MOTHER TERESA NURSING INSTITUTE, KANDHAR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : 1
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2163

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS MORE PADAMAJA SHANKARAO
Seat Number : 2164
Name of the Institution : MOTHER TERESA NURSING INSTITUTE, KANDHAR, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : 1
Signature of the Holder :

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2164
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 19/03/2000

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS SARKUNDE PRITILATA GANGDHAR

Seat Number: 2165

Name of the Institution: MOTHER TERESA NURSING INSTITUTE, KANDHAR, NANDED

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: MOTHER TERESA NURSING SCHOOL, NANDED

Subjects: 1

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

13/01/2020

Sr. No. 2165

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 02/07/1997

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS SURYAWANSHI NEHA SUDHAKAR

Seat Number: 2166

Name of the Institution: MOTHER TERESA NURSING INSTITUTE, KANDHAR, NANDED

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: MOTHER TERESA NURSING SCHOOL, NANDED

Subjects: 1

Signature of the Holder:

Note:
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13/01/2020

Sr. No. 2166
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 03/04/1992

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS SURYAWANSHI KOMAL BHAGWANRAO

Seat Number: 2167

Name of the Institution: MOTHER TERESA NURSING INSTITUTE, KANDHAR, NANDED

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: MOTHER TERESA NURSING SCHOOL, NANDED

Subjects: I

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 10/06/1997

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS DAMODAR RUPALI SAMBHAJI

Seat Number: 2168

Name of the Institution: TIRUMALA ANM SCHOOL OF NURSING, HADGAON, NANDED

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: MOTHER TERESA NURSING SCHOOL, NANDED

Subjects: II III

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHULE PRITI BHARAT
Seat Number : 2169
Name of the Institution : TIRUMALA ANM SCHOOL OF NURSING, HADGAON, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2169

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHANGALE KOMAL CHAMPATI
Seat Number : 2170
Name of the Institution : TIRUMALA ANM SCHOOL OF NURSING, HADGAON, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I
Signature of the Holder :

Note:
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Sr. No. 2170
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHUNGARRAO MONIKA GYANBA
Seat Number : 2171
Name of the Institution : TIRUMALA ANM SCHOOL OF NURSING, HADGAON, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I
Signature of the Holder : 

Note:  1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr No. 2171

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 10/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHUNGARRAO SUJATA GANESH
Seat Number : 2172
Name of the Institution : TIRUMALA ANM SCHOOL OF NURSING, HADGAON, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : III
Signature of the Holder : 

Note:  1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr No. 2172
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBLE ARTI GANESH
Seat Number : 2173
Name of the Institution : TIRUMALA ANM SCHOOL OF NURSING, HADGAON, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 02/11/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHILLARE SHITAL AMBADAS
Seat Number : 2174
Name of the Institution : TIRUMALA ANM SCHOOL OF NURSING, HADGAON, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NARWADE VISHAKHA NAGORAO
Seat Number : 2175
Name of the Institution : TIRUMALA ANM SCHOOL OF NURSING, HADGAON, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : I  II  III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAIKRAO ASHVINI MAROTRAO
Seat Number : 2176
Name of the Institution : TIRUMALA ANM SCHOOL OF NURSING, HADGAON, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : I
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/02/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS POTRE SHARDA VISHWANATH
Seat Number : 2177
Name of the Institution : TIRUMALA ANM SCHOOL OF NURSING, HADGAON, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2177

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/05/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT POOJA BHAGWAN
Seat Number : 2178
Name of the Institution : TIRUMALA ANM SCHOOL OF NURSING, HADGAON, NANDED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2178
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/07/1996

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS  SONUNE SHARADA MADHUKAR

Seat Number : 2179

Name of the Institution : TIRUMALA ANM SCHOOL OF NURSING, HADGAON, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : I II

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/02/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS  WATHORE SONI BHIMRAO

Seat Number : 2180

Name of the Institution : TIRUMALA ANM SCHOOL OF NURSING, HADGAON, NANDED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED

Subjects : I

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 05/04/1986
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BHAGYAWANT UMA TULASHIRAM
Seat Number : 2181
Name of the Institution : Sharda Nursing School, Jalna
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/11/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GANJALE PALLAVI JIVANPRAKASH
Seat Number : 2183
Name of the Institution : Sharda Nursing School, Jalna
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/11/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JADHAV ASHWINI BHIMRAO
Seat Number : 2184
Name of the Institution : Sharda Nursing School, Jalna
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/06/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JADHAV NAINA CHAGAN
Seat Number : 2185
Name of the Institution : Sharda Nursing School, Jalna
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2185

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/04/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KALE BHAGYASHREE MAHADEV
Seat Number : 2186
Name of the Institution : Sharda Nursing School, Jalna
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2186
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 03/05/1996
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KALE PUNAM GHANSHAM

Seat Number: 2187
Name of the Institution: Sharda Nursing School, Jalna
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MOTHER TERESA NURSING SCHOOL, NANDED

Subjects: II
Signature of the Holder: }

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2187

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 27/03/1986
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS MANE SONU BALU

Seat Number: 2188
Name of the Institution: Sharda Nursing School, Jalna
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: MOTHER TERESA NURSING SCHOOL, NANDED

Subjects: I II
Signature of the Holder: }

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2188
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/06/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAIKRAO SONI YASHWANT
Seat Number : 2189
Name of the Institution : Sharda Nursing School, Jalna
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/12/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHELKE MENKA PRABHAKAR
Seat Number : 2190
Name of the Institution : Sharda Nursing School, Jalna
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/12/1991
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHRISUNDAR LEENA SURESH
Seat Number : 2191
Name of the Institution : Sharda Nursing School, Jalna
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : MOTHER TERESA NURSING SCHOOL, NANDED
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2191

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BANGARA VARSHA NANDAKUMAR
Seat Number : 2192
Name of the Institution : YASHWANT NURSING SCHOOL, ASHTI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 16/09/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GANGAD NIRA DATTU

Seat Number : 2195

Name of the Institution : YASHWANT NURSING SCHOOL, ASHTI, BEED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : District Hospital Beed

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/03/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS JADHAV MAHIMA MADAN

Seat Number : 2196

Name of the Institution : YASHWANT NURSING SCHOOL, ASHTI, BEED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : District Hospital Beed

Subjects : I II III

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
23/06/1998

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS JOGADAND JYOSNA AJINATH

Seat Number
2197

Name of the Institution
YASHWANT NURSING SCHOOL, ASHTI, BEED

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
District Hospital Beed

Subjects
I II III IV

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2197

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
03/12/1998

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS PUNJARA USHA GANPAT

Seat Number
2198

Name of the Institution
YASHWANT NURSING SCHOOL, ASHTI, BEED

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
District Hospital Beed

Subjects
I II III IV

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2198
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>2201</th>
</tr>
</thead>
</table>

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**Date Of Birth:** 21/12/1994  
**Date Of Exam:** 14/01/2020 To 17/01/2020  
**Name of the Candidate:** MISS SOSHETE HARSHALA KRISHNA  
**Seat Number:** 2201  
**Name of the Institution:** YASHWANT NURSING SCHOOL, ASHTI, BEED  
**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR  
**Name of the Exam. Centre:** District Hospital Beed  
**Subjects:** II III  
**Signature of the Holder:**

**Note:**  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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<tr>
<th>Sr. No.</th>
<th>2202</th>
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</thead>
</table>

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**Date Of Birth:** 09/02/1999  
**Date Of Exam:** 14/01/2020 To 17/01/2020  
**Name of the Candidate:** MISS ANDURKAR ACHAL VIJAY  
**Seat Number:** 2202  
**Name of the Institution:** S.S.P.M. NURSING COLLEGE, ASHTI, BEED  
**Name of the Examination:** AUXILLARY NURSE MIDWIFERY FIRST YEAR  
**Name of the Exam. Centre:** District Hospital Beed  
**Subjects:** I II III IV  
**Signature of the Holder:**

**Note:**  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/07/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHUNDALE SONU VIJAY
Seat Number : 2203
Name of the Institution : S.S.P.M. NURSING COLLEGE, ASHTI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SONONE POOJA KAILAS
Seat Number : 2204
Name of the Institution : S.S.P.M. NURSING COLLEGE, ASHTI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AJANE MONIKA MAHADEO
Seat Number : 2205
Name of the Institution : DR. T. M. DHONDE SCHOOL OF NURSING, ASHTI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : 1
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/04/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AJNE ASHWINI BHIMRAO
Seat Number : 2206
Name of the Institution : DR. T. M. DHONDE SCHOOL OF NURSING, ASHTI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : 1
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 10/10/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BHILANGE DURGA SAMRAT

Seat Number : 2207

Name of the Institution : DR. T. M. DHONDE SCHOOL OF NURSING, ASHTI, BEED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : District Hospital Beed

Subjects : I

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2207

MASKBNPE

1)

2)

3)

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 13/07/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS BHOJANE POONAM VIJAY

Seat Number : 2208

Name of the Institution : DR. T. M. DHONDE SCHOOL OF NURSING, ASHTI, BEED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : District Hospital Beed

Subjects : I

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2208

MASKBNPE

1)

2)

3)

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

Sr. No. 2209

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DHANDAR RITA SURESH
Seat Number : 2209
Name of the Institution : DR. T. M. DHONDE SCHOOL OF NURSING, ASHTI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : II III
Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2210

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/06/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JADHAV PRIYANKA SUBHASH
Seat Number : 2210
Name of the Institution : DR. T. M. DHONDE SCHOOL OF NURSING, ASHTI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III IV
Signature of the Holder : 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 23/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NIMBALKAR KARUNA SAMADHAN
Seat Number : 2211
Name of the Institution : DR. T. M. DHONDE SCHOOL OF NURSING, ASHTI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/07/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NIMBALKAR ROSHANI SADASHIV
Seat Number : 2212
Name of the Institution : DR. T. M. DHONDE SCHOOL OF NURSING, ASHTI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 22/04/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAKODE SHALUNA GAJANAN
Seat Number : 2213
Name of the Institution : DR. T. M. DHONDE SCHOOL OF NURSING, ASHTI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : II III

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2213

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 26/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WANKHADE DIPALI RAMESHWAR
Seat Number : 2214
Name of the Institution : DR. T. M. DHONDE SCHOOL OF NURSING, ASHTI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : II

Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2214
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/04/1989
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JAGTAP VARSHA BALASAHEB
Seat Number : 2215
Name of the Institution : RAGHUNATHRAO MUNDHE INSTITUTE OF NURSING, AMBEJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/04/1993
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHMARE RAMA SHESRAO
Seat Number : 2216
Name of the Institution : RAGHUNATHRAO MUNDHE INSTITUTE OF NURSING, AMBEJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHANGHAV MONALI SHANKAR
Seat Number : 2217
Name of the Institution : JIJAMATA SCHOOL OF NURSING, MAJALGAON, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I  II  III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KIRWALE ROHINI BHAGWATRAO
Seat Number : 2218
Name of the Institution : JIJAMATA SCHOOL OF NURSING, MAJALGAON, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I  II  III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  
13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 11/12/1992

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS CHANDNE PALLAVI MAHADEV

Seat Number : 2219

Name of the Institution : MAULI NURSING SCHOOL BARSHI ROAD BEED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : District Hospital Beed

Subjects : I

Signature of the Holder : 

Note:  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET  
13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020

Date Of Birth : 05/10/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS GAIKAWAD KAJAL AVINASH

Seat Number : 2220

Name of the Institution : MAULI NURSING SCHOOL BARSHI ROAD BEED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : District Hospital Beed

Subjects : I II III V VI IV

Signature of the Holder : 

Note:  
1) Candidate will not be allowed in examination hall without this Hall Ticket.  
2) Practical Examination centre shall be as directed by the MSBNPE  
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/06/1989
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JADHAV RAJASREE SHREERANG
Seat Number : 2221
Name of the Institution : MAULI NURSING SCHOOL BARSHI ROAD BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 29/04/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KARKE MAYA GANGABHISHAN
Seat Number : 2222
Name of the Institution : MAULI NURSING SCHOOL BARSHI ROAD BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KORADE SHAMAL BABASAHEB
Seat Number : 2223
Name of the Institution : MAULI NURSING SCHOOL BARSHI ROAD BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 10/02/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAVALE AMRAPALI BABAN
Seat Number : 2224
Name of the Institution : MAULI NURSING SCHOOL BARSHI ROAD BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 26/01/1989

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS VEER SONALI DILIP

Seat Number: 2225

Name of the Institution: MAULI NURSING SCHOOL BARSHI ROAD BEED

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: District Hospital Beed

Subjects: I

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 04/10/1998

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS WADMARE KRANTI RAM

Seat Number: 2226

Name of the Institution: MAULI NURSING SCHOOL BARSHI ROAD BEED

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: District Hospital Beed

Subjects: I II III IV

Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/06/1989
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WADMARE MAHESHWARI PRALHAD
Seat Number : 2227
Name of the Institution : MAULI NURSING SCHOOL BARSHI ROAD BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I III
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/05/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS HIRVE ANKITA ABHIMANNYU
Seat Number : 2228
Name of the Institution : SHREE VENKATESHA NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 15/12/1999
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KANADE PALLAVI JANARDHAN
Seat Number: 2229
Name of the Institution: SHREE VENKATESHA NURSING SCHOOL, BEED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: District Hospital Beed
Subjects: I II
Signature of the Holder: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

13/01/2020

Sr. No. 2229

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 25/02/1996
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KHEDKAR JYOTI SAMPAT
Seat Number: 2230
Name of the Institution: SHREE VENKATESHA NURSING SCHOOL, BEED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: District Hospital Beed
Subjects: I II III
Signature of the Holder: 

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

13/01/2020

Sr. No. 2230

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/09/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAUT POOJA DATTATRAY
Seat Number : 2231
Name of the Institution : SHREE VENKATESHA NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2231

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/10/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BANGAR VIDYA VASANTA
Seat Number : 2232
Name of the Institution : GANDHI NURSING SCHOOL, ASHTI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
09/04/1995

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS KAMABLE SHILPA MAHENDRA

Seat Number
2233

Name of the Institution
VISHWAS SAWANT NURSING SCHOOL, BEED

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
District Hospital Beed

Subjects
I II IV

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2233

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth
10/06/1992

Date Of Exam
14/01/2020 To 17/01/2020

Name of the Candidate
MISS PANDIT SUNITA MADHAV

Seat Number
2234

Name of the Institution
VISHWAS SAWANT NURSING SCHOOL, BEED

Name of the Examination
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre
District Hospital Beed

Subjects
I II IV

Signature of the Holder

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2234
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/01/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS RAJGURU NILAM BALU
Seat Number : 2235
Name of the Institution : VISHWAS SAWANT NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2235

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 21/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS ADAGALE SHITAL SHAHADEV
Seat Number : 2236
Name of the Institution : PRAGATI NURSING SCHOOL, PATODA, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2236
### Sr. No. 2237

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
20/06/1996

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
SMT BAGUL PADMA ASHOK
Nee(GAIKWAD PADMA GANESH)

**Seat Number**
2237

**Name of the Institution**
PRAGATI NURSING SCHOOL, PATODA, BEED

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
District Hospital Beed

**Subjects**
1

**Signature of the Holder**

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**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### Sr. No. 2238

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**HALL TICKET**

**For the**
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**
07/01/2000

**Date Of Exam**
14/01/2020 To 17/01/2020

**Name of the Candidate**
MISS CHIKANE DURGABAI KASHINATH

**Seat Number**
2238

**Name of the Institution**
PRAGATI NURSING SCHOOL, PATODA, BEED

**Name of the Examination**
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**
District Hospital Beed

**Subjects**
1 II

**Signature of the Holder**

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**Note:**
1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 30/11/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : SMT CHINDE DIKSHA SURESH
                        Nee(KANADE DIKSHA KAILAS)
Seat Number : 2239
Name of the Institution : PRAGATI NURSING SCHOOL, PATODA, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III V VI IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2239

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 29/12/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GHULE PRIYANKA AJABRAO
Seat Number : 2240
Name of the Institution : PRAGATI NURSING SCHOOL, PATODA, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2240
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/08/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JADHAV JUGAL MAHADU
Seat Number : 2241
Name of the Institution : PRAGATI NURSING SCHOOL, PATODA, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I  II  IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/12/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KALE PRAJKTA VILAS
Seat Number : 2242
Name of the Institution : PRAGATI NURSING SCHOOL, PATODA, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I  II  III  IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 09/07/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KHARAT SMIKSHA SIDDHARTH

Seat Number : 2243

Name of the Institution : PRAGATI NURSING SCHOOL, PATODA, BEED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : District Hospital Beed

Subjects : I IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 07/02/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS NISARGANDH ABHILAISHA BHARAT

Seat Number : 2244

Name of the Institution : PRAGATI NURSING SCHOOL, PATODA, BEED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : District Hospital Beed

Subjects : I

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/12/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PANDIT ANURADHA BALKRISHN
Seat Number : 2245
Name of the Institution : PRAGATI NURSING SCHOOL, PATODA, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2245

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 31/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SATHE MANISHA BAGISH
Seat Number : 2246
Name of the Institution : PRAGATI NURSING SCHOOL, PATODA, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2246
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/01/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS THORAT SNEHA MADHUKAR
Seat Number : 2247
Name of the Institution : PRAGATI NURSING SCHOOL, PATODA, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2247

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/06/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : SMT VEER MIRA PRALHAD Nee(SIRSAT MIRA YUVRAJ)
Seat Number : 2248
Name of the Institution : PRAGATI NURSING SCHOOL, PATODA, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2248
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DABHADE USHA KAILAS
Seat Number : 2249
Name of the Institution : SAMARTH NURSING SCHOOL, WADVANI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I  III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 22/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS IRALE PRIYANKA ASHOK
Seat Number : 2250
Name of the Institution : SAMARTH NURSING SCHOOL, WADVANI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I  II  III  IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 27/02/1998

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS MASKE SONALI SHRIHARI

Seat Number : 2251

Name of the Institution : SAMARTH NURSING SCHOOL, WADVANI, BEED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : District Hospital Beed

Subjects : I II III IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2251

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the
: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 21/05/1994

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS UJGARE JAYA MAHADEV

Seat Number : 2252

Name of the Institution : SAMARTH NURSING SCHOOL, WADVANI, BEED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : District Hospital Beed

Subjects : I II III IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2252
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
19/04/1996

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS DHAWAN KIRAN BHARAT

Seat Number:
2255

Name of the Institution:
SANSKRUTI NURSING SCHOOL, BEED

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
District Hospital Beed

Subjects:
I II III IV

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the:
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth:
05/08/1991

Date Of Exam:
14/01/2020 To 17/01/2020

Name of the Candidate:
MISS GAIKWAD KOMAL PRAKASHRAO

Seat Number:
2256

Name of the Institution:
SANSKRUTI NURSING SCHOOL, BEED

Name of the Examination:
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre:
District Hospital Beed

Subjects:
I II IV

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/04/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KALE JAYASHRI AMBADAS
Seat Number : 2259
Name of the Institution : SANSKRUTI NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2260

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 28/11/1987
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KAMBALE SAVITA BABAN
Seat Number : 2260
Name of the Institution : SANSKRUTI NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 18/06/1985

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS KANDEKAR LAXMI ACHYUTRAO

Seat Number: 2261

Name of the Institution: SANSKRUTI NURSING SCHOOL, BEED

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: District Hospital Beed

Subjects: II IV

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2261

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

13/01/2020

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 11/11/1983

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS MAGARE VANDANA PANDURANG

Seat Number: 2262

Name of the Institution: SANSKRUTI NURSING SCHOOL, BEED

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: District Hospital Beed

Subjects: II III

Signature of the Holder:

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2262

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For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date of Birth: 09/02/1990
Date of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SABLE RESHMA GORAKH
Seat Number: 2263
Name of the Institution: SANSKRUTI NURSING SCHOOL, BEED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: District Hospital Beed
Subjects: I II III IV
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date of Birth: 05/01/1997
Date of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS SAWAI KOMAL SUNIL
Seat Number: 2264
Name of the Institution: SANSKRUTI NURSING SCHOOL, BEED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: District Hospital Beed
Subjects: I II
Signature of the Holder:
Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2265

Sr. No. 2266
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/04/1991
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHMARE NISHA RAOSAHEB
Seat Number : 2267
Name of the Institution : SANSKRUTI NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III IV
Signature of the Holder :  

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION,MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No.  2267

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/08/1984
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHMARE PRADHNYA ADINATH
Seat Number : 2268
Name of the Institution : SANSKRUTI NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III
Signature of the Holder :  

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION,MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No.  2268
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/09/1989
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GIRI SANJIWANI DHANRAJ
Seat Number : 2273
Name of the Institution : KAI BABURAO GHULE SCHOOL OF NURSING, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2273

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 26/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS INGLE LAXMI GAJANAN
Seat Number : 2274
Name of the Institution : KAI BABURAO GHULE SCHOOL OF NURSING, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2274
HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/07/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NILE PRAJAKTA BABURAO
Seat Number : 2275
Name of the Institution : KAI BABURAO GHULE SCHOOL OF NURSING, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : II  III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/08/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PAHURKAR SADHANA NANDKISHOR
Seat Number : 2276
Name of the Institution : KAI BABURAO GHULE SCHOOL OF NURSING, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I  II  III  V  VI  IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PATIL PRITI RAMESH
Seat Number : 2277
Name of the Institution : KAI BABURAO GHULE SCHOOL OF NURSING, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 07/08/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SIRSAT SUKESHANI RANDHIR
Seat Number : 2278
Name of the Institution : KAI BABURAO GHULE SCHOOL OF NURSING, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III V VI IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 19/11/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SIRSAT SONU KASHIRAM
Seat Number : 2279
Name of the Institution : KAI BABURAO GHULE SCHOOL OF NURSING, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III V VI IV
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TAYADE KARUNA MANOHAR
Seat Number : 2280
Name of the Institution : KAI BABURAO GHULE SCHOOL OF NURSING, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET
13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/10/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS TAYADE KARUNA BHAIIYYA
Seat Number : 2281
Name of the Institution : KAI BABURAO GHULE SCHOOL OF NURSING, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Date Of Birth : 09/10/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS THOMBARE DIPALI HARISHCHANDRA
Seat Number : 2282
Name of the Institution : KAI BABURAO GHULE SCHOOL OF NURSING, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : II
Signature of the Holder :

Note:
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 08/09/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WANKHADE SAPANA SUNIL
Seat Number : 2283
Name of the Institution : KAI BABURAO GHULE SCHOOL OF NURSING, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 09/02/1991
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BORUDE SONIBAI NAMDEV
Seat Number : 2285
Name of the Institution : RAMLING VIGHNE NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/08/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GORE CHHAKULI BHIVSEN
Seat Number : 2286
Name of the Institution : RAMLING VIGHNE NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III IV
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
# Hall Ticket

**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**Hall Ticket**

<table>
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<tr>
<th>Sr. No.</th>
<th>2287</th>
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**For the**

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<th>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</th>
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**Date Of Birth**

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**Date Of Exam**

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**Name of the Candidate**

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<th>MISS JADHAV PRIYANKA SAKHARAM</th>
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**Seat Number**

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**Name of the Institution**

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**Name of the Examination**

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**Name of the Exam. Centre**

<table>
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<th>District Hospital Beed</th>
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**Subjects**

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<th>I II III</th>
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**Signature of the Holder**

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**Note:**

1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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**Sr. No. 2288**

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**MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION**

**Hall Ticket**

<table>
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<th>Sr. No.</th>
<th>2288</th>
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**For the**

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<tr>
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<th>AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020</th>
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**Date Of Birth**

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**Date Of Exam**

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**Name of the Candidate**

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<th>MISS KADAM ANURADHA BALASAHEB</th>
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**Seat Number**

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**Name of the Institution**

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<th>RAMLING VIGHNE NURSING SCHOOL, BEED</th>
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**Name of the Examination**

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<tr>
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<th>AUXILLARY NURSE MIDWIFERY FIRST YEAR</th>
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**Name of the Exam. Centre**

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**Subjects**

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**Signature of the Holder**

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**Note:**

1. Candidate will not be allowed in examination hall without this Hall Ticket.
2. Practical Examination centre shall be as directed by the MSBNPE.
3. Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/01/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHUDE PRAJTKA SUBHASH
Seat Number : 2289
Name of the Institution : RAMLING VIGHNE NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 17/03/1992
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LONDHE SWATI NAMDEV
Seat Number : 2290
Name of the Institution : RAMLING VIGHNE NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 06/07/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LONDHE RUPALI NARAYAN
Seat Number : 2291
Name of the Institution : RAMLING VIGHNE NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 13/04/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LONDHE SUSHMA MADHUKAR
Seat Number : 2292
Name of the Institution : RAMLING VIGHNE NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 06/06/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LONKE SONALI KESHAV
Seat Number : 2293
Name of the Institution : RAMLING VIGHNE NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 26/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LONKE JAYSHRI SHAHADEO
Seat Number : 2294
Name of the Institution : RAMLING VIGHNE NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**  
05/11/1999

**Date Of Exam**  
14/01/2020 To 17/01/2020

**Name of the Candidate**  
MISS MAGAR RADHA BABAN

**Seat Number**  
2295

**Name of the Institution**  
RAMLING VIGHNE NURSING SCHOOL, BEED

**Name of the Examination**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**  
District Hospital Beed

**Subjects**  
I II III IV

**Signature of the Holder**

---

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

**For the**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth**  
07/05/1999

**Date Of Exam**  
14/01/2020 To 17/01/2020

**Name of the Candidate**  
MISS MISHAL MINAKSHI SANJAY

**Seat Number**  
2296

**Name of the Institution**  
RAMLING VIGHNE NURSING SCHOOL, BEED

**Name of the Examination**  
AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre**  
District Hospital Beed

**Subjects**  
I II III IV

**Signature of the Holder**

---

**Note:**
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 29/12/1996
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS POTE RENUKA UKANDA

Seat Number: 2297
Name of the Institution: RAMLING VIGHNE NURSING SCHOOL, BEED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: District Hospital Beed

Subjects: I II III IV
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2297

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 03/05/1997
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS PRADHAN POONAM RAMESH

Seat Number: 2298
Name of the Institution: RAMLING VIGHNE NURSING SCHOOL, BEED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: District Hospital Beed

Subjects: I III IV
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2298
Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

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Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/09/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS GAIKWAD POOJA SURYAKANT
Seat Number : 2301
Name of the Institution : DIPTI AAHER NURSING SCHOOL, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket. 
2) Practical Examination centre shall be as directed by the MSBNPE 
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/05/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS JOGDAND NEHA DASHRATH
Seat Number : 2302
Name of the Institution : DIPTI AAHER NURSING SCHOOL, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket. 
2) Practical Examination centre shall be as directed by the MSBNPE 
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 12/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PENDOR SANGITA PUNJARAM
Seat Number : 2303
Name of the Institution : DIPTI AAHER NURSING SCHOOL, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : 1
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2303

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 05/07/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHINDE SHWATA SUBASH
Seat Number : 2304
Name of the Institution : DIPTI AAHER NURSING SCHOOL, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : 1
Signature of the Holder :

Note:
1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2304
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 14/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SONWANE MAYURI SHIVAJI
Seat Number : 2305
Name of the Institution : DIPTI AAHER NURSING SCHOOL, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed

Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2305

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 18/05/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WANOLE VIJAYMALA UTTAM
Seat Number : 2306
Name of the Institution : DIPTI AAHER NURSING SCHOOL, AMBAJOGAI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I II IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2306
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 01/12/1991
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BANSODE SHUBHANGI YUVARAJ
Seat Number : 2307
Name of the Institution : JIJAMATA NURSING SCHOOL,DHARPUR,BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 05/09/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SIRSAT VISHAKHA HARISHCHANDRA
Seat Number : 2308
Name of the Institution : JIJAMATA NURSING SCHOOL,DHARPUR,BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I III
Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 01/05/1990
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SIRSAT SONALI BANSI
Seat Number : 2309
Name of the Institution : JIJAMATA NURSING SCHOOL, DHARPUR, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2309

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 15/06/1995
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS AATHAVALE NAINA KAILAS
Seat Number : 2310
Name of the Institution : SOU RUKHMINI MANOHAR MACHALE NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 04/11/1998

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS GAIKWAD POOJA MAROTI

Seat Number: 2311

Name of the Institution: SOU RUKHMINI MANOHAR MACHALE NURSING SCHOOL, BEED

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: District Hospital Beed

Subjects: I II IV

Signature of the Holder:

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2311

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth: 11/08/1985

Date Of Exam: 14/01/2020 To 17/01/2020

Name of the Candidate: MISS HAJARE VARSHA KISANRAO

Seat Number: 2312

Name of the Institution: SOU RUKHMINI MANOHAR MACHALE NURSING SCHOOL, BEED

Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre: District Hospital Beed

Subjects: I

Signature of the Holder:

REGISTRAR
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE.
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2312
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 09/07/1992

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS JADHAV SONALI ANKUSH

Seat Number : 2313

Name of the Institution : SOU RUKHMINI MANOHAR MACHALE NURSING SCHOOL, BEED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : District Hospital Beed

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2313

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 20/02/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS JADHAV TEJASWINI BALU

Seat Number : 2314

Name of the Institution : SOU RUKHMINI MANOHAR MACHALE NURSING SCHOOL, BEED

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : District Hospital Beed

Subjects : I II III IV

Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.
MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth: 24/04/1997
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KAKDE VAISHALI TUKARAM
Seat Number: 2315
Name of the Institution: SOU RUKHMINI MANOHAR MACHALE NURSING SCHOOL, BEED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: District Hospital Beed
Subjects: I II III IV
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2315

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the: AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth: 07/06/1986
Date Of Exam: 14/01/2020 To 17/01/2020
Name of the Candidate: MISS KAMBLE DAIWASHALA BHASKAR
Seat Number: 2316
Name of the Institution: SOU RUKHMINI MANOHAR MACHALE NURSING SCHOOL, BEED
Name of the Examination: AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre: District Hospital Beed
Subjects: IV
Signature of the Holder:

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
2) Practical Examination centre shall be as directed by the MSBNPE
3) Candidate is requested to note that if there is any change in name, the candidate should contact the MSBNPE through institute authority before commencement of the examination.

Sr. No. 2316
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<thead>
<tr>
<th>Sr. No.</th>
<th>2317</th>
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<tr>
<td><strong>MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION</strong></td>
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<td>Date Of Birth :</td>
<td>08/09/1991</td>
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<tr>
<td>Date Of Exam :</td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td>Name of the Candidate :</td>
<td>MISS SHEKTE ARTI SHYAMRAO</td>
</tr>
<tr>
<td>Seat Number :</td>
<td>2317</td>
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<tr>
<td>Name of the Institution :</td>
<td>SOU RUKHMINI MANOHAR MACHALE NURSING SCHOOL, BEED</td>
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<tr>
<td>Name of the Examination :</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<tr>
<td>Name of the Exam. Centre :</td>
<td>District Hospital Beed</td>
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<tr>
<td>Subjects :</td>
<td>IV</td>
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<td>Signature of the Holder :</td>
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</table>

**Note:**
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<tr>
<td><strong>HALL TICKET</strong></td>
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<tr>
<td>Date Of Exam :</td>
<td>14/01/2020 To 17/01/2020</td>
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<tr>
<td>Name of the Candidate :</td>
<td>MISS SHINDE SHILA SAYAJI</td>
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<tr>
<td>Seat Number :</td>
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<tr>
<td>Name of the Institution :</td>
<td>SOU RUKHMINI MANOHAR MACHALE NURSING SCHOOL, BEED</td>
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<td>Name of the Examination :</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<td>Name of the Exam. Centre :</td>
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<td>Subjects :</td>
<td>I III IV</td>
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<td>Signature of the Holder :</td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 24/10/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SONAVANE KOMAL NARESH
Seat Number : 2319
Name of the Institution : SOU RUKHMINI MANOHAR MACHALE NURSING SCHOOL, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2319

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/09/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS BARKUNTE SHUBHANGI RAJENDERA
Seat Number : 2320
Name of the Institution : UNIQUE RANM NURSING SCHOOL, PARLI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/10/1994
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHANDARE SNEHA GUNRATNA
Seat Number : 2321
Name of the Institution : UNIQUE RANM NURSING SCHOOL, PARLI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2321

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 05/06/1996
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LONE SHALUTAI SONAJI
Seat Number : 2322
Name of the Institution : UNIQUE RANM NURSING SCHOOL, PARLI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2322
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<tr>
<td>2323</td>
<td>MISS MASKE SIMA DNYANOBA</td>
<td>21/07/1992</td>
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<td>I IV</td>
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<td>UNIQUE RANM NURSING SCHOOL, PARLI, BEED</td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
25/05/1996

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS POHARE MANDAKINI MARIBA

Seat Number :
2325

Name of the Institution :
UNIQUE RANM NURSING SCHOOL, PARLI, BEED

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
District Hospital Beed

Subjects :
I  II  III  IV

Signature of the Holder :

Note:
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Sr. No. 2325

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the :
AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth :
15/10/1997

Date Of Exam :
14/01/2020 To 17/01/2020

Name of the Candidate :
MISS SADAWARTE PORNIMA PRAKASH

Seat Number :
2326

Name of the Institution :
UNIQUE RANM NURSING SCHOOL, PARLI, BEED

Name of the Examination :
AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre :
District Hospital Beed

Subjects :
I  II  IV

Signature of the Holder :

Note:
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Sr. No. 2326
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 14/07/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WADHAVE TRIDHARA MADHAV
Seat Number : 2327
Name of the Institution : UNIQUE RANM NURSING SCHOOL, PARLI, BEED
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : District Hospital Beed
Subjects : I III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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**For the** : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth** : 27/07/1997

**Date Of Exam** : 14/01/2020 To 17/01/2020

**Name of the Candidate** : MISS WAWALE PRAJAVATI DNYANESHWAR

**Seat Number** : 2329

**Name of the Institution** : UNIQUE RANM NURSING SCHOOL, PARLI, BEED

**Name of the Examination** : AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre** : District Hospital Beed

**Subjects** : I II III IV

**Signature of the Holder** : 

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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**For the** : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

**Date Of Birth** : 27/07/1997

**Date Of Exam** : 14/01/2020 To 17/01/2020

**Name of the Candidate** : MISS WAWALE PRAJAVATI DNYANESHWAR

**Seat Number** : 2329

**Name of the Institution** : UNIQUE RANM NURSING SCHOOL, PARLI, BEED

**Name of the Examination** : AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre** : District Hospital Beed

**Subjects** : I II III IV

**Signature of the Holder** : 

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**Date Of Birth** : 14/12/1998

**Date Of Exam** : 14/01/2020 To 17/01/2020

**Name of the Candidate** : MISS BALSHANKAR RESHMA GORAKH

**Seat Number** : 2330

**Name of the Institution** : DISTRICT HOSPITAL, SAWARGAON, AMBAJOGAI, BEED

**Name of the Examination** : AUXILLARY NURSE MIDWIFERY FIRST YEAR

**Name of the Exam. Centre** : District Hospital Beed

**Subjects** : IV

**Signature of the Holder** : 

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 16/04/1989
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PENDOR SHARDA SAKARU
Seat Number : 2331
Name of the Institution : Yash Institute of Nursing, Athori Bazar, Yavatmal
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, YAVATMAL
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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Sr. No. 2331

REGISTRAR

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 03/05/1997
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KASDEKR ANJALI BANSILAL
Seat Number : 2332
Name of the Institution : KAMLABAI UMAK NURSING SCHOOL, AMRAVATI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, AMRAVATI
Subjects : I II III IV
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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<td><strong>Date Of Exam</strong></td>
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<td><strong>Subjects</strong></td>
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<td><strong>Date Of Exam</strong></td>
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<tr>
<td><strong>Name of the Candidate</strong></td>
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<td><strong>Seat Number</strong></td>
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<td><strong>Name of the Institution</strong></td>
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<td><strong>Name of the Examination</strong></td>
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<td><strong>Name of the Exam. Centre</strong></td>
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 25/03/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS PATODE MAYA KAILAS
Seat Number : 2335
Name of the Institution : L.D.H.T. SCHOOL OF NURSING, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II III
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 12/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS HONAMANE PRIYANKA RAMESH
Seat Number : 2336
Name of the Institution : L.D.H.T. SCHOOL OF NURSING, HINGOLI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 20/10/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS NAIKNAWARE DIPALI JALINDAR
Seat Number : 2337
Name of the Institution : SAHARA INSTITUTE OF NURSING EDUCATION, AKLUJ, SOLAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Solapur
Subjects : I II IV
Signature of the Holder : 

Note:
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Sr. No. 2337

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 27/07/1988
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DANANE GANGA NARAYAN
Seat Number : 2338
Name of the Institution : SAHARA INSTITUTE OF NURSING EDUCATION, AKLUJ, SOLAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Solapur
Subjects : II
Signature of the Holder : 

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Sr. No. 2338
For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 28/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS LOKHANDE MOHINI RAMESH
Seat Number : 2339
Name of the Institution : SAHARA INSTITUTE OF NURSING EDUCATION, AKLUJ, SOLAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Solapur
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January2020
Date Of Birth : 27/10/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS WAGHMARE ARATI BHARAT
Seat Number : 2340
Name of the Institution : SAHARA INSTITUTE OF NURSING EDUCATION, AKLUJ, SOLAPUR
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Solapur
Subjects : II
Signature of the Holder :

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 19/11/1999

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS KATE SAYLI MOHAN

Seat Number : 2341

Name of the Institution : SAHARA INSTITUTE OF NURSING EDUCATION, AKLUJ, SOLAPUR

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : GENERAL HOSPITAL, Solapur

Subjects : I II III V VI IV

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 11/06/2000

Date Of Exam : 14/01/2020 To 17/01/2020

Name of the Candidate : MISS TIRPUDE MOHINI DHARMENDRA

Seat Number : 2342

Name of the Institution : KAMALATAI BUDHE NURSING SCHOOL, GONDIA

Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR

Name of the Exam. Centre : DAGA MEMORIAL HOSPITAL, NAGPUR

Subjects : I III

Signature of the Holder : 

Note: 1) Candidate will not be allowed in examination hall without this Hall Ticket.
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<td><strong>Name of the Candidate</strong></td>
<td>MISS SOMKUVAR RANJANA MANOHAR</td>
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<td><strong>Seat Number</strong></td>
<td>2343</td>
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<td><strong>Name of the Institution</strong></td>
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<td><strong>Name of the Examination</strong></td>
<td>AUXILLARY NURSE MIDWIFERY FIRST YEAR</td>
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<td><strong>Subjects</strong></td>
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</table>
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<tr>
<td><strong>HALL TICKET</strong></td>
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<tr>
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<td>MISS MARASKOLHE SHANTA BHOJRAJ</td>
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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

**HALL TICKET**

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### MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 05/11/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS KHRARADE JYOTI CHANGDEV

Seat Number : 2347
Name of the Institution : SAMARTH NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : II III
Signature of the Holder :

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020

Date Of Birth : 11/02/2000
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DEVKAR SHOBHABAI KUNDLIK

Seat Number : 2348
Name of the Institution : SAMARTH NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : I II III
Signature of the Holder :

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION, MUMBAI

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 11/05/1998
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS DUKARE SAVITA SATVARAO
Seat Number : 2349
Name of the Institution : SAMARTH NURSING SCHOOL, PARBHANI
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Parbhani
Subjects : II, III
Signature of the Holder :

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MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

HALL TICKET 13/01/2020

For the : AUXILLARY NURSE MIDWIFERY FIRST YEAR to be held in January 2020
Date Of Birth : 04/08/1999
Date Of Exam : 14/01/2020 To 17/01/2020
Name of the Candidate : MISS SHIDAME SWATI PRABHU
Seat Number : 2350
Name of the Institution : NAV YUVA NURSING SCHOOL, BHANDARA
Name of the Examination : AUXILLARY NURSE MIDWIFERY FIRST YEAR
Name of the Exam. Centre : GENERAL HOSPITAL, Bhandara
Subjects : I, IV
Signature of the Holder :

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