

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : CAMA & ALBLESS HOSPITAL , MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : CAMA & ALBLESS HOSPITAL , MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
25	25	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : CAMA & ALBLESS HOSPITAL , MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
49	49	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : CAMA & ALBLESS HOSPITAL , MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
73	73	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : V.S.Gen.Hospital, Thane

Date:-

Sr . No.	Seat No.	Signature of Student
74	74	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : V.S.Gen.Hospital, Thane

Date:-

Sr . No.	Seat No.	Signature of Student
98	98	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : V.S.Gen.Hospital, Thane

Date:-

Sr . No.	Seat No.	Signature of Student
122	122	
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144	7083	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, Ratnagiri

Date:-

Sr . No.	Seat No.	Signature of Student
145	144	
146	145	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Ratnagiri

Date:-

Sr . No.	Seat No.	Signature of Student
169	168	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, Nasik

Date:-

Sr . No.	Seat No.	Signature of Student
193	192	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, Nasik

Date:-

Sr . No.	Seat No.	Signature of Student
217	216	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Nasik

Date:-

Sr . No.	Seat No.	Signature of Student
241	240	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Nasik

Date:-

Sr . No.	Seat No.	Signature of Student
265	264	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, Dhule

Date:-

Sr . No.	Seat No.	Signature of Student
283	282	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, Dhule

Date:-

Sr . No.	Seat No.	Signature of Student
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Dhule

Date:-

Sr . No.	Seat No.	Signature of Student
331	330	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Dhule

Date:-

Sr . No.	Seat No.	Signature of Student
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, JALGAON

Date:-

Sr . No.	Seat No.	Signature of Student
379	378	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, JALGAON

Date:-

Sr . No.	Seat No.	Signature of Student
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, JALGAON

Date:-

Sr . No.	Seat No.	Signature of Student
427	426	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, JALGAON

Date:-

Sr . No.	Seat No.	Signature of Student
451	450	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GANPATRAO ADKE INE. NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
461	460	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GANPATRAO ADKE INE. NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
485	484	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GANPATRAO ADKE INE. NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
509	508	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : NASIK MEDICO TRAINING COLLEGE OF NURSING, NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
529	528	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : NASIK MEDICO TRAINING COLLEGE OF NURSING, NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : NASIK MEDICO TRAINING COLLEGE OF NURSING, NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
577	576	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : NOOTAN SCHOOL OF NURSING, RAIGAD

Date:-

Sr . No.	Seat No.	Signature of Student
593	592	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : NOOTAN SCHOOL OF NURSING, RAIGAD

Date:-

Sr . No.	Seat No.	Signature of Student
617	616	
618	617	
619	618	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : NOOTAN SCHOOL OF NURSING, RAIGAD

Date:-

Sr . No.	Seat No.	Signature of Student
641	640	
642	641	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SHREE ANANT SMRUTI SCHOOL OF NURSING, KASAL

Date:-

Sr . No.	Seat No.	Signature of Student
648	647	
649	648	
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SHREE ANANT SMRUTI SCHOOL OF NURSING, KASAL

Date:-

Sr . No.	Seat No.	Signature of Student
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SHREE ANANT SMRUTI SCHOOL OF NURSING, KASAL

Date:-

Sr . No.	Seat No.	Signature of Student
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Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : NASHIK NURSING SCHOOL, NASHIK

Date:-

Sr . No.	Seat No.	Signature of Student
719	718	
720	719	
721	720	
722	721	
723	722	
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739	738	
740	739	
741	740	
742	741	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : NASHIK NURSING SCHOOL, NASHIK

Date:-

Sr . No.	Seat No.	Signature of Student
743	742	
744	743	
745	744	
746	745	
747	746	
748	747	
749	748	
750	749	
751	750	
752	751	
753	752	
754	753	
755	754	
756	755	
757	756	
758	757	
759	758	
760	759	
761	760	
762	761	
763	762	
764	763	
765	764	
766	765	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : NASHIK NURSING SCHOOL, NASHIK

Date:-

Sr . No.	Seat No.	Signature of Student
767	766	
768	767	
769	768	
770	769	
771	770	
772	771	
773	772	
774	773	
775	774	
776	775	
777	776	
778	777	
779	778	
780	779	
781	780	
782	781	
783	782	
784	783	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL,AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
785	1315	
786	1316	
787	1317	
788	1318	
789	1319	
790	1320	
791	1321	
792	1322	
793	1323	
794	1324	
795	1325	
796	1326	
797	1327	
798	1328	
799	1329	
800	1330	
801	1331	
802	1332	
803	1333	
804	1334	
805	1335	
806	1336	
807	1337	
808	1338	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL,AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
809	1339	
810	1340	
811	1341	
812	1342	
813	1343	
814	1344	
815	1345	
816	1346	
817	1347	
818	1348	
819	1349	
820	1350	
821	1351	
822	1352	
823	1353	
824	1354	
825	1355	
826	1356	
827	1357	
828	1358	
829	1359	
830	1360	
831	1361	
832	1362	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL,AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
833	1363	
834	1364	
835	1365	
836	1366	
837	1367	
838	1368	
839	1369	
840	1370	
841	1371	
842	1372	
843	1373	
844	1374	
845	1375	
846	1376	
847	1377	
848	1378	
849	1379	
850	1380	
851	1381	
852	1382	
853	1383	
854	1384	
855	1385	
856	1386	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL,AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
857	1387	
858	1388	
859	1389	
860	1390	
861	1391	
862	1392	
863	1393	
864	1394	
865	1395	
866	1396	
867	1397	
868	1398	
869	1399	
870	1400	
871	1401	
872	1402	
873	1403	
874	1404	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, Satara

Date:-

Sr . No.	Seat No.	Signature of Student
875	1405	
876	1406	
877	1407	
878	1408	
879	1409	
880	1410	
881	1411	
882	1412	
883	1413	
884	1414	
885	1415	
886	1416	
887	1417	
888	1418	
889	1419	
890	1420	
891	1421	
892	1422	
893	1423	
894	1424	
895	1425	
896	1426	
897	1427	
898	1428	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, Satara

Date:-

Sr . No.	Seat No.	Signature of Student
899	1429	
900	1430	
901	1431	
902	1432	
903	1433	
904	1434	
905	1435	
906	1436	
907	1437	
908	1438	
909	1439	
910	1440	
911	1441	
912	1442	
913	1443	
914	1444	
915	1445	
916	1446	
917	1447	
918	1448	
919	1449	
920	1450	
921	1451	
922	1452	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Satara

Date:-

Sr . No.	Seat No.	Signature of Student
923	1453	
924	1454	
925	1455	
926	1456	
927	1457	
928	1458	
929	1459	
930	1460	
931	1461	
932	1462	
933	1463	
934	1464	
935	1465	
936	1466	
937	1467	
938	1468	
939	1469	
940	1470	
941	1471	
942	1472	
943	1473	
944	1474	
945	1475	
946	1476	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Satara

Date:-

Sr . No.	Seat No.	Signature of Student
947	1477	
948	1478	
949	1479	
950	1480	
951	1481	
952	1482	
953	1483	
954	1484	
955	1485	
956	1486	
957	1487	
958	1488	
959	1489	
960	1490	
961	1491	
962	1492	
963	1493	
964	1494	
965	1495	
966	1496	
967	1497	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : C.P.R. GENERAL HOSPITAL, KOLHAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
968	1498	
969	1499	
970	1500	
971	1501	
972	1502	
973	1503	
974	1504	
975	1505	
976	1506	
977	1507	
978	1508	
979	1509	
980	1510	
981	1511	
982	1512	
983	1513	
984	1514	
985	1515	
986	1516	
987	1517	
988	1518	
989	1519	
990	1520	
991	1521	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : C.P.R. GENERAL HOSPITAL, KOLHAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
992	1522	
993	1523	
994	1524	
995	1525	
996	1526	
997	1527	
998	1528	
999	1529	
1000	1530	
1001	1531	
1002	1532	
1003	1533	
1004	1534	
1005	1535	
1006	1536	
1007	1537	
1008	1538	
1009	1539	
1010	1540	
1011	1541	
1012	1542	
1013	1543	
1014	1544	
1015	1545	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : C.P.R. GENERAL HOSPITAL, KOLHAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1016	1546	
1017	1547	
1018	1548	
1019	1549	
1020	1550	
1021	1551	
1022	1552	
1023	1553	
1024	1554	
1025	1555	
1026	1556	
1027	1557	
1028	1558	
1029	1559	
1030	1560	
1031	1561	
1032	1562	
1033	1563	
1034	1564	
1035	1565	
1036	1566	
1037	1567	
1038	1568	
1039	1569	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : C.P.R. GENERAL HOSPITAL, KOLHAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1040	1570	
1041	1571	
1042	1572	
1043	1573	
1044	1574	
1045	1575	
1046	1576	
1047	1577	
1048	1578	
1049	1579	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : DR.J.J.MAGDUM INSTITUTE OF NSG.EDU., JAYSINGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1050	1580	
1051	1581	
1052	1582	
1053	1583	
1054	1584	
1055	1585	
1056	1586	
1057	1587	
1058	1588	
1059	1589	
1060	1590	
1061	1591	
1062	1592	
1063	1593	
1064	1594	
1065	1595	
1066	1596	
1067	1597	
1068	1598	
1069	1599	
1070	1600	
1071	1601	
1072	1602	
1073	1603	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : DR.J.J.MAGDUM INSTITUTE OF NSG.EDU., JAYSINGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1074	1604	
1075	1605	
1076	1606	
1077	1607	
1078	1608	
1079	1609	
1080	1610	
1081	1611	
1082	1612	
1083	1613	
1084	1614	
1085	1615	
1086	1616	
1087	1617	
1088	1618	
1089	1619	
1090	1620	
1091	1621	
1092	1622	
1093	1623	
1094	1624	
1095	1625	
1096	1626	
1097	1627	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : DR.J.J.MAGDUM INSTITUTE OF NSG.EDU., JAYSINGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1098	1628	
1099	1629	
1100	1630	
1101	1631	
1102	1632	
1103	1633	
1104	1634	
1105	1635	
1106	1636	
1107	1637	
1108	1638	
1109	1639	
1110	1640	
1111	1641	
1112	1642	
1113	1643	
1114	1644	
1115	1645	
1116	1646	
1117	1647	
1118	1648	
1119	1649	
1120	1650	
1121	1651	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : DR.J.J.MAGDUM INSTITUTE OF NSG.EDU., JAYSINGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1122	1652	
1123	1653	
1124	1654	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : ASHWINI SAHAKARI RUGNALAYA & RESEARCH CENTRE, SOLAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1125	1655	
1126	1656	
1127	1657	
1128	1658	
1129	1659	
1130	1660	
1131	1661	
1132	1662	
1133	1663	
1134	1664	
1135	1665	
1136	1666	
1137	1667	
1138	1668	
1139	1669	
1140	1670	
1141	1671	
1142	1672	
1143	1673	
1144	1674	
1145	1675	
1146	1676	
1147	1677	
1148	1678	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : ASHWINI SAHAKARI RUGNALAYA & RESEARCH CENTRE, SOLAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1149	1679	
1150	1680	
1151	1681	
1152	1682	
1153	1683	
1154	1684	
1155	1685	
1156	1686	
1157	1687	
1158	1688	
1159	1689	
1160	1690	
1161	1691	
1162	1692	
1163	1693	
1164	1694	
1165	1695	
1166	1696	
1167	1697	
1168	1698	
1169	1699	
1170	1700	
1171	1701	
1172	1702	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : ASHWINI SAHAKARI RUGNALAYA & RESEARCH CENTRE, SOLAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1173	1703	
1174	1704	
1175	1705	
1176	1706	
1177	1707	
1178	1708	
1179	1709	
1180	1710	
1181	1711	
1182	1712	
1183	1713	
1184	1714	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SEVA NURSING SCHOOL, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
1185	1715	
1186	1716	
1187	1717	
1188	1718	
1189	1719	
1190	1720	
1191	1721	
1192	1722	
1193	1723	
1194	1724	
1195	1725	
1196	1726	
1197	1727	
1198	1728	
1199	1729	
1200	1730	
1201	1731	
1202	1732	
1203	1733	
1204	1734	
1205	1735	
1206	1736	
1207	1737	
1208	1738	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SEVA NURSING SCHOOL, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
1209	1739	
1210	1740	
1211	1741	
1212	1742	
1213	1743	
1214	1744	
1215	1745	
1216	1746	
1217	1747	
1218	1748	
1219	1749	
1220	1750	
1221	1751	
1222	1752	
1223	1753	
1224	1754	
1225	1755	
1226	1756	
1227	1757	
1228	1758	
1229	1759	
1230	1760	
1231	1761	
1232	1762	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SEVA NURSING SCHOOL, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
1233	1763	
1234	1764	
1235	1765	
1236	1766	
1237	1767	
1238	1768	
1239	1769	
1240	1770	
1241	1771	
1242	1772	
1243	1773	
1244	1774	
1245	1775	
1246	1776	
1247	1777	
1248	1778	
1249	1779	
1250	1780	
1251	1781	
1252	1782	
1253	1783	
1254	1784	
1255	1785	
1256	1786	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SEVA NURSING SCHOOL, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
1257	1787	
1258	1788	
1259	1789	
1260	1790	
1261	1791	
1262	1792	
1263	1793	
1264	1794	
1265	1795	
1266	1796	
1267	1797	
1268	1798	
1269	1799	
1270	1800	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SANT GAJANAN MAHARAJ,SCHOOL OF NURSING , GADHINGLAJ, KOLHAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1271	1801	
1272	1802	
1273	1803	
1274	1804	
1275	1805	
1276	1806	
1277	1807	
1278	1808	
1279	1809	
1280	1810	
1281	1811	
1282	1812	
1283	1813	
1284	1814	
1285	1815	
1286	1816	
1287	1817	
1288	1818	
1289	1819	
1290	1820	
1291	1821	
1292	1822	
1293	1823	
1294	1824	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SANT GAJANAN MAHARAJ,SCHOOL OF NURSING , GADHINGLAJ, KOLHAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1295	1825	
1296	1826	
1297	1827	
1298	1828	
1299	1829	
1300	1830	
1301	1831	
1302	1832	
1303	1833	
1304	1834	
1305	1835	
1306	1836	
1307	1837	
1308	1838	
1309	1839	
1310	1840	
1311	1841	
1312	1842	
1313	1843	
1314	1844	
1315	1845	
1316	1846	
1317	1847	
1318	1848	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SANT GAJANAN MAHARAJ,SCHOOL OF NURSING , GADHINGLAJ, KOLHAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1319	1849	
1320	1850	
1321	1851	
1322	1852	
1323	1853	
1324	1854	
1325	1855	
1326	1856	
1327	1857	
1328	1858	
1329	1859	
1330	1860	
1331	1861	
1332	1862	
1333	1863	
1334	1864	
1335	1865	
1336	1866	
1337	1867	
1338	1868	
1339	1869	
1340	1870	
1341	1871	
1342	1872	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SANT GAJANAN MAHARAJ,SCHOOL OF NURSING , GADHINGLAJ, KOLHAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1343	1873	
1344	1874	
1345	1875	
1346	1876	
1347	1877	
1348	1878	
1349	1879	
1350	1880	
1351	1881	
1352	1882	
1353	1883	
1354	1884	
1355	1885	
1356	1886	
1357	1887	
1358	1888	
1359	1889	
1360	1890	
1361	1891	
1362	1892	
1363	1893	
1364	1894	
1365	1895	
1366	1896	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SANT GAJANAN MAHARAJ,SCHOOL OF NURSING , GADHINGLAJ, KOLHAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1367	1897	
1368	1898	
1369	1899	
1370	1900	
1371	1901	
1372	1902	
1373	1903	
1374	1904	
1375	1905	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.

Date:-

Sr . No.	Seat No.	Signature of Student
1376	3136	
1377	3137	
1378	3138	
1379	3139	
1380	3140	
1381	3141	
1382	3142	
1383	3143	
1384	3144	
1385	3145	
1386	3146	
1387	3147	
1388	3148	
1389	3149	
1390	3150	
1391	3151	
1392	3152	
1393	3153	
1394	3154	
1395	3155	
1396	3156	
1397	3157	
1398	3158	
1399	3159	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.

Date:-

Sr . No.	Seat No.	Signature of Student
1400	3160	
1401	3161	
1402	3162	
1403	3163	
1404	3164	
1405	3165	
1406	3166	
1407	3167	
1408	3168	
1409	3169	
1410	3170	
1411	3171	
1412	3172	
1413	3173	
1414	3174	
1415	3175	
1416	3176	
1417	3177	
1418	3178	
1419	3179	
1420	3180	
1421	3181	
1422	3182	
1423	3183	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.

Date:-

Sr . No.	Seat No.	Signature of Student
1424	3184	
1425	3185	
1426	3186	
1427	3187	
1428	3188	
1429	3189	
1430	3190	
1431	3191	
1432	3192	
1433	3193	
1434	3194	
1435	3195	
1436	3196	
1437	3197	
1438	3198	
1439	3199	
1440	3200	
1441	3201	
1442	3202	
1443	3203	
1444	3204	
1445	3205	
1446	3206	
1447	3207	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.

Date:-

Sr . No.	Seat No.	Signature of Student
1448	3208	
1449	3209	
1450	3210	
1451	3211	
1452	3212	
1453	3213	
1454	3214	
1455	3215	
1456	3216	
1457	3217	
1458	3218	
1459	3219	
1460	3220	
1461	3221	
1462	3222	
1463	3223	
1464	3224	
1465	3225	
1466	3226	
1467	3227	
1468	3228	
1469	3229	
1470	3230	
1471	3231	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : FLORENCE NIGHTINGALE TRAINING COLLEGE OF NURSING,WARDHA.

Date:-

Sr . No.	Seat No.	Signature of Student
1472	3232	
1473	3233	
1474	3234	
1475	3235	
1476	3236	
1477	3237	
1478	3238	
1479	3239	
1480	3240	
1481	3241	
1482	3242	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, WARDHA

Date:-

Sr . No.	Seat No.	Signature of Student
1483	3243	
1484	3244	
1485	3245	
1486	3246	
1487	3247	
1488	3248	
1489	3249	
1490	3250	
1491	3251	
1492	3252	
1493	3253	
1494	3254	
1495	3255	
1496	3256	
1497	3257	
1498	3258	
1499	3259	
1500	3260	
1501	3261	
1502	3262	
1503	3263	
1504	3264	
1505	3265	
1506	3266	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, WARDHA

Date:-

Sr . No.	Seat No.	Signature of Student
1507	3267	
1508	3268	
1509	3269	
1510	3270	
1511	3271	
1512	3272	
1513	3273	
1514	3274	
1515	3275	
1516	3276	
1517	3277	
1518	3278	
1519	3279	
1520	3280	
1521	3281	
1522	3282	
1523	3283	
1524	3284	
1525	3285	
1526	3286	
1527	3287	
1528	3288	
1529	3289	
1530	3290	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, WARDHA

Date:-

Sr . No.	Seat No.	Signature of Student
1531	3291	
1532	3292	
1533	3293	
1534	3294	
1535	3295	
1536	3296	
1537	3297	
1538	3298	
1539	3299	
1540	3300	
1541	3301	
1542	3302	
1543	3303	
1544	3304	
1545	3305	
1546	3306	
1547	3307	
1548	3308	
1549	3309	
1550	3310	
1551	3311	
1552	3312	
1553	3313	
1554	3314	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, WARDHA

Date:-

Sr . No.	Seat No.	Signature of Student
1555	3315	
1556	3316	
1557	3317	
1558	3318	
1559	3319	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : DAGA MEMORIAL HOSPITAL, NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1560	3320	
1561	3321	
1562	3322	
1563	3323	
1564	3324	
1565	3325	
1566	3326	
1567	3327	
1568	3328	
1569	3329	
1570	3330	
1571	3331	
1572	3332	
1573	3333	
1574	3334	
1575	3335	
1576	3336	
1577	3337	
1578	3338	
1579	3339	
1580	3340	
1581	3341	
1582	3342	
1583	3343	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : DAGA MEMORIAL HOSPITAL, NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1584	3344	
1585	3345	
1586	3346	
1587	3347	
1588	3348	
1589	3349	
1590	3350	
1591	3351	
1592	3352	
1593	3353	
1594	3354	
1595	3355	
1596	3356	
1597	3357	
1598	3358	
1599	3359	
1600	3360	
1601	3361	
1602	3362	
1603	3363	
1604	3364	
1605	3365	
1606	3366	
1607	3367	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : DAGA MEMORIAL HOSPITAL, NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1608	3368	
1609	3369	
1610	3370	
1611	3371	
1612	3372	
1613	3373	
1614	3374	
1615	3375	
1616	3376	
1617	3377	
1618	3378	
1619	3379	
1620	3380	
1621	3381	
1622	3382	
1623	3383	
1624	3384	
1625	3385	
1626	3386	
1627	3387	
1628	3388	
1629	3389	
1630	3390	
1631	3391	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : DAGA MEMORIAL HOSPITAL, NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1632	3392	
1633	3393	
1634	3394	
1635	3395	
1636	3396	
1637	3397	
1638	3398	
1639	3399	
1640	3400	
1641	3401	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : Dist.Hospital for Women, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
1642	3402	
1643	3403	
1644	3404	
1645	3405	
1646	3406	
1647	3407	
1648	3408	
1649	3409	
1650	3410	
1651	3411	
1652	3412	
1653	3413	
1654	3414	
1655	3415	
1656	3416	
1657	3417	
1658	3418	
1659	3419	
1660	3420	
1661	3421	
1662	3422	
1663	3423	
1664	3424	
1665	3425	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : Dist.Hospital for Women, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
1666	3426	
1667	3427	
1668	3428	
1669	3429	
1670	3430	
1671	3431	
1672	3432	
1673	3433	
1674	3434	
1675	3435	
1676	3436	
1677	3437	
1678	3438	
1679	3439	
1680	3440	
1681	3441	
1682	3442	
1683	3443	
1684	3444	
1685	3445	
1686	3446	
1687	3447	
1688	3448	
1689	3449	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : Dist.Hospital for Women, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
1690	3450	
1691	3451	
1692	3452	
1693	3453	
1694	3454	
1695	3455	
1696	3456	
1697	3457	
1698	3458	
1699	3459	
1700	3460	
1701	3461	
1702	3462	
1703	3463	
1704	3464	
1705	3465	
1706	3466	
1707	3467	
1708	3468	
1709	3469	
1710	3470	
1711	3471	
1712	3472	
1713	3473	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Dist.Hospital for Women, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
1714	3474	
1715	7105	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL,CHANDRAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1716	3475	
1717	3476	
1718	3477	
1719	3478	
1720	3479	
1721	3480	
1722	3481	
1723	3482	
1724	3483	
1725	3484	
1726	3485	
1727	3486	
1728	3487	
1729	3488	
1730	3489	
1731	3490	
1732	3491	
1733	3492	
1734	3493	
1735	3494	
1736	3495	
1737	3496	
1738	3497	
1739	3498	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL,CHANDRAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1740	3499	
1741	3500	
1742	3501	
1743	3502	
1744	3503	
1745	3504	
1746	3505	
1747	3506	
1748	3507	
1749	3508	
1750	3509	
1751	3510	
1752	3511	
1753	3512	
1754	3513	
1755	3514	
1756	3515	
1757	3516	
1758	3517	
1759	3518	
1760	3519	
1761	3520	
1762	3521	
1763	3522	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL,CHANDRAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1764	3523	
1765	3524	
1766	3525	
1767	3526	
1768	3527	
1769	3528	
1770	3529	
1771	3530	
1772	3531	
1773	3532	
1774	3533	
1775	3534	
1776	3535	
1777	3536	
1778	3537	
1779	3538	
1780	3539	
1781	3540	
1782	3541	
1783	3542	
1784	3543	
1785	3544	
1786	3545	
1787	3546	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL,CHANDRAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1788	3547	
1789	3548	
1790	3549	
1791	3550	
1792	3551	
1793	3552	
1794	3553	
1795	3554	
1796	3555	
1797	3556	
1798	3557	
1799	3558	
1800	3559	
1801	3560	
1802	3561	
1803	3562	
1804	3563	
1805	3564	
1806	3565	
1807	3566	
1808	3567	
1809	3568	
1810	3569	
1811	3570	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL,CHANDRAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1812	3571	
1813	3572	
1814	3573	
1815	3574	
1816	3575	
1817	3576	
1818	3577	
1819	3578	
1820	3579	
1821	3580	
1822	3581	
1823	3582	
1824	3583	
1825	3584	
1826	3585	
1827	3586	
1828	3587	
1829	3588	
1830	3589	
1831	3590	
1832	3591	
1833	3592	
1834	3593	
1835	3594	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL,CHANDRAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1836	3595	
1837	3596	
1838	3597	
1839	3598	
1840	3599	
1841	3600	
1842	3601	
1843	3602	
1844	3603	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL ,YAVATMAL

Date:-

Sr . No.	Seat No.	Signature of Student
1845	3604	
1846	3605	
1847	3606	
1848	3607	
1849	3608	
1850	3609	
1851	3610	
1852	3611	
1853	3612	
1854	3613	
1855	3614	
1856	3615	
1857	3616	
1858	3617	
1859	3618	
1860	3619	
1861	3620	
1862	3621	
1863	3622	
1864	3623	
1865	3624	
1866	3625	
1867	3626	
1868	3627	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL ,YAVATMAL

Date:-

Sr . No.	Seat No.	Signature of Student
1869	3628	
1870	3629	
1871	3630	
1872	3631	
1873	3632	
1874	3633	
1875	3634	
1876	3635	
1877	3636	
1878	3637	
1879	3638	
1880	3639	
1881	3640	
1882	3641	
1883	3642	
1884	3643	
1885	3644	
1886	3645	
1887	3646	
1888	3647	
1889	3648	
1890	3649	
1891	3650	
1892	3651	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL ,YAVATMAL

Date:-

Sr . No.	Seat No.	Signature of Student
1893	3652	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, BULDANA

Date:-

Sr . No.	Seat No.	Signature of Student
1894	3653	
1895	3654	
1896	3655	
1897	3656	
1898	3657	
1899	3658	
1900	3659	
1901	3660	
1902	3661	
1903	3662	
1904	3663	
1905	3664	
1906	3665	
1907	3666	
1908	3667	
1909	3668	
1910	3669	
1911	3670	
1912	3671	
1913	3672	
1914	3673	
1915	3674	
1916	3675	
1917	3676	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, BULDANA

Date:-

Sr . No.	Seat No.	Signature of Student
1918	3677	
1919	3678	
1920	3679	
1921	3680	
1922	3681	
1923	3682	
1924	3683	
1925	3684	
1926	3685	
1927	3686	
1928	3687	
1929	3688	
1930	3689	
1931	3690	
1932	3691	
1933	3692	
1934	3693	
1935	3694	
1936	3695	
1937	3696	
1938	3697	
1939	3698	
1940	3699	
1941	3700	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, BULDANA

Date:-

Sr . No.	Seat No.	Signature of Student
1942	3701	
1943	3702	
1944	3703	
1945	3704	
1946	3705	
1947	3706	
1948	3707	
1949	3708	
1950	3709	
1951	3710	
1952	3711	
1953	3712	
1954	3713	
1955	3714	
1956	3715	
1957	3716	
1958	3717	
1959	3718	
1960	3719	
1961	3720	
1962	3721	
1963	3722	
1964	3723	
1965	3724	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, BULDANA

Date:-

Sr . No.	Seat No.	Signature of Student
1966	3725	
1967	3726	
1968	3727	
1969	3728	
1970	3729	
1971	3730	
1972	3731	
1973	3732	
1974	3733	
1975	3734	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Bhandara

Date:-

Sr . No.	Seat No.	Signature of Student
1976	3735	
1977	3736	
1978	3737	
1979	3738	
1980	3739	
1981	3740	
1982	3741	
1983	3742	
1984	3743	
1985	3744	
1986	3745	
1987	3746	
1988	3747	
1989	3748	
1990	3749	
1991	3750	
1992	3751	
1993	3752	
1994	3753	
1995	3754	
1996	3755	
1997	3756	
1998	3757	
1999	3758	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Bhandara

Date:-

Sr . No.	Seat No.	Signature of Student
2000	3759	
2001	3760	
2002	3761	
2003	3762	
2004	3763	
2005	3764	
2006	3765	
2007	3766	
2008	3767	
2009	3768	
2010	3769	
2011	3770	
2012	3771	
2013	3772	
2014	3773	
2015	3774	
2016	3775	
2017	3776	
2018	3777	
2019	3778	
2020	3779	
2021	3780	
2022	3781	
2023	3782	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Bhandara

Date:-

Sr . No.	Seat No.	Signature of Student
2024	3783	
2025	3784	
2026	3785	
2027	3786	
2028	3787	
2029	3788	
2030	3789	
2031	3790	
2032	3791	
2033	3792	
2034	3793	
2035	3794	
2036	3795	
2037	3796	
2038	3797	
2039	3798	
2040	3799	
2041	3800	
2042	3801	
2043	3802	
2044	3803	
2045	3804	
2046	3805	
2047	3806	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Bhandara

Date:-

Sr . No.	Seat No.	Signature of Student
2048	3807	
2049	3808	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL GADCHIROLI

Date:-

Sr . No.	Seat No.	Signature of Student
2050	3809	
2051	3810	
2052	3811	
2053	3812	
2054	3813	
2055	3814	
2056	3815	
2057	3816	
2058	3817	
2059	3818	
2060	3819	
2061	3820	
2062	3821	
2063	3822	
2064	3823	
2065	3824	
2066	3825	
2067	3826	
2068	3827	
2069	3828	
2070	3829	
2071	3830	
2072	3831	
2073	3832	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL GADCHIROLI

Date:-

Sr . No.	Seat No.	Signature of Student
2074	3833	
2075	3834	
2076	3835	
2077	3836	
2078	3837	
2079	3838	
2080	3839	
2081	3840	
2082	3841	
2083	3842	
2084	3843	
2085	3844	
2086	3845	
2087	3846	
2088	3847	
2089	3848	
2090	3849	
2091	3850	
2092	3851	
2093	3852	
2094	3853	
2095	3854	
2096	3855	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SUMITRABAI THAKARE TRAINING COLLEGE OF NURSING, YAVATMAL

Date:-

Sr . No.	Seat No.	Signature of Student
2097	3856	
2098	3857	
2099	3858	
2100	3859	
2101	3860	
2102	3861	
2103	3862	
2104	3863	
2105	3864	
2106	3865	
2107	3866	
2108	3867	
2109	3868	
2110	3869	
2111	3870	
2112	3871	
2113	3872	
2114	3873	
2115	3874	
2116	3875	
2117	3876	
2118	3877	
2119	3878	
2120	3879	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SUMITRABAI THAKARE TRAINING COLLEGE OF NURSING, YAVATMAL

Date:-

Sr . No.	Seat No.	Signature of Student
2121	3880	
2122	3881	
2123	3882	
2124	3883	
2125	3884	
2126	3885	
2127	3886	
2128	3887	
2129	3888	
2130	3889	
2131	3890	
2132	3891	
2133	3892	
2134	3893	
2135	3894	
2136	3895	
2137	3896	
2138	3897	
2139	3898	
2140	3899	
2141	3900	
2142	3901	
2143	3902	
2144	3903	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SUMITRABAI THAKARE TRAINING COLLEGE OF NURSING, YAVATMAL

Date:-

Sr . No.	Seat No.	Signature of Student
2145	3904	
2146	3905	
2147	3906	
2148	3907	
2149	3908	
2150	3909	
2151	3910	
2152	3911	
2153	3912	
2154	3913	
2155	3914	
2156	3915	
2157	3916	
2158	3917	
2159	3918	
2160	3919	
2161	3920	
2162	3921	
2163	3922	
2164	3923	
2165	3924	
2166	3925	
2167	3926	
2168	3927	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SUMITRABAI THAKARE TRAINING COLLEGE OF NURSING, YAVATMAL

Date:-

Sr . No.	Seat No.	Signature of Student
2169	3928	
2170	3929	
2171	3930	
2172	3931	
2173	3932	
2174	3933	
2175	3934	
2176	3935	
2177	3936	
2178	3937	
2179	3938	
2180	3939	
2181	3940	
2182	3941	
2183	3942	
2184	3943	
2185	3944	
2186	3945	
2187	3946	
2188	3947	
2189	3948	
2190	3949	
2191	3950	
2192	3951	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SUMITRABAI THAKARE TRAINING COLLEGE OF NURSING, YAVATMAL

Date:-

Sr . No.	Seat No.	Signature of Student
2193	3952	
2194	3953	
2195	3954	
2196	3955	
2197	3956	
2198	3957	
2199	3958	
2200	3959	
2201	3960	
2202	3961	
2203	3962	
2204	3963	
2205	3964	
2206	3965	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
2207	3966	
2208	3967	
2209	3968	
2210	3969	
2211	3970	
2212	3971	
2213	3972	
2214	3973	
2215	3974	
2216	3975	
2217	3976	
2218	3977	
2219	3978	
2220	3979	
2221	3980	
2222	3981	
2223	3982	
2224	3983	
2225	3984	
2226	3985	
2227	3986	
2228	3987	
2229	3988	
2230	3989	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
2231	3990	
2232	3991	
2233	3992	
2234	3993	
2235	3994	
2236	3995	
2237	3996	
2238	3997	
2239	3998	
2240	3999	
2241	4000	
2242	4001	
2243	4002	
2244	4003	
2245	4004	
2246	4005	
2247	4006	
2248	4007	
2249	4008	
2250	4009	
2251	4010	
2252	4011	
2253	4012	
2254	4013	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
2255	4014	
2256	4015	
2257	4016	
2258	4017	
2259	4018	
2260	4019	
2261	4020	
2262	4021	
2263	4022	
2264	4023	
2265	4024	
2266	4025	
2267	4026	
2268	4027	
2269	4028	
2270	4029	
2271	4030	
2272	4031	
2273	4032	
2274	4033	
2275	4034	
2276	4035	
2277	4036	
2278	4037	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
2279	4038	
2280	4039	
2281	4040	
2282	4041	
2283	4042	
2284	4043	
2285	4044	
2286	4045	
2287	4046	
2288	4047	
2289	4048	
2290	4049	
2291	4050	
2292	4051	
2293	4052	
2294	4053	
2295	4054	
2296	4055	
2297	4056	
2298	4057	
2299	4058	
2300	4059	
2301	4060	
2302	4061	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
2303	4062	
2304	4063	
2305	4064	
2306	4065	
2307	4066	
2308	4067	
2309	4068	
2310	4069	
2311	4070	
2312	4071	
2313	4072	
2314	4073	
2315	4074	
2316	4075	
2317	4076	
2318	4077	
2319	4078	
2320	4079	
2321	4080	
2322	4081	
2323	4082	
2324	4083	
2325	4084	
2326	4085	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : DR. PANJABRAO DESHMUKH INST. OF NSG. AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
2327	4086	
2328	4087	
2329	4088	
2330	4089	
2331	4090	
2332	4091	
2333	4092	
2334	4093	
2335	4094	
2336	4095	
2337	4096	
2338	4097	
2339	4098	
2340	4099	
2341	4100	
2342	4101	
2343	4102	
2344	4103	
2345	4104	
2346	4105	
2347	4106	
2348	4107	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Date:-

Sr . No.	Seat No.	Signature of Student
2349	5371	
2350	5372	
2351	5373	
2352	5374	
2353	5375	
2354	5376	
2355	5377	
2356	5378	
2357	5379	
2358	5380	
2359	5381	
2360	5382	
2361	5383	
2362	5384	
2363	5385	
2364	5386	
2365	5387	
2366	5388	
2367	5389	
2368	5390	
2369	5391	
2370	5392	
2371	5393	
2372	5394	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Date:-

Sr . No.	Seat No.	Signature of Student
2373	5395	
2374	5396	
2375	5397	
2376	5398	
2377	5399	
2378	5400	
2379	5401	
2380	5402	
2381	5403	
2382	5404	
2383	5405	
2384	5406	
2385	5407	
2386	5408	
2387	5409	
2388	5410	
2389	5411	
2390	5412	
2391	5413	
2392	5414	
2393	5415	
2394	5416	
2395	5417	
2396	5418	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Date:-

Sr . No.	Seat No.	Signature of Student
2397	5419	
2398	5420	
2399	5421	
2400	5422	
2401	5423	
2402	5424	
2403	5425	
2404	5426	
2405	5427	
2406	5428	
2407	5429	
2408	5430	
2409	5431	
2410	5432	
2411	5433	
2412	5434	
2413	5435	
2414	5436	
2415	5437	
2416	5438	
2417	5439	
2418	5440	
2419	5441	
2420	5442	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Shri Guru Govind Singh Mem. Hospital, Station Road, Nanded

Date:-

Sr . No.	Seat No.	Signature of Student
2421	5443	
2422	5444	
2423	5445	
2424	5446	
2425	5447	
2426	5448	
2427	5449	
2428	5450	
2429	5451	
2430	5452	
2431	5453	
2432	5454	
2433	5455	
2434	5456	
2435	5457	
2436	5458	
2437	5459	
2438	5460	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Parbhani

Date:-

Sr . No.	Seat No.	Signature of Student
2439	5461	
2440	5462	
2441	5463	
2442	5464	
2443	5465	
2444	5466	
2445	5467	
2446	5468	
2447	5469	
2448	5470	
2449	5471	
2450	5472	
2451	5473	
2452	5474	
2453	5475	
2454	5476	
2455	5477	
2456	5478	
2457	5479	
2458	5480	
2459	5481	
2460	5482	
2461	5483	
2462	5484	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Parbhani

Date:-

Sr . No.	Seat No.	Signature of Student
2463	5485	
2464	5486	
2465	5487	
2466	5488	
2467	5489	
2468	5490	
2469	5491	
2470	5492	
2471	5493	
2472	5494	
2473	5495	
2474	5496	
2475	5497	
2476	5498	
2477	5499	
2478	5500	
2479	5501	
2480	5502	
2481	5503	
2482	5504	
2483	5505	
2484	5506	
2485	5507	
2486	5508	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Parbhani

Date:-

Sr . No.	Seat No.	Signature of Student
2487	5509	
2488	5510	
2489	5511	
2490	5512	
2491	5513	
2492	5514	
2493	5515	
2494	5516	
2495	5517	
2496	5518	
2497	5519	
2498	5520	
2499	5521	
2500	5522	
2501	5523	
2502	5524	
2503	5525	
2504	5526	
2505	5527	
2506	5528	
2507	5529	
2508	5530	
2509	5531	
2510	5532	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Parbhani

Date:-

Sr . No.	Seat No.	Signature of Student
2511	5533	
2512	5534	
2513	5535	
2514	5536	
2515	5537	
2516	5538	
2517	5539	
2518	5540	
2519	5541	
2520	5542	
2521	5543	
2522	5544	
2523	5545	
2524	5546	
2525	5547	
2526	5548	
2527	5549	
2528	5550	
2529	5551	
2530	5552	
2531	5553	
2532	5554	
2533	5555	
2534	5556	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL,Osmanabad

Date:-

Sr . No.	Seat No.	Signature of Student
2535	5557	
2536	5558	
2537	5559	
2538	5560	
2539	5561	
2540	5562	
2541	5563	
2542	5564	
2543	5565	
2544	5566	
2545	5567	
2546	5568	
2547	5569	
2548	5570	
2549	5571	
2550	5572	
2551	5573	
2552	5574	
2553	5575	
2554	5576	
2555	5577	
2556	5578	
2557	5579	
2558	5580	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL,Osmanabad

Date:-

Sr . No.	Seat No.	Signature of Student
2559	5581	
2560	5582	
2561	5583	
2562	5584	
2563	5585	
2564	5586	
2565	5587	
2566	5588	
2567	5589	
2568	5590	
2569	5591	
2570	5592	
2571	5593	
2572	5594	
2573	5595	
2574	5596	
2575	5597	
2576	5598	
2577	5599	
2578	5600	
2579	5601	
2580	5602	
2581	5603	
2582	5604	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL,Osmanabad

Date:-

Sr . No.	Seat No.	Signature of Student
2583	5605	
2584	5606	
2585	5607	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : VITHAI HOSPITAL AND RESEARCH CENTRE, SON, BEED

Date:-

Sr . No.	Seat No.	Signature of Student
2586	5608	
2587	5609	
2588	5610	
2589	5611	
2590	5612	
2591	5613	
2592	5614	
2593	5615	
2594	5616	
2595	5617	
2596	5618	
2597	5619	
2598	5620	
2599	5621	
2600	5622	
2601	5623	
2602	5624	
2603	5625	
2604	5626	
2605	5627	
2606	5628	
2607	5629	
2608	5630	
2609	5631	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : VITHAI HOSPITAL AND RESEARCH CENTRE, SON, BEED

Date:-

Sr . No.	Seat No.	Signature of Student
2610	5632	
2611	5633	
2612	5634	
2613	5635	
2614	5636	
2615	5637	
2616	5638	
2617	5639	
2618	5640	
2619	5641	
2620	5642	
2621	5643	
2622	5644	
2623	5645	
2624	5646	
2625	5647	
2626	5648	
2627	5649	
2628	5650	
2629	5651	
2630	5652	
2631	5653	
2632	5654	
2633	5655	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : VITHAI HOSPITAL AND RESEARCH CENTRE, SON, BEED

Date:-

Sr . No.	Seat No.	Signature of Student
2634	5656	
2635	5657	
2636	5658	
2637	5659	
2638	5660	
2639	5661	
2640	5662	
2641	5663	
2642	5664	
2643	5665	
2644	5666	
2645	5667	
2646	5668	
2647	5669	
2648	5670	
2649	5671	
2650	5672	
2651	5673	
2652	5674	
2653	5675	
2654	5676	
2655	5677	
2656	5678	
2657	5679	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : VITHAI HOSPITAL AND RESEARCH CENTRE, SON, BEED

Date:-

Sr . No.	Seat No.	Signature of Student
2658	5680	
2659	5681	
2660	5682	
2661	5683	
2662	5684	
2663	5685	
2664	5686	
2665	5687	
2666	5688	
2667	5689	
2668	5690	
2669	5691	
2670	5692	
2671	5693	
2672	5694	
2673	5695	
2674	5696	
2675	5697	
2676	7104	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SAU.MINATAI THAKARE INSTITUTE OF NURSING EDUCATION ,THANE

Date:-

Sr . No.	Seat No.	Signature of Student
2677	784	
2678	785	
2679	786	
2680	787	
2681	788	
2682	789	
2683	790	
2684	791	
2685	792	
2686	793	
2687	794	
2688	795	
2689	796	
2690	797	
2691	798	
2692	799	
2693	800	
2694	801	
2695	802	
2696	803	
2697	804	
2698	805	
2699	806	
2700	807	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SAU.MINATAI THAKARE INSTITUTE OF NURSING EDUCATION ,THANE

Date:-

Sr . No.	Seat No.	Signature of Student
2701	808	
2702	809	
2703	810	
2704	811	
2705	812	
2706	813	
2707	814	
2708	815	
2709	816	
2710	817	
2711	818	
2712	819	
2713	820	
2714	821	
2715	822	
2716	823	
2717	824	
2718	825	
2719	826	
2720	827	
2721	828	
2722	829	
2723	830	
2724	831	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SAU.MINATAI THAKARE INSTITUTE OF NURSING EDUCATION ,THANE

Date:-

Sr . No.	Seat No.	Signature of Student
2725	832	
2726	833	
2727	834	
2728	835	
2729	836	
2730	837	
2731	838	
2732	839	
2733	840	
2734	841	
2735	842	
2736	843	
2737	844	
2738	845	
2739	846	
2740	847	
2741	848	
2742	849	
2743	850	
2744	851	
2745	852	
2746	853	
2747	854	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GOKHALE EDUCATION SOCIETY , SON, VIDYANAGAR , NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
2748	855	
2749	856	
2750	857	
2751	858	
2752	859	
2753	860	
2754	861	
2755	862	
2756	863	
2757	864	
2758	865	
2759	866	
2760	867	
2761	868	
2762	869	
2763	870	
2764	871	
2765	872	
2766	873	
2767	874	
2768	875	
2769	876	
2770	877	
2771	878	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GOKHALE EDUCATION SOCIETY , SON, VIDYANAGAR , NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
2772	879	
2773	880	
2774	881	
2775	882	
2776	883	
2777	884	
2778	885	
2779	886	
2780	887	
2781	888	
2782	889	
2783	890	
2784	891	
2785	892	
2786	893	
2787	894	
2788	895	
2789	896	
2790	897	
2791	898	
2792	899	
2793	900	
2794	901	
2795	902	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GOKHALE EDUCATION SOCIETY , SON, VIDYANAGAR , NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
2796	903	
2797	904	
2798	905	
2799	906	
2800	907	
2801	908	
2802	909	
2803	910	
2804	911	
2805	912	
2806	913	
2807	914	
2808	915	
2809	916	
2810	917	
2811	918	
2812	919	
2813	920	
2814	921	
2815	922	
2816	923	
2817	924	
2818	925	
2819	926	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GOKHALE EDUCATION SOCIETY , SON, VIDYANAGAR , NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
2820	927	
2821	928	
2822	929	
2823	930	
2824	931	
2825	932	
2826	933	
2827	934	
2828	935	
2829	936	
2830	937	
2831	938	
2832	939	
2833	940	
2834	941	
2835	942	
2836	943	
2837	944	
2838	945	
2839	946	
2840	947	
2841	948	
2842	949	
2843	950	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GOKHALE EDUCATION SOCIETY , SON, VIDYANAGAR , NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
2844	951	
2845	952	
2846	953	
2847	954	
2848	955	
2849	956	
2850	957	
2851	958	
2852	959	
2853	960	
2854	961	
2855	962	
2856	963	
2857	964	
2858	965	
2859	966	
2860	967	
2861	968	
2862	969	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : YERALA MEDICAL TRUST & RESEARCH CENTRE, SCHOOL OF NURSING , KHARGHAR

Date:-

Sr . No.	Seat No.	Signature of Student
2863	970	
2864	971	
2865	972	
2866	973	
2867	974	
2868	975	
2869	976	
2870	977	
2871	978	
2872	979	
2873	980	
2874	981	
2875	982	
2876	983	
2877	984	
2878	985	
2879	986	
2880	987	
2881	988	
2882	989	
2883	990	
2884	991	
2885	992	
2886	993	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : YERALA MEDICAL TRUST & RESEARCH CENTRE, SCHOOL OF NURSING , KHARGHAR

Date:-

Sr . No.	Seat No.	Signature of Student
2887	994	
2888	995	
2889	996	
2890	997	
2891	998	
2892	999	
2893	1000	
2894	1001	
2895	1002	
2896	1003	
2897	1004	
2898	1005	
2899	1006	
2900	1007	
2901	1008	
2902	1009	
2903	1010	
2904	1011	
2905	1012	
2906	1013	
2907	1014	
2908	1015	
2909	1016	
2910	1017	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : YERALA MEDICAL TRUST & RESEARCH CENTRE, SCHOOL OF NURSING , KHARGHAR

Date:-

Sr . No.	Seat No.	Signature of Student
2911	1018	
2912	1019	
2913	1020	
2914	1021	
2915	1022	
2916	1023	
2917	1024	
2918	1025	
2919	1026	
2920	1027	
2921	1028	
2922	1029	
2923	1030	
2924	1031	
2925	1032	
2926	1033	
2927	1034	
2928	1035	
2929	1036	
2930	1037	
2931	1038	
2932	1039	
2933	1040	
2934	1041	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : YERALA MEDICAL TRUST & RESEARCH CENTRE, SCHOOL OF NURSING , KHARGHAR

Date:-

Sr . No.	Seat No.	Signature of Student
2935	1042	
2936	1043	
2937	1044	
2938	1045	
2939	1046	
2940	1047	
2941	1048	
2942	1049	
2943	1050	
2944	1051	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : ST.LUKES HOSPITAL, SHRIRAMPUR, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
2945	1906	
2946	1907	
2947	1908	
2948	1909	
2949	1910	
2950	1911	
2951	1912	
2952	1913	
2953	1914	
2954	1915	
2955	1916	
2956	1917	
2957	1918	
2958	1919	
2959	1920	
2960	1921	
2961	1922	
2962	1923	
2963	1924	
2964	1925	
2965	1926	
2966	1927	
2967	1928	
2968	1929	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : ST.LUKES HOSPITAL, SHRIRAMPUR, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
2969	1930	
2970	1931	
2971	1932	
2972	1933	
2973	1934	
2974	1935	
2975	1936	
2976	1937	
2977	1938	
2978	1939	
2979	1940	
2980	1941	
2981	1942	
2982	1943	
2983	1944	
2984	1945	
2985	1946	
2986	1947	
2987	1948	
2988	1949	
2989	1950	
2990	1951	
2991	1952	
2992	1953	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : ST.LUKES HOSPITAL, SHRIRAMPUR, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
2993	1954	
2994	1955	
2995	1956	
2996	1957	
2997	1958	
2998	1959	
2999	1960	
3000	1961	
3001	1962	
3002	1963	
3003	1964	
3004	1965	
3005	2737	
3006	2738	
3007	2739	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Pravara Med. Trust, P.O.Loni,Tal-Shrirampur, Ahmednagar

Date:-

Sr . No.	Seat No.	Signature of Student
3008	1966	
3009	1967	
3010	1968	
3011	1969	
3012	1970	
3013	1971	
3014	1972	
3015	1973	
3016	1974	
3017	1975	
3018	1976	
3019	1977	
3020	1978	
3021	1979	
3022	1980	
3023	1981	
3024	1982	
3025	1983	
3026	1984	
3027	1985	
3028	1986	
3029	1987	
3030	1988	
3031	1989	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Pravara Med. Trust, P.O.Loni,Tal-Shrirampur, Ahmednagar

Date:-

Sr . No.	Seat No.	Signature of Student
3032	1990	
3033	1991	
3034	1992	
3035	1993	
3036	1994	
3037	1995	
3038	1996	
3039	1997	
3040	1998	
3041	1999	
3042	2000	
3043	2001	
3044	2002	
3045	2003	
3046	2004	
3047	2005	
3048	2006	
3049	2007	
3050	2008	
3051	2009	
3052	2010	
3053	2011	
3054	2012	
3055	2013	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Pravara Med. Trust, P.O.Loni,Tal-Shrirampur, Ahmednagar

Date:-

Sr . No.	Seat No.	Signature of Student
3056	2014	
3057	2015	
3058	2016	
3059	2017	
3060	2018	
3061	2019	
3062	2020	
3063	2021	
3064	2022	
3065	2023	
3066	2024	
3067	2025	
3068	2026	
3069	2027	
3070	2028	
3071	2029	
3072	2030	
3073	2031	
3074	2032	
3075	2033	
3076	2034	
3077	2035	
3078	2036	
3079	2037	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Pravara Med. Trust, P.O.Loni,Tal-Shrirampur, Ahmednagar

Date:-

Sr . No.	Seat No.	Signature of Student
3080	2038	
3081	2039	
3082	2040	
3083	2041	
3084	2042	
3085	2043	
3086	2044	
3087	2045	
3088	2046	
3089	2047	
3090	2048	
3091	2049	
3092	2050	
3093	2051	
3094	2052	
3095	2053	
3096	2054	
3097	2055	
3098	2056	
3099	2057	
3100	2058	
3101	2059	
3102	2060	
3103	2061	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Pravara Med. Trust, P.O.Loni,Tal-Shrirampur, Ahmednagar

Date:-

Sr . No.	Seat No.	Signature of Student
3104	2062	
3105	2063	
3106	2064	
3107	2065	
3108	2066	
3109	2067	
3110	2068	
3111	2069	
3112	2070	
3113	2071	
3114	2072	
3115	2073	
3116	2074	
3117	2075	
3118	2076	
3119	2077	
3120	2078	
3121	2079	
3122	2080	
3123	2081	
3124	2082	
3125	2083	
3126	2084	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : Krishna Hosp.& M.R.C.,Karad. Dist-Satara

Date:-

Sr . No.	Seat No.	Signature of Student
3127	2085	
3128	2086	
3129	2087	
3130	2088	
3131	2089	
3132	2090	
3133	2091	
3134	2092	
3135	2093	
3136	2094	
3137	2095	
3138	2096	
3139	2097	
3140	2098	
3141	2099	
3142	2100	
3143	2101	
3144	2102	
3145	2103	
3146	2104	
3147	2105	
3148	2106	
3149	2107	
3150	2108	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : Krishna Hosp.& M.R.C.,Karad. Dist-Satara

Date:-

Sr . No.	Seat No.	Signature of Student
3151	2109	
3152	2110	
3153	2111	
3154	2112	
3155	2113	
3156	2114	
3157	2115	
3158	2116	
3159	2117	
3160	2118	
3161	2119	
3162	2120	
3163	2121	
3164	2122	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : WANLESS HOSPITAL COLLEGE OF NURSING, MIRAJ , DIST-SANGLI

Date:-

Sr . No.	Seat No.	Signature of Student
3165	2123	
3166	2124	
3167	2125	
3168	2126	
3169	2127	
3170	2128	
3171	2129	
3172	2130	
3173	2131	
3174	2132	
3175	2133	
3176	2134	
3177	2135	
3178	2136	
3179	2137	
3180	2138	
3181	2139	
3182	2140	
3183	2141	
3184	2142	
3185	2143	
3186	2144	
3187	2145	
3188	2146	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : WANLESS HOSPITAL COLLEGE OF NURSING, MIRAJ , DIST-SANGLI

Date:-

Sr . No.	Seat No.	Signature of Student
3189	2147	
3190	2148	
3191	2149	
3192	2150	
3193	2151	
3194	2152	
3195	2153	
3196	2154	
3197	2155	
3198	2156	
3199	2157	
3200	2158	
3201	2159	
3202	2160	
3203	2161	
3204	2162	
3205	2163	
3206	2164	
3207	2165	
3208	2166	
3209	2167	
3210	2168	
3211	2169	
3212	2170	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : WANLESS HOSPITAL COLLEGE OF NURSING, MIRAJ , DIST-SANGLI

Date:-

Sr . No.	Seat No.	Signature of Student
3213	2171	
3214	2172	
3215	2173	
3216	2174	
3217	2175	
3218	2176	
3219	2177	
3220	2178	
3221	2179	
3222	2180	
3223	2181	
3224	2182	
3225	2183	
3226	2184	
3227	2185	
3228	2186	
3229	2187	
3230	2188	
3231	2189	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, Sangli

Date:-

Sr . No.	Seat No.	Signature of Student
3232	2190	
3233	2191	
3234	2192	
3235	2193	
3236	2194	
3237	2195	
3238	2196	
3239	2197	
3240	2198	
3241	2199	
3242	2200	
3243	2201	
3244	2202	
3245	2203	
3246	2204	
3247	2205	
3248	2206	
3249	2207	
3250	2208	
3251	2209	
3252	2210	
3253	2211	
3254	2212	
3255	2213	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Sangli

Date:-

Sr . No.	Seat No.	Signature of Student
3256	2214	
3257	2215	
3258	2216	
3259	2217	
3260	2218	
3261	2219	
3262	2220	
3263	2221	
3264	2222	
3265	2223	
3266	2224	
3267	2225	
3268	2226	
3269	2227	
3270	2228	
3271	2229	
3272	2230	
3273	2231	
3274	2232	
3275	2233	
3276	2234	
3277	2235	
3278	2236	
3279	2237	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Sangli

Date:-

Sr . No.	Seat No.	Signature of Student
3280	2238	
3281	2239	
3282	2240	
3283	2241	
3284	2242	
3285	2243	
3286	2244	
3287	2245	
3288	2246	
3289	2247	
3290	2248	
3291	7061	
3292	7062	
3293	7063	
3294	7064	
3295	7065	
3296	7066	
3297	7067	
3298	7068	
3299	7069	
3300	7070	
3301	7071	
3302	7072	
3303	7073	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Solapur

Date:-

Sr . No.	Seat No.	Signature of Student
3304	2249	
3305	2250	
3306	2251	
3307	2252	
3308	2253	
3309	2254	
3310	2255	
3311	2256	
3312	2257	
3313	2258	
3314	2259	
3315	2260	
3316	2261	
3317	2262	
3318	2263	
3319	2264	
3320	2265	
3321	2266	
3322	2267	
3323	2268	
3324	2269	
3325	2270	
3326	2271	
3327	2272	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Solapur

Date:-

Sr . No.	Seat No.	Signature of Student
3328	2273	
3329	2274	
3330	2275	
3331	2276	
3332	2277	
3333	2278	
3334	2279	
3335	2280	
3336	2281	
3337	2282	
3338	2283	
3339	2284	
3340	2285	
3341	2286	
3342	2287	
3343	2288	
3344	2289	
3345	2290	
3346	2291	
3347	2292	
3348	2293	
3349	2294	
3350	2295	
3351	2296	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Solapur

Date:-

Sr . No.	Seat No.	Signature of Student
3352	2297	
3353	2298	
3354	2299	
3355	2300	
3356	2301	
3357	2302	
3358	2303	
3359	2304	
3360	2305	
3361	2306	
3362	2307	
3363	2308	
3364	2309	
3365	2310	
3366	2311	
3367	2312	
3368	2313	
3369	2314	
3370	2315	
3371	2316	
3372	2317	
3373	2318	
3374	2319	
3375	2320	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, Solapur

Date:-

Sr . No.	Seat No.	Signature of Student
3376	2321	
3377	2322	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BAKUL TAMBAT INSTITUTE OF NURSING EDUCATION, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
3378	2323	
3379	2324	
3380	2325	
3381	2326	
3382	2327	
3383	2328	
3384	2329	
3385	2330	
3386	2331	
3387	2332	
3388	2333	
3389	2334	
3390	2335	
3391	2336	
3392	2337	
3393	2338	
3394	2339	
3395	2340	
3396	2341	
3397	2342	
3398	2343	
3399	2344	
3400	2345	
3401	2346	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BAKUL TAMBAT INSTITUTE OF NURSING EDUCATION, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
3402	2347	
3403	2348	
3404	2349	
3405	2350	
3406	2351	
3407	2352	
3408	2353	
3409	2354	
3410	2355	
3411	2356	
3412	2357	
3413	2358	
3414	2359	
3415	2360	
3416	2361	
3417	2362	
3418	2363	
3419	2364	
3420	2365	
3421	2366	
3422	2367	
3423	2368	
3424	2369	
3425	2370	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BAKUL TAMBAT INSTITUTE OF NURSING EDUCATION, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
3426	2371	
3427	2372	
3428	2373	
3429	2374	
3430	2375	
3431	2376	
3432	2377	
3433	2378	
3434	2379	
3435	2380	
3436	2381	
3437	2382	
3438	2383	
3439	2384	
3440	2385	
3441	2386	
3442	2387	
3443	2388	
3444	2389	
3445	2390	
3446	2391	
3447	2392	
3448	2393	
3449	2394	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BAKUL TAMBAT INSTITUTE OF NURSING EDUCATION, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
3450	2395	
3451	2396	
3452	2397	
3453	2398	
3454	2399	
3455	2400	
3456	7074	
3457	7075	
3458	7076	
3459	7077	
3460	7078	
3461	7079	
3462	7080	
3463	7081	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BHARATI VIDYAPEETH COLLEGE OF NURSING , PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
3464	2401	
3465	2402	
3466	2403	
3467	2404	
3468	2405	
3469	2406	
3470	2407	
3471	2408	
3472	2409	
3473	2410	
3474	2411	
3475	2412	
3476	2413	
3477	2414	
3478	2415	
3479	2416	
3480	2417	
3481	2418	
3482	2419	
3483	2420	
3484	2421	
3485	2422	
3486	2423	
3487	2424	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BHARATI VIDYAPEETH COLLEGE OF NURSING , PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
3488	2425	
3489	2426	
3490	2427	
3491	2428	
3492	2429	
3493	2430	
3494	2431	
3495	2432	
3496	2433	
3497	2434	
3498	2435	
3499	2436	
3500	2437	
3501	2438	
3502	2439	
3503	2440	
3504	2441	
3505	2442	
3506	2443	
3507	2444	
3508	2445	
3509	2446	
3510	2447	
3511	2448	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BHARATI VIDYAPEETH COLLEGE OF NURSING , PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
3512	2449	
3513	2450	
3514	2451	
3515	2452	
3516	2453	
3517	2454	
3518	2455	
3519	2456	
3520	2457	
3521	2458	
3522	2459	
3523	2460	
3524	2461	
3525	2462	
3526	2463	
3527	2464	
3528	2465	
3529	2466	
3530	2467	
3531	2468	
3532	2469	
3533	2470	
3534	2471	
3535	2472	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BHARATI VIDYAPEETH COLLEGE OF NURSING , PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
3536	2473	
3537	2474	
3538	2475	
3539	2476	
3540	2477	
3541	2478	
3542	2479	
3543	2480	
3544	2481	
3545	2482	
3546	2483	
3547	2484	
3548	2485	
3549	2486	
3550	2487	
3551	2488	
3552	2489	
3553	2490	
3554	2491	
3555	2492	
3556	2493	
3557	2494	
3558	2495	
3559	2496	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BHARATI VIDYAPEETH COLLEGE OF NURSING , PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
3560	2497	
3561	2498	
3562	2499	
3563	2500	
3564	2501	
3565	2502	
3566	2503	
3567	2504	
3568	2505	
3569	2506	
3570	2507	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : DR. D.Y.PATIL INSTITUTE OF NURSING EDUCATION , KOLHAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
3571	2508	
3572	2509	
3573	2510	
3574	2511	
3575	2512	
3576	2513	
3577	2514	
3578	2515	
3579	2516	
3580	2517	
3581	2518	
3582	2519	
3583	2520	
3584	2521	
3585	2522	
3586	2523	
3587	2524	
3588	2525	
3589	2526	
3590	2527	
3591	2528	
3592	2529	
3593	2530	
3594	2531	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : DR. D.Y.PATIL INSTITUTE OF NURSING EDUCATION , KOLHAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
3595	2532	
3596	2533	
3597	2534	
3598	2535	
3599	2536	
3600	2537	
3601	2538	
3602	2539	
3603	2540	
3604	2541	
3605	2542	
3606	2543	
3607	2544	
3608	2545	
3609	2546	
3610	2547	
3611	2548	
3612	2549	
3613	2550	
3614	2551	
3615	2552	
3616	2553	
3617	2554	
3618	2555	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : DR. D.Y.PATIL INSTITUTE OF NURSING EDUCATION , KOLHAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
3619	2556	
3620	2557	
3621	2558	
3622	2559	
3623	2560	
3624	2561	
3625	2562	
3626	2563	
3627	2564	
3628	2565	
3629	2566	
3630	2567	
3631	2568	
3632	2569	
3633	2570	
3634	2571	
3635	2572	
3636	2573	
3637	2574	
3638	2575	
3639	2576	
3640	2577	
3641	2578	
3642	2579	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : DR. D.Y.PATIL INSTITUTE OF NURSING EDUCATION , KOLHAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
3643	2580	
3644	2581	
3645	2582	
3646	2583	
3647	2584	
3648	2585	
3649	2586	
3650	2587	
3651	2588	
3652	2589	
3653	2590	
3654	2591	
3655	2592	
3656	2593	
3657	2594	
3658	2595	
3659	2596	
3660	2597	
3661	2598	
3662	2599	
3663	2600	
3664	2601	
3665	2602	
3666	2603	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : DR. D.Y.PATIL INSTITUTE OF NURSING EDUCATION , KOLHAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
3667	2604	
3668	2605	
3669	2606	
3670	2607	
3671	2608	
3672	2609	
3673	2610	
3674	2611	
3675	2612	
3676	2613	
3677	2614	
3678	2615	
3679	2616	
3680	2617	
3681	2618	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : KASEGAON EDUCATION SOCIETY, SCHOOL OF NURSING, ISLAMPUR, SANGLI

Date:-

Sr . No.	Seat No.	Signature of Student
3682	2619	
3683	2620	
3684	2621	
3685	2622	
3686	2623	
3687	2624	
3688	2625	
3689	2626	
3690	2627	
3691	2628	
3692	2629	
3693	2630	
3694	2631	
3695	2632	
3696	2633	
3697	2634	
3698	2635	
3699	2636	
3700	2637	
3701	2638	
3702	2639	
3703	2640	
3704	2641	
3705	2642	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : KASEGAON EDUCATION SOCIETY, SCHOOL OF NURSING, ISLAMPUR, SANGLI

Date:-

Sr . No.	Seat No.	Signature of Student
3706	2643	
3707	2644	
3708	2645	
3709	2646	
3710	2647	
3711	2648	
3712	2649	
3713	2650	
3714	2651	
3715	2652	
3716	2653	
3717	2654	
3718	2655	
3719	2656	
3720	2657	
3721	2658	
3722	2659	
3723	2660	
3724	2661	
3725	2662	
3726	2663	
3727	2664	
3728	2665	
3729	2666	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : KASEGAON EDUCATION SOCIETY, SCHOOL OF NURSING, ISLAMPUR, SANGLI

Date:-

Sr . No.	Seat No.	Signature of Student
3730	2667	
3731	2668	
3732	2669	
3733	2670	
3734	2671	
3735	2672	
3736	2673	
3737	2674	
3738	2675	
3739	2676	
3740	2677	
3741	2678	
3742	2679	
3743	2680	
3744	2681	
3745	2682	
3746	2683	
3747	2684	
3748	2685	
3749	2686	
3750	2687	
3751	2688	
3752	2689	
3753	2690	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : KASEGAON EDUCATION SOCIETY, SCHOOL OF NURSING, ISLAMPUR, SANGLI

Date:-

Sr . No.	Seat No.	Signature of Student
3754	2691	
3755	2692	
3756	2693	
3757	2984	
3758	2985	
3759	2986	
3760	2987	
3761	2988	
3762	2989	
3763	2990	
3764	2991	
3765	2992	
3766	2993	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Indira Gandhi Medical College & Hospital, Nagpur

Date:-

Sr . No.	Seat No.	Signature of Student
3767	4108	
3768	4109	
3769	4110	
3770	4111	
3771	4112	
3772	4113	
3773	4114	
3774	4115	
3775	4116	
3776	4117	
3777	4118	
3778	4119	
3779	4120	
3780	4121	
3781	4122	
3782	4123	
3783	4124	
3784	4125	
3785	4126	
3786	4127	
3787	4128	
3788	4129	
3789	4130	
3790	4131	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Indira Gandhi Medical College & Hospital, Nagpur

Date:-

Sr . No.	Seat No.	Signature of Student
3791	4132	
3792	4133	
3793	4134	
3794	4135	
3795	4136	
3796	4137	
3797	4138	
3798	4139	
3799	4140	
3800	4141	
3801	4142	
3802	4143	
3803	4144	
3804	4145	
3805	4146	
3806	4147	
3807	4148	
3808	4149	
3809	4150	
3810	4151	
3811	4152	
3812	4153	
3813	4154	
3814	4155	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Indira Gandhi Medical College & Hospital, Nagpur

Date:-

Sr . No.	Seat No.	Signature of Student
3815	4156	
3816	4157	
3817	4158	
3818	4159	
3819	4160	
3820	4161	
3821	4162	
3822	4163	
3823	4164	
3824	4165	
3825	4166	
3826	4167	
3827	4168	
3828	4169	
3829	4170	
3830	4171	
3831	4172	
3832	4173	
3833	4174	
3834	4175	
3835	4176	
3836	4177	
3837	4178	
3838	4179	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Indira Gandhi Medical College & Hospital, Nagpur

Date:-

Sr . No.	Seat No.	Signature of Student
3839	4180	
3840	4181	
3841	4182	
3842	4183	
3843	4184	
3844	4185	
3845	4186	
3846	4187	
3847	4188	
3848	4189	
3849	4190	
3850	4191	
3851	4192	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
3852	4193	
3853	4194	
3854	4195	
3855	4196	
3856	4197	
3857	4198	
3858	4199	
3859	4200	
3860	4201	
3861	4202	
3862	4203	
3863	4204	
3864	4205	
3865	4206	
3866	4207	
3867	4208	
3868	4209	
3869	4210	
3870	4211	
3871	4212	
3872	4213	
3873	4214	
3874	4215	
3875	4216	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
3876	4217	
3877	4218	
3878	4219	
3879	4220	
3880	4221	
3881	4222	
3882	4223	
3883	4224	
3884	4225	
3885	4226	
3886	4227	
3887	4228	
3888	4229	
3889	4230	
3890	4231	
3891	4232	
3892	4233	
3893	4234	
3894	4235	
3895	4236	
3896	4237	
3897	4238	
3898	4239	
3899	4240	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
3900	4241	
3901	4242	
3902	4243	
3903	4244	
3904	4245	
3905	4246	
3906	4247	
3907	4248	
3908	4249	
3909	4250	
3910	4251	
3911	4252	
3912	4253	
3913	4254	
3914	4255	
3915	4256	
3916	4257	
3917	4258	
3918	4259	
3919	4260	
3920	4261	
3921	4262	
3922	4263	
3923	4264	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
3924	4265	
3925	4266	
3926	4267	
3927	4268	
3928	4269	
3929	4270	
3930	4271	
3931	4272	
3932	4273	
3933	4274	
3934	4275	
3935	4276	
3936	4277	
3937	4278	
3938	4279	
3939	4280	
3940	4281	
3941	4282	
3942	4283	
3943	4284	
3944	4285	
3945	4286	
3946	4287	
3947	4288	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
3948	4289	
3949	4290	
3950	4291	
3951	4292	
3952	4293	
3953	4294	
3954	4295	
3955	4296	
3956	4297	
3957	4298	
3958	4299	
3959	4300	
3960	4301	
3961	4302	
3962	4303	
3963	4304	
3964	4305	
3965	4306	
3966	4307	
3967	4308	
3968	4309	
3969	4310	
3970	4311	
3971	4312	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MADHURIBAI DESHMUKH INST.OF NSG.EDU., NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
3972	4313	
3973	4314	
3974	4315	
3975	4316	
3976	4317	
3977	4318	
3978	4319	
3979	4320	
3980	4321	
3981	4322	
3982	4323	
3983	4324	
3984	4325	
3985	4326	
3986	4327	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : KASTURBA HEALTH SOCIETY, SEVAGRAM, WARDHA

Date:-

Sr . No.	Seat No.	Signature of Student
3987	4328	
3988	4329	
3989	4330	
3990	4331	
3991	4332	
3992	4333	
3993	4334	
3994	4335	
3995	4336	
3996	4337	
3997	4338	
3998	4339	
3999	4340	
4000	4341	
4001	4342	
4002	4343	
4003	4344	
4004	4345	
4005	4346	
4006	4347	
4007	4348	
4008	4349	
4009	4350	
4010	4351	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : KASTURBA HEALTH SOCIETY, SEVAGRAM, WARDHA

Date:-

Sr . No.	Seat No.	Signature of Student
4011	4352	
4012	4353	
4013	4354	
4014	4355	
4015	4356	
4016	4357	
4017	4358	
4018	4359	
4019	4360	
4020	4361	
4021	4362	
4022	4363	
4023	4364	
4024	4365	
4025	4366	
4026	4367	
4027	4368	
4028	4369	
4029	4370	
4030	4371	
4031	4372	
4032	4373	
4033	4374	
4034	4375	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : KASTURBA HEALTH SOCIETY, SEVAGRAM, WARDHA

Date:-

Sr . No.	Seat No.	Signature of Student
4035	4376	
4036	4377	
4037	4378	
4038	4379	
4039	4380	
4040	4381	
4041	4382	
4042	4383	
4043	4384	
4044	4385	
4045	4386	
4046	4387	
4047	4388	
4048	4389	
4049	4390	
4050	4391	
4051	4392	
4052	4393	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
4053	4394	
4054	4395	
4055	4396	
4056	4397	
4057	4398	
4058	4399	
4059	4400	
4060	4401	
4061	4402	
4062	4403	
4063	4404	
4064	4405	
4065	4406	
4066	4407	
4067	4408	
4068	4409	
4069	4410	
4070	4411	
4071	4412	
4072	4413	
4073	4414	
4074	4415	
4075	4416	
4076	4417	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
4077	4418	
4078	4419	
4079	4420	
4080	4421	
4081	4422	
4082	4423	
4083	4424	
4084	4425	
4085	4426	
4086	4427	
4087	4428	
4088	4429	
4089	4430	
4090	4431	
4091	4432	
4092	4433	
4093	4434	
4094	4435	
4095	4436	
4096	4437	
4097	4438	
4098	4439	
4099	4440	
4100	4441	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
4101	4442	
4102	4443	
4103	4444	
4104	4445	
4105	4446	
4106	4447	
4107	4448	
4108	4449	
4109	4450	
4110	4451	
4111	4452	
4112	4453	
4113	4454	
4114	4455	
4115	4456	
4116	4457	
4117	4458	
4118	4459	
4119	4460	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
4120	4461	
4121	4462	
4122	4463	
4123	4464	
4124	4465	
4125	4466	
4126	4467	
4127	4468	
4128	4469	
4129	4470	
4130	4471	
4131	4472	
4132	4473	
4133	4474	
4134	4475	
4135	4476	
4136	4477	
4137	4478	
4138	4479	
4139	4480	
4140	4481	
4141	4482	
4142	4483	
4143	4484	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
4144	4485	
4145	4486	
4146	4487	
4147	4488	
4148	4489	
4149	4490	
4150	4491	
4151	4492	
4152	4493	
4153	4494	
4154	4495	
4155	4496	
4156	4497	
4157	4498	
4158	4499	
4159	4500	
4160	4501	
4161	4502	
4162	4503	
4163	4504	
4164	4505	
4165	4506	
4166	4507	
4167	4508	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
4168	4509	
4169	4510	
4170	4511	
4171	4512	
4172	4513	
4173	4514	
4174	4515	
4175	4516	
4176	4517	
4177	4518	
4178	4519	
4179	4520	
4180	4521	
4181	4522	
4182	4523	
4183	4524	
4184	4525	
4185	4526	
4186	4527	
4187	4528	
4188	4529	
4189	4530	
4190	4531	
4191	4532	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
4192	4533	
4193	4534	
4194	4535	
4195	4536	
4196	4537	
4197	4538	
4198	4539	
4199	4540	
4200	4541	
4201	4542	
4202	4543	
4203	4544	
4204	4545	
4205	4546	
4206	4547	
4207	4548	
4208	4549	
4209	4550	
4210	4551	
4211	4552	
4212	4553	
4213	4554	
4214	4555	
4215	4556	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
4216	4557	
4217	4558	
4218	4559	
4219	4560	
4220	4561	
4221	4562	
4222	4563	
4223	4564	
4224	4565	
4225	4566	
4226	4567	
4227	4568	
4228	4569	
4229	4570	
4230	4571	
4231	4572	
4232	7084	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : SURETECH COLLEGE OF NURSING, NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
4233	4573	
4234	4574	
4235	4575	
4236	4576	
4237	4577	
4238	4578	
4239	4579	
4240	4580	
4241	4581	
4242	4582	
4243	4583	
4244	4584	
4245	4585	
4246	4586	
4247	4587	
4248	4588	
4249	4589	
4250	4590	
4251	4591	
4252	4592	
4253	4593	
4254	4594	
4255	4595	
4256	4596	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : SURETECH COLLEGE OF NURSING, NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
4257	4597	
4258	4598	
4259	4599	
4260	4600	
4261	4601	
4262	4602	
4263	4603	
4264	4604	
4265	4605	
4266	4606	
4267	4607	
4268	4608	
4269	4609	
4270	4610	
4271	4611	
4272	4612	
4273	4613	
4274	4614	
4275	4615	
4276	4616	
4277	4617	
4278	4618	
4279	4619	
4280	4620	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : SURETECH COLLEGE OF NURSING, NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
4281	4621	
4282	4622	
4283	4623	
4284	4624	
4285	4625	
4286	4626	
4287	4627	
4288	4628	
4289	4629	
4290	4630	
4291	4631	
4292	4632	
4293	4633	
4294	4634	
4295	4635	
4296	4636	
4297	4637	
4298	4638	
4299	4639	
4300	4640	
4301	4641	
4302	4642	
4303	4643	
4304	4644	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : SURETECH COLLEGE OF NURSING, NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
4305	4645	
4306	4646	
4307	4647	
4308	4648	
4309	4649	
4310	4650	
4311	4651	
4312	4652	
4313	4653	
4314	4654	
4315	4655	
4316	4656	
4317	4657	
4318	4658	
4319	4659	
4320	4660	
4321	4661	
4322	4662	
4323	4663	
4324	4664	
4325	4665	
4326	4666	
4327	4667	
4328	4668	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : SURETECH COLLEGE OF NURSING, NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
4329	4669	
4330	4670	
4331	4671	
4332	4672	
4333	4673	
4334	4674	
4335	4675	
4336	4676	
4337	4677	
4338	4678	
4339	4679	
4340	4680	
4341	4681	
4342	4682	
4343	4683	
4344	4684	
4345	4685	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : PRUTHVIRAJ DESHMUKH NURSING INSTITUTE, DIGRAS, YAVATMAL

Date:-

Sr . No.	Seat No.	Signature of Student
4346	4686	
4347	4687	
4348	4688	
4349	4689	
4350	4690	
4351	4691	
4352	4692	
4353	4693	
4354	4694	
4355	4695	
4356	4696	
4357	4697	
4358	4698	
4359	4699	
4360	4700	
4361	4701	
4362	4702	
4363	4703	
4364	4704	
4365	4705	
4366	4706	
4367	4707	
4368	4708	
4369	4709	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : PRUTHVIRAJ DESHMUKH NURSING INSTITUTE, DIGRAS, YAVATMAL

Date:-

Sr . No.	Seat No.	Signature of Student
4370	4710	
4371	4711	
4372	4712	
4373	4713	
4374	4714	
4375	4715	
4376	4716	
4377	4717	
4378	4718	
4379	4719	
4380	4720	
4381	4721	
4382	4722	
4383	4723	
4384	4724	
4385	4725	
4386	4726	
4387	4727	
4388	4728	
4389	4729	
4390	4730	
4391	4731	
4392	4732	
4393	4733	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : PRUTHVIRAJ DESHMUKH NURSING INSTITUTE, DIGRAS, YAVATMAL

Date:-

Sr . No.	Seat No.	Signature of Student
4394	4734	
4395	4735	
4396	4736	
4397	4737	
4398	4738	
4399	4739	
4400	4740	
4401	4741	
4402	4742	
4403	4743	
4404	4744	
4405	4745	
4406	4746	
4407	4747	
4408	4748	
4409	4749	
4410	4750	
4411	4751	
4412	4752	
4413	4753	
4414	4754	
4415	4755	
4416	4756	
4417	4757	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : PRUTHVIRAJ DESHMUKH NURSING INSTITUTE, DIGRAS, YAVATMAL

Date:-

Sr . No.	Seat No.	Signature of Student
4418	4758	
4419	4759	
4420	4760	
4421	4761	
4422	4762	
4423	4763	
4424	4764	
4425	4765	
4426	4766	
4427	4767	
4428	4768	
4429	4769	
4430	4770	
4431	4771	
4432	4772	
4433	4773	
4434	4774	
4435	4775	
4436	4776	
4437	4777	
4438	4778	
4439	4779	
4440	4780	
4441	4781	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : PRUTHVIRAJ DESHMUKH NURSING INSTITUTE, DIGRAS, YAVATMAL

Date:-

Sr . No.	Seat No.	Signature of Student
4442	4782	
4443	4783	
4444	4784	
4445	4785	
4446	4786	
4447	4787	
4448	4788	
4449	4789	
4450	4790	
4451	4791	
4452	4792	
4453	4793	
4454	4794	
4455	4795	
4456	4796	
4457	4797	
4458	4798	
4459	4799	
4460	4800	
4461	4801	
4462	4802	
4463	4803	
4464	4804	
4465	4805	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : PRUTHVIRAJ DESHMUKH NURSING INSTITUTE, DIGRAS, YAVATMAL

Date:-

Sr . No.	Seat No.	Signature of Student
4466	4806	
4467	4807	
4468	4808	
4469	4809	
4470	4810	
4471	4811	
4472	4812	
4473	4813	
4474	4814	
4475	4815	
4476	4816	
4477	4817	
4478	4818	
4479	4819	
4480	4820	
4481	4821	
4482	4822	
4483	4823	
4484	4824	
4485	4825	
4486	4826	
4487	4827	
4488	4828	
4489	4829	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : PRUTHVIRAJ DESHMUKH NURSING INSTITUTE, DIGRAS, YAVATMAL

Date:-

Sr . No.	Seat No.	Signature of Student
4490	4830	
4491	4831	
4492	4832	
4493	4833	
4494	4834	
4495	4835	
4496	4836	
4497	4837	
4498	4838	
4499	4839	
4500	4840	
4501	4841	
4502	4842	
4503	4843	
4504	4844	
4505	4845	
4506	4846	
4507	4847	
4508	7085	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Date:-

Sr . No.	Seat No.	Signature of Student
4509	5698	
4510	5699	
4511	5700	
4512	5701	
4513	5702	
4514	5703	
4515	5704	
4516	5705	
4517	5706	
4518	5707	
4519	5708	
4520	5709	
4521	5710	
4522	5711	
4523	5712	
4524	5713	
4525	5714	
4526	5715	
4527	5716	
4528	5717	
4529	5718	
4530	5719	
4531	5720	
4532	5721	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Date:-

Sr . No.	Seat No.	Signature of Student
4533	5722	
4534	5723	
4535	5724	
4536	5725	
4537	5726	
4538	5727	
4539	5728	
4540	5729	
4541	5730	
4542	5731	
4543	5732	
4544	5733	
4545	5734	
4546	5735	
4547	5736	
4548	5737	
4549	5738	
4550	5739	
4551	5740	
4552	5741	
4553	5742	
4554	5743	
4555	5744	
4556	5745	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Date:-

Sr . No.	Seat No.	Signature of Student
4557	5746	
4558	5747	
4559	5748	
4560	5749	
4561	5750	
4562	5751	
4563	5752	
4564	5753	
4565	5754	
4566	5755	
4567	5756	
4568	5757	
4569	5758	
4570	5759	
4571	5760	
4572	5761	
4573	5762	
4574	5763	
4575	5764	
4576	5765	
4577	5766	
4578	5767	
4579	5768	
4580	5769	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Date:-

Sr . No.	Seat No.	Signature of Student
4581	5770	
4582	5771	
4583	5772	
4584	5773	
4585	5774	
4586	5775	
4587	5776	
4588	5777	
4589	5778	
4590	5779	
4591	5780	
4592	5781	
4593	5782	
4594	5783	
4595	5784	
4596	5785	
4597	5786	
4598	5787	
4599	5788	
4600	5789	
4601	5790	
4602	5791	
4603	5792	
4604	5793	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Date:-

Sr . No.	Seat No.	Signature of Student
4605	5794	
4606	5795	
4607	5796	
4608	5797	
4609	5798	
4610	5799	
4611	5800	
4612	5801	
4613	5802	
4614	5803	
4615	5804	
4616	5805	
4617	5806	
4618	5807	
4619	5808	
4620	5809	
4621	5810	
4622	5811	
4623	5812	
4624	5813	
4625	5814	
4626	5815	
4627	5816	
4628	5817	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MAHATMA GANDHI MISSION INSTITUTE OF NURSING EDUCATION, AURANGABAD

Date:-

Sr . No.	Seat No.	Signature of Student
4629	5818	
4630	5819	
4631	5820	
4632	5821	
4633	5822	
4634	5823	
4635	5824	
4636	5825	
4637	5826	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Latur

Date:-

Sr . No.	Seat No.	Signature of Student
4638	5827	
4639	5828	
4640	5829	
4641	5830	
4642	5831	
4643	5832	
4644	5833	
4645	5834	
4646	5835	
4647	5836	
4648	5837	
4649	5838	
4650	5839	
4651	5840	
4652	5841	
4653	5842	
4654	5843	
4655	5844	
4656	5845	
4657	5846	
4658	5847	
4659	5848	
4660	5849	
4661	5850	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Latur

Date:-

Sr . No.	Seat No.	Signature of Student
4662	5851	
4663	5852	
4664	5853	
4665	5854	
4666	5855	
4667	5856	
4668	5857	
4669	5858	
4670	5859	
4671	5860	
4672	5861	
4673	5862	
4674	5863	
4675	5864	
4676	5865	
4677	5866	
4678	5867	
4679	5868	
4680	5869	
4681	5870	
4682	5871	
4683	5872	
4684	5873	
4685	5874	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : ASHARAM SCHOOL OF NURSING , NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
4686	4848	
4687	4849	
4688	4850	
4689	4851	
4690	4852	
4691	4853	
4692	4854	
4693	4855	
4694	4856	
4695	4857	
4696	4858	
4697	4859	
4698	4860	
4699	4861	
4700	4862	
4701	4863	
4702	4864	
4703	4865	
4704	4866	
4705	4867	
4706	4868	
4707	4869	
4708	4870	
4709	4871	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : ASHARAM SCHOOL OF NURSING , NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
4710	4872	
4711	4873	
4712	4874	
4713	4875	
4714	4876	
4715	4877	
4716	4878	
4717	4879	
4718	4880	
4719	4881	
4720	4882	
4721	4883	
4722	4884	
4723	4885	
4724	4886	
4725	4887	
4726	4888	
4727	4889	
4728	4890	
4729	4891	
4730	4892	
4731	4893	
4732	4894	
4733	4895	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : ASHARAM SCHOOL OF NURSING , NAGPUR

Date:-

Sr . No.	Seat No.	Signature of Student
4734	4896	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : PARVATIBAI MHASKE INSTITUTE OF NURSING, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
4735	2694	
4736	2695	
4737	2696	
4738	2697	
4739	2698	
4740	2699	
4741	2700	
4742	2701	
4743	2702	
4744	2703	
4745	2704	
4746	2705	
4747	2706	
4748	2707	
4749	2708	
4750	2709	
4751	2710	
4752	2711	
4753	2712	
4754	2713	
4755	2714	
4756	2715	
4757	2716	
4758	2717	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : PARVATIBAI MHASKE INSTITUTE OF NURSING, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
4759	2718	
4760	2719	
4761	2720	
4762	2721	
4763	2722	
4764	2723	
4765	2724	
4766	2725	
4767	2726	
4768	2727	
4769	2728	
4770	2729	
4771	2730	
4772	2731	
4773	2732	
4774	2733	
4775	2734	
4776	2735	
4777	2736	
4778	2740	
4779	2741	
4780	2742	
4781	2743	
4782	2744	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : PARVATIBAI MHASKE INSTITUTE OF NURSING, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
4783	2745	
4784	2746	
4785	2747	
4786	2748	
4787	2749	
4788	2750	
4789	2751	
4790	2752	
4791	2753	
4792	2754	
4793	2755	
4794	2756	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SAMARTH INSTITUTE OF NURSING EDUCATION, DERVAN

Date:-

Sr . No.	Seat No.	Signature of Student
4795	1052	
4796	1053	
4797	1054	
4798	1055	
4799	1056	
4800	1057	
4801	1058	
4802	1059	
4803	1060	
4804	1061	
4805	1062	
4806	1063	
4807	1064	
4808	1065	
4809	1066	
4810	1067	
4811	1068	
4812	1069	
4813	1070	
4814	1071	
4815	1072	
4816	1073	
4817	1074	
4818	1075	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SAMARTH INSTITUTE OF NURSING EDUCATION, DERVAN

Date:-

Sr . No.	Seat No.	Signature of Student
4819	1076	
4820	1077	
4821	1078	
4822	1079	
4823	1080	
4824	1081	
4825	1082	
4826	1083	
4827	1084	
4828	1085	
4829	1086	
4830	1087	
4831	1088	
4832	1089	
4833	1090	
4834	1091	
4835	1092	
4836	1093	
4837	1094	
4838	1095	
4839	1096	
4840	1097	
4841	1098	
4842	1099	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SAMARTH INSTITUTE OF NURSING EDUCATION, DERVAN

Date:-

Sr . No.	Seat No.	Signature of Student
4843	1100	
4844	1101	
4845	1102	
4846	1103	
4847	1104	
4848	1105	
4849	1106	
4850	1107	
4851	1108	
4852	1109	
4853	1110	
4854	1111	
4855	1112	
4856	1113	
4857	1114	
4858	1115	
4859	1116	
4860	1117	
4861	1118	
4862	1119	
4863	1120	
4864	1121	
4865	1122	
4866	1123	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SAMARTH INSTITUTE OF NURSING EDUCATION, DERVAN

Date:-

Sr . No.	Seat No.	Signature of Student
4867	1124	
4868	1125	
4869	1126	
4870	1127	
4871	1128	
4872	1129	
4873	1130	
4874	1131	
4875	1132	
4876	1133	
4877	1134	
4878	1135	
4879	1136	
4880	1137	
4881	1138	
4882	1139	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, AUNDH, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4883	2757	
4884	2758	
4885	2759	
4886	2760	
4887	2761	
4888	2762	
4889	2763	
4890	2764	
4891	2765	
4892	2766	
4893	2767	
4894	2768	
4895	2769	
4896	2770	
4897	2771	
4898	2772	
4899	2773	
4900	2774	
4901	2775	
4902	2776	
4903	2777	
4904	2778	
4905	2779	
4906	2780	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, AUNDH, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4907	2781	
4908	2782	
4909	2783	
4910	2784	
4911	2785	
4912	2786	
4913	2787	
4914	2788	
4915	2789	
4916	2790	
4917	2791	
4918	2792	
4919	2793	
4920	2794	
4921	2795	
4922	2796	
4923	2797	
4924	2798	
4925	2799	
4926	2800	
4927	2801	
4928	2802	
4929	2803	
4930	2804	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, AUNDH, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4931	2805	
4932	2806	
4933	2807	
4934	2808	
4935	2809	
4936	2810	
4937	2811	
4938	2812	
4939	2813	
4940	2814	
4941	2815	
4942	2816	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SHARDABAI PAWAR INSTITUTE OF NURSING, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4943	2817	
4944	2818	
4945	2819	
4946	2820	
4947	2821	
4948	2822	
4949	2823	
4950	2824	
4951	2825	
4952	2826	
4953	2827	
4954	2828	
4955	2829	
4956	2830	
4957	2831	
4958	2832	
4959	2833	
4960	2834	
4961	2835	
4962	2836	
4963	2837	
4964	2838	
4965	2839	
4966	2840	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SHARDABAI PAWAR INSTITUTE OF NURSING, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4967	2841	
4968	2842	
4969	2843	
4970	2844	
4971	2845	
4972	2846	
4973	2847	
4974	2848	
4975	2849	
4976	2850	
4977	2851	
4978	2852	
4979	2853	
4980	2854	
4981	2855	
4982	2856	
4983	2857	
4984	2858	
4985	2859	
4986	2860	
4987	2861	
4988	2862	
4989	2863	
4990	2864	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SHARDABAI PAWAR INSTITUTE OF NURSING, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4991	2865	
4992	2866	
4993	2867	
4994	2868	
4995	2869	
4996	2870	
4997	2871	
4998	2872	
4999	2873	
5000	2874	
5001	2875	
5002	2876	
5003	2877	
5004	2878	
5005	2879	
5006	2880	
5007	2881	
5008	2882	
5009	2883	
5010	2884	
5011	2885	
5012	2886	
5013	2887	
5014	2888	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SHARDABAI PAWAR INSTITUTE OF NURSING, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
5015	2889	
5016	2890	
5017	2891	
5018	2892	
5019	2893	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : POOJA NURSING INSTITUTE , BHANDARA

Date:-

Sr . No.	Seat No.	Signature of Student
5020	4897	
5021	4898	
5022	4899	
5023	4900	
5024	4901	
5025	4902	
5026	4903	
5027	4904	
5028	4905	
5029	4906	
5030	4907	
5031	4908	
5032	4909	
5033	4910	
5034	4911	
5035	4912	
5036	4913	
5037	4914	
5038	4915	
5039	4916	
5040	4917	
5041	4918	
5042	4919	
5043	4920	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : POOJA NURSING INSTITUTE , BHANDARA

Date:-

Sr . No.	Seat No.	Signature of Student
5044	4921	
5045	4922	
5046	4923	
5047	4924	
5048	4925	
5049	4926	
5050	4927	
5051	4928	
5052	4929	
5053	4930	
5054	4931	
5055	4932	
5056	4933	
5057	4934	
5058	4935	
5059	4936	
5060	4937	
5061	4938	
5062	4939	
5063	4940	
5064	4941	
5065	4942	
5066	4943	
5067	4944	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : POOJA NURSING INSTITUTE , BHANDARA

Date:-

Sr . No.	Seat No.	Signature of Student
5068	4945	
5069	4946	
5070	4947	
5071	4948	
5072	4949	
5073	4950	
5074	4951	
5075	4952	
5076	4953	
5077	4954	
5078	4955	
5079	4956	
5080	4957	
5081	4958	
5082	4959	
5083	4960	
5084	4961	
5085	4962	
5086	4963	
5087	4964	
5088	4965	
5089	4966	
5090	4967	
5091	4968	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : POOJA NURSING INSTITUTE , BHANDARA

Date:-

Sr . No.	Seat No.	Signature of Student
5092	4969	
5093	4970	
5094	4971	
5095	4972	
5096	4973	
5097	4974	
5098	4975	
5099	4976	
5100	4977	
5101	4978	
5102	4979	
5103	4980	
5104	4981	
5105	4982	
5106	4983	
5107	4984	
5108	4985	
5109	4986	
5110	4987	
5111	4988	
5112	4989	
5113	4990	
5114	4991	
5115	4992	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : POOJA NURSING INSTITUTE , BHANDARA

Date:-

Sr . No.	Seat No.	Signature of Student
5116	4993	
5117	4994	
5118	4995	
5119	4996	
5120	4997	
5121	4998	
5122	4999	
5123	5000	
5124	5001	
5125	5002	
5126	5003	
5127	5004	
5128	5005	
5129	5006	
5130	5007	
5131	5008	
5132	5009	
5133	5010	
5134	5011	
5135	5012	
5136	5013	
5137	5014	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, SINDHUDURG

Date:-

Sr . No.	Seat No.	Signature of Student
5138	1140	
5139	1141	
5140	1142	
5141	1143	
5142	1144	
5143	1145	
5144	1146	
5145	1147	
5146	1148	
5147	1149	
5148	1150	
5149	1151	
5150	1152	
5151	1153	
5152	1154	
5153	1155	
5154	1156	
5155	1157	
5156	1158	
5157	1159	
5158	1160	
5159	1161	
5160	1162	
5161	1163	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, SINDHUDURG

Date:-

Sr . No.	Seat No.	Signature of Student
5162	1164	
5163	1165	
5164	1166	
5165	1167	
5166	1168	
5167	1169	
5168	1170	
5169	1171	
5170	1172	
5171	1173	
5172	1174	
5173	1175	
5174	1176	
5175	1177	
5176	1178	
5177	1179	
5178	1180	
5179	1181	
5180	1182	
5181	1183	
5182	1184	
5183	1185	
5184	1186	
5185	1187	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, SINDHUDURG

Date:-

Sr . No.	Seat No.	Signature of Student
5186	1188	
5187	1189	
5188	1190	
5189	1191	
5190	1192	
5191	1193	
5192	1194	
5193	1195	
5194	1196	
5195	1197	
5196	1198	
5197	1199	
5198	1200	
5199	1201	
5200	1202	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MAHARASHTRA INSTITUTE OF MED. SCI & RE. NSG, LATUR

Date:-

Sr . No.	Seat No.	Signature of Student
5201	5875	
5202	5876	
5203	5877	
5204	5878	
5205	5879	
5206	5880	
5207	5881	
5208	5882	
5209	5883	
5210	5884	
5211	5885	
5212	5886	
5213	5887	
5214	5888	
5215	5889	
5216	5890	
5217	5891	
5218	5892	
5219	5893	
5220	5894	
5221	5895	
5222	5896	
5223	5897	
5224	5898	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MAHARASHTRA INSTITUTE OF MED. SCI & RE. NSG, LATUR

Date:-

Sr . No.	Seat No.	Signature of Student
5225	5899	
5226	5900	
5227	5901	
5228	5902	
5229	5903	
5230	5904	
5231	5905	
5232	5906	
5233	5907	
5234	5908	
5235	5909	
5236	5910	
5237	5911	
5238	5912	
5239	5913	
5240	5914	
5241	5915	
5242	5916	
5243	5917	
5244	5918	
5245	5919	
5246	5920	
5247	5921	
5248	5922	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MAHARASHTRA INSTITUTE OF MED. SCI & RE. NSG, LATUR

Date:-

Sr . No.	Seat No.	Signature of Student
5249	5923	
5250	5924	
5251	5925	
5252	5926	
5253	5927	
5254	5928	
5255	5929	
5256	5930	
5257	5931	
5258	5932	
5259	5933	
5260	5934	
5261	5935	
5262	5936	
5263	5937	
5264	5938	
5265	5939	
5266	5940	
5267	5941	
5268	5942	
5269	5943	
5270	5944	
5271	5945	
5272	5946	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MAHARASHTRA INSTITUTE OF MED. SCI & RE. NSG, LATUR

Date:-

Sr . No.	Seat No.	Signature of Student
5273	5947	
5274	5948	
5275	5949	
5276	5950	
5277	5951	
5278	5952	
5279	5953	
5280	5954	
5281	5955	
5282	5956	
5283	5957	
5284	5958	
5285	5959	
5286	5960	
5287	5961	
5288	5962	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Jalna

Date:-

Sr . No.	Seat No.	Signature of Student
5289	5963	
5290	5964	
5291	5965	
5292	5966	
5293	5967	
5294	5968	
5295	5969	
5296	5970	
5297	5971	
5298	5972	
5299	5973	
5300	5974	
5301	5975	
5302	5976	
5303	5977	
5304	5978	
5305	5979	
5306	5980	
5307	5981	
5308	5982	
5309	5983	
5310	5984	
5311	5985	
5312	5986	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, Jalna

Date:-

Sr . No.	Seat No.	Signature of Student
5313	5987	
5314	5988	
5315	5989	
5316	5990	
5317	5991	
5318	5992	
5319	5993	
5320	5994	
5321	5995	
5322	5996	
5323	5997	
5324	5998	
5325	5999	
5326	6000	
5327	6001	
5328	6002	
5329	6003	
5330	6004	
5331	6005	
5332	6006	
5333	6007	
5334	6008	
5335	6009	
5336	6010	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : GENERAL HOSPITAL, Jalna

Date:-

Sr . No.	Seat No.	Signature of Student
5337	6011	
5338	6012	
5339	6013	
5340	6014	
5341	6015	
5342	6016	
5343	6017	
5344	6018	
5345	6019	
5346	6020	
5347	6021	
5348	6022	
5349	6023	
5350	6024	
5351	6025	
5352	6026	
5353	6027	
5354	6028	
5355	6029	
5356	6030	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BALESHWAR INSTITUTE OF NURSING, PARBHANI

Date:-

Sr . No.	Seat No.	Signature of Student
5357	6031	
5358	6032	
5359	6033	
5360	6034	
5361	6035	
5362	6036	
5363	6037	
5364	6038	
5365	6039	
5366	6040	
5367	6041	
5368	6042	
5369	6043	
5370	6044	
5371	6045	
5372	6046	
5373	6047	
5374	6048	
5375	6049	
5376	6050	
5377	6051	
5378	6052	
5379	6053	
5380	6054	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BALESHWAR INSTITUTE OF NURSING, PARBHANI

Date:-

Sr . No.	Seat No.	Signature of Student
5381	6055	
5382	6056	
5383	6057	
5384	6058	
5385	6059	
5386	6060	
5387	6061	
5388	6062	
5389	6063	
5390	6064	
5391	6065	
5392	6066	
5393	6067	
5394	6068	
5395	6069	
5396	6070	
5397	6071	
5398	6072	
5399	6073	
5400	6074	
5401	6075	
5402	6076	
5403	6077	
5404	6078	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BALESHWAR INSTITUTE OF NURSING, PARBHANI

Date:-

Sr . No.	Seat No.	Signature of Student
5405	6079	
5406	6080	
5407	6081	
5408	6082	
5409	6083	
5410	6084	
5411	6085	
5412	6086	
5413	6087	
5414	6088	
5415	6089	
5416	6090	
5417	6091	
5418	6092	
5419	6093	
5420	6094	
5421	6095	
5422	6096	
5423	6097	
5424	6098	
5425	6099	
5426	6100	
5427	6101	
5428	6102	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BALESHWAR INSTITUTE OF NURSING, PARBHANI

Date:-

Sr . No.	Seat No.	Signature of Student
5429	6103	
5430	6104	
5431	6105	
5432	6106	
5433	6107	
5434	6108	
5435	6109	
5436	6110	
5437	6111	
5438	6112	
5439	6113	
5440	6114	
5441	6115	
5442	6116	
5443	6117	
5444	6118	
5445	6119	
5446	6120	
5447	6121	
5448	6122	
5449	6123	
5450	6124	
5451	6125	
5452	6126	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BALESHWAR INSTITUTE OF NURSING, PARBHANI

Date:-

Sr . No.	Seat No.	Signature of Student
5453	6127	
5454	6128	
5455	6129	
5456	6130	
5457	6131	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BEL- AIR COLLEGE OF NURSING, PANCHAGANI, SATARA

Date:-

Sr . No.	Seat No.	Signature of Student
5458	2894	
5459	2895	
5460	2896	
5461	2897	
5462	2898	
5463	2899	
5464	2900	
5465	2901	
5466	2902	
5467	2903	
5468	2904	
5469	2905	
5470	2906	
5471	2907	
5472	2908	
5473	2909	
5474	2910	
5475	2911	
5476	2912	
5477	2913	
5478	2914	
5479	2915	
5480	2916	
5481	2917	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BEL- AIR COLLEGE OF NURSING, PANCHAGANI, SATARA

Date:-

Sr . No.	Seat No.	Signature of Student
5482	2918	
5483	2919	
5484	2920	
5485	2921	
5486	2922	
5487	2923	
5488	2924	
5489	2925	
5490	2926	
5491	2927	
5492	2928	
5493	2929	
5494	2930	
5495	2931	
5496	2932	
5497	2933	
5498	2934	
5499	2935	
5500	2936	
5501	2937	
5502	2938	
5503	2939	
5504	2940	
5505	2941	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : BEL- AIR COLLEGE OF NURSING, PANCHAGANI, SATARA

Date:-

Sr . No.	Seat No.	Signature of Student
5506	2942	
5507	2943	
5508	2944	
5509	2945	
5510	2946	
5511	2947	
5512	2948	
5513	2949	
5514	2950	
5515	2951	
5516	2952	
5517	2953	
5518	2954	
5519	2955	
5520	2956	
5521	2957	
5522	2958	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Sushrusha Nursing School, Ap Daund, Pune

Date:-

Sr . No.	Seat No.	Signature of Student
5523	2959	
5524	2960	
5525	2961	
5526	2962	
5527	2963	
5528	2964	
5529	2965	
5530	2966	
5531	2967	
5532	2968	
5533	2969	
5534	2970	
5535	2971	
5536	2972	
5537	2973	
5538	2974	
5539	2975	
5540	2976	
5541	2977	
5542	2978	
5543	2979	
5544	2980	
5545	2981	
5546	2982	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Sushrusha Nursing School, Ap Daund, Pune

Date:-

Sr . No.	Seat No.	Signature of Student
5547	2983	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : CHINGUAAI INSTITUTE OF NURSING EDUCATION, KAVATHE MAHANKAL, SANGLI

Date:-

Sr . No.	Seat No.	Signature of Student
5548	2994	
5549	2995	
5550	2996	
5551	2997	
5552	2998	
5553	2999	
5554	3000	
5555	3001	
5556	3002	
5557	3003	
5558	3004	
5559	3005	
5560	3006	
5561	3007	
5562	3008	
5563	3009	
5564	3010	
5565	3011	
5566	3012	
5567	3013	
5568	3014	
5569	3015	
5570	3016	
5571	3017	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : CHINGUAAI INSTITUTE OF NURSING EDUCATION, KAVATHE MAHANKAL, SANGLI

Date:-

Sr . No.	Seat No.	Signature of Student
5572	3018	
5573	3019	
5574	3020	
5575	3021	
5576	3022	
5577	3023	
5578	3024	
5579	3025	
5580	3026	
5581	3027	
5582	3028	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MATOSHRI ASARABAI DARADE SCHOOL OF NURSING, YEOLA, NASHIK

Date:-

Sr . No.	Seat No.	Signature of Student
5583	1203	
5584	1204	
5585	1205	
5586	1206	
5587	1207	
5588	1208	
5589	1209	
5590	1210	
5591	1211	
5592	1212	
5593	1213	
5594	1214	
5595	1215	
5596	1216	
5597	1217	
5598	1218	
5599	1219	
5600	1220	
5601	1221	
5602	1222	
5603	1223	
5604	1224	
5605	1225	
5606	1226	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MATOSHRI ASARABAI DARADE SCHOOL OF NURSING, YEOLA, NASHIK

Date:-

Sr . No.	Seat No.	Signature of Student
5607	1227	
5608	1228	
5609	1229	
5610	1230	
5611	1231	
5612	1232	
5613	1233	
5614	1234	
5615	1235	
5616	1236	
5617	1237	
5618	1238	
5619	1239	
5620	1240	
5621	1241	
5622	1242	
5623	1243	
5624	1244	
5625	1245	
5626	1246	
5627	1247	
5628	1248	
5629	1249	
5630	1250	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MATOSHRI ASARABAI DARADE SCHOOL OF NURSING, YEOLA, NASHIK

Date:-

Sr . No.	Seat No.	Signature of Student
5631	1251	
5632	1252	
5633	1253	
5634	1254	
5635	1255	
5636	1256	
5637	1257	
5638	1258	
5639	1259	
5640	1260	
5641	1261	
5642	1262	
5643	1263	
5644	1264	
5645	1265	
5646	1266	
5647	1267	
5648	1268	
5649	1269	
5650	1270	
5651	1271	
5652	1272	
5653	1273	
5654	1274	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MATOSHRI ASARABAI DARADE SCHOOL OF NURSING, YEOLA, NASHIK

Date:-

Sr . No.	Seat No.	Signature of Student
5655	1275	
5656	1276	
5657	1277	
5658	1278	
5659	1279	
5660	1280	
5661	1281	
5662	1282	
5663	1283	
5664	1284	
5665	1285	
5666	1286	
5667	1287	
5668	1288	
5669	1289	
5670	1290	
5671	1291	
5672	1292	
5673	1293	
5674	1294	
5675	1295	
5676	1296	
5677	1297	
5678	1298	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MATOSHRI ASARABAI DARADE SCHOOL OF NURSING, YEOLA, NASHIK

Date:-

Sr . No.	Seat No.	Signature of Student
5679	1299	
5680	1300	
5681	1301	
5682	1302	
5683	1303	
5684	1304	
5685	1305	
5686	1306	
5687	1307	
5688	1308	
5689	1309	
5690	1310	
5691	1311	
5692	1312	
5693	1313	
5694	1314	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : VIJAYSINH MOHITE PATIL SCHOOL OF NURSING, MALSHIRAS, SOLAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
5695	3029	
5696	3030	
5697	3031	
5698	3032	
5699	3033	
5700	3034	
5701	3035	
5702	3036	
5703	3037	
5704	3038	
5705	3039	
5706	3040	
5707	3041	
5708	3042	
5709	3043	
5710	3044	
5711	3045	
5712	3046	
5713	3047	
5714	3048	
5715	3049	
5716	3050	
5717	3051	
5718	3052	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : VIJAYSINH MOHITE PATIL SCHOOL OF NURSING, MALSHIRAS, SOLAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
5719	3053	
5720	3054	
5721	3055	
5722	3056	
5723	3057	
5724	3058	
5725	3059	
5726	3060	
5727	3061	
5728	3062	
5729	3063	
5730	3064	
5731	3065	
5732	3066	
5733	3067	
5734	3068	
5735	3069	
5736	3070	
5737	3071	
5738	3072	
5739	3073	
5740	3074	
5741	3075	
5742	3076	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : VIJAYSINH MOHITE PATIL SCHOOL OF NURSING, MALSHIRAS, SOLAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
5743	3077	
5744	3078	
5745	3079	
5746	3080	
5747	3081	
5748	3082	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : LATE UDHAVRAO TULSHIRAM JADHAVAR FOUNDATION'S INSTITUTE OF NURSING, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
5749	3083	
5750	3084	
5751	3085	
5752	3086	
5753	3087	
5754	3088	
5755	3089	
5756	3090	
5757	3091	
5758	3092	
5759	3093	
5760	3094	
5761	3095	
5762	3096	
5763	3097	
5764	3098	
5765	3099	
5766	3100	
5767	3101	
5768	3102	
5769	3103	
5770	3104	
5771	3105	
5772	3106	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : LATE UDHAVRAO TULSHIRAM JADHAVAR FOUNDATION'S INSTITUTE OF NURSING, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
5773	3107	
5774	3108	
5775	3109	
5776	3110	
5777	3111	
5778	3112	
5779	3113	
5780	3114	
5781	3115	
5782	3116	
5783	3117	
5784	3118	
5785	3119	
5786	3120	
5787	3121	
5788	3122	
5789	3123	
5790	3124	
5791	3125	
5792	3126	
5793	3127	
5794	3128	
5795	3129	
5796	3130	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : LATE UDHAVRAO TULSHIRAM JADHAVAR FOUNDATION'S INSTITUTE OF NURSING, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
5797	3131	
5798	3132	
5799	3133	
5800	3134	
5801	3135	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SARASWATI INSTITUTE OF NURSING SCIENCES AND RESEARCH, AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
5802	5015	
5803	5016	
5804	5017	
5805	5018	
5806	5019	
5807	5020	
5808	5021	
5809	5022	
5810	5023	
5811	5024	
5812	5025	
5813	5026	
5814	5027	
5815	5028	
5816	5029	
5817	5030	
5818	5031	
5819	5032	
5820	5033	
5821	5034	
5822	5035	
5823	5036	
5824	5037	
5825	5038	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SARASWATI INSTITUTE OF NURSING SCIENCES AND RESEARCH, AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
5826	5039	
5827	5040	
5828	5041	
5829	5042	
5830	5043	
5831	5044	
5832	5045	
5833	5046	
5834	5047	
5835	5048	
5836	5049	
5837	5050	
5838	5051	
5839	5052	
5840	5053	
5841	5054	
5842	5055	
5843	5056	
5844	5057	
5845	5058	
5846	5059	
5847	5060	
5848	5061	
5849	5062	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SARASWATI INSTITUTE OF NURSING SCIENCES AND RESEARCH, AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
5850	5063	
5851	5064	
5852	5065	
5853	5066	
5854	5067	
5855	5068	
5856	5069	
5857	5070	
5858	5071	
5859	5072	
5860	5073	
5861	5074	
5862	5075	
5863	5076	
5864	5077	
5865	5078	
5866	5079	
5867	5080	
5868	5081	
5869	5082	
5870	5083	
5871	5084	
5872	5085	
5873	5086	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SARASWATI INSTITUTE OF NURSING SCIENCES AND RESEARCH, AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
5874	5087	
5875	5088	
5876	5089	
5877	5090	
5878	5091	
5879	5092	
5880	5093	
5881	5094	
5882	5095	
5883	5096	
5884	5097	
5885	5098	
5886	5099	
5887	5100	
5888	5101	
5889	5102	
5890	5103	
5891	5104	
5892	5105	
5893	5106	
5894	5107	
5895	5108	
5896	5109	
5897	5110	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SARASWATI INSTITUTE OF NURSING SCIENCES AND RESEARCH, AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
5898	5111	
5899	5112	
5900	5113	
5901	5114	
5902	5115	
5903	5116	
5904	5117	
5905	5118	
5906	5119	
5907	5120	
5908	5121	
5909	5122	
5910	5123	
5911	5124	
5912	5125	
5913	5126	
5914	5127	
5915	5128	
5916	5129	
5917	5130	
5918	5131	
5919	5132	
5920	5133	
5921	5134	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SARASWATI INSTITUTE OF NURSING SCIENCES AND RESEARCH, AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
5922	5135	
5923	5136	
5924	5137	
5925	5138	
5926	5139	
5927	5140	
5928	5141	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : PAINGANGA INSTITUTE OF NURSING, BULDANA

Date:-

Sr . No.	Seat No.	Signature of Student
5929	5142	
5930	5143	
5931	5144	
5932	5145	
5933	5146	
5934	5147	
5935	5148	
5936	5149	
5937	5150	
5938	5151	
5939	5152	
5940	5153	
5941	5154	
5942	5155	
5943	5156	
5944	5157	
5945	5158	
5946	5159	
5947	5160	
5948	5161	
5949	5162	
5950	5163	
5951	5164	
5952	5165	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : PAINGANGA INSTITUTE OF NURSING, BULDANA

Date:-

Sr . No.	Seat No.	Signature of Student
5953	5166	
5954	5167	
5955	5168	
5956	5169	
5957	5170	
5958	5171	
5959	5172	
5960	5173	
5961	5174	
5962	5175	
5963	5176	
5964	5177	
5965	5178	
5966	5179	
5967	5180	
5968	5181	
5969	5182	
5970	5183	
5971	5184	
5972	5185	
5973	5186	
5974	5187	
5975	5188	
5976	5189	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : PAINGANGA INSTITUTE OF NURSING, BULDANA

Date:-

Sr . No.	Seat No.	Signature of Student
5977	5190	
5978	5191	
5979	5192	
5980	5193	
5981	5194	
5982	5195	
5983	5196	
5984	5197	
5985	5198	
5986	5199	
5987	5200	
5988	5201	
5989	5202	
5990	5203	
5991	5204	
5992	5205	
5993	5206	
5994	5207	
5995	5208	
5996	5209	
5997	5210	
5998	5211	
5999	5212	
6000	5213	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : PAINGANGA INSTITUTE OF NURSING, BULDANA

Date:-

Sr . No.	Seat No.	Signature of Student
6001	5214	
6002	5215	
6003	5216	
6004	5217	
6005	5218	
6006	5219	
6007	5220	
6008	5221	
6009	5222	
6010	5223	
6011	5224	
6012	5225	
6013	5226	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Date:-

Sr . No.	Seat No.	Signature of Student
6014	6132	
6015	6133	
6016	6134	
6017	6135	
6018	6136	
6019	6137	
6020	6138	
6021	6139	
6022	6140	
6023	6141	
6024	6142	
6025	6143	
6026	6144	
6027	6145	
6028	6146	
6029	6147	
6030	6148	
6031	6149	
6032	6150	
6033	6151	
6034	6152	
6035	6153	
6036	6154	
6037	6155	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Date:-

Sr . No.	Seat No.	Signature of Student
6038	6156	
6039	6157	
6040	6158	
6041	6159	
6042	6160	
6043	6161	
6044	6162	
6045	6163	
6046	6164	
6047	6165	
6048	6166	
6049	6167	
6050	6168	
6051	6169	
6052	6170	
6053	6171	
6054	6172	
6055	6173	
6056	6174	
6057	6175	
6058	6176	
6059	6177	
6060	6178	
6061	6179	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : SHRI SURESHDADA DESHMUKH INSTITUTE OF NURSING, PARBHANI

Date:-

Sr . No.	Seat No.	Signature of Student
6062	6180	
6063	6181	
6064	6182	
6065	6183	
6066	6184	
6067	6185	
6068	6186	
6069	6187	
6070	6188	
6071	6189	
6072	6190	
6073	6191	
6074	6192	
6075	6193	
6076	6194	
6077	6195	
6078	6196	
6079	7086	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : MOTHER TERESA NURSING SCHOOL, NANDED

Date:-

Sr . No.	Seat No.	Signature of Student
6080	6197	
6081	6198	
6082	6199	
6083	6200	
6084	6201	
6085	6202	
6086	6203	
6087	6204	
6088	6205	
6089	6206	
6090	6207	
6091	6208	
6092	6209	
6093	6210	
6094	6211	
6095	6212	
6096	6213	
6097	6214	
6098	6215	
6099	6216	
6100	6217	
6101	6218	
6102	6219	
6103	6220	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : MOTHER TERESA NURSING SCHOOL, NANDED

Date:-

Sr . No.	Seat No.	Signature of Student
6104	6221	
6105	6222	
6106	6223	
6107	6224	
6108	6225	
6109	6226	
6110	6227	
6111	6228	
6112	6229	
6113	6230	
6114	6231	
6115	6232	
6116	6233	
6117	6234	
6118	6235	
6119	6236	
6120	6237	
6121	6238	
6122	6239	
6123	6240	
6124	6241	
6125	6242	
6126	6243	
6127	6244	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : MOTHER TERESA NURSING SCHOOL, NANDED

Date:-

Sr . No.	Seat No.	Signature of Student
6128	6245	
6129	6246	
6130	6247	
6131	6248	
6132	6249	
6133	6250	
6134	6251	
6135	6252	
6136	6253	
6137	6254	
6138	6255	
6139	6256	
6140	6257	
6141	6258	
6142	6259	
6143	6260	
6144	6261	
6145	6262	
6146	6263	
6147	6264	
6148	6265	
6149	6266	
6150	6267	
6151	6268	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : MOTHER TERESA NURSING SCHOOL, NANDED

Date:-

Sr . No.	Seat No.	Signature of Student
6152	6269	
6153	6270	
6154	6271	
6155	6272	
6156	6273	
6157	6274	
6158	6275	
6159	6276	
6160	6277	
6161	6278	
6162	6279	
6163	6280	
6164	6281	
6165	6282	
6166	6283	
6167	6284	
6168	6285	
6169	6286	
6170	6287	
6171	6288	
6172	6289	
6173	6290	
6174	6291	
6175	6292	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : MOTHER TERESA NURSING SCHOOL, NANDED

Date:-

Sr . No.	Seat No.	Signature of Student
6176	6293	
6177	6294	
6178	6295	
6179	6296	
6180	6297	
6181	6298	
6182	6299	
6183	6300	
6184	6301	
6185	6302	
6186	6303	
6187	6304	
6188	6305	
6189	6306	
6190	6307	
6191	6308	
6192	6309	
6193	6310	
6194	6311	
6195	6312	
6196	6313	
6197	6314	
6198	6315	
6199	6316	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : MOTHER TERESA NURSING SCHOOL, NANDED

Date:-

Sr . No.	Seat No.	Signature of Student
6200	6317	
6201	6318	
6202	6319	
6203	6320	
6204	6321	
6205	6322	
6206	6323	
6207	6324	
6208	6325	
6209	6326	
6210	6327	
6211	6328	
6212	6329	
6213	6330	
6214	6331	
6215	6332	
6216	6333	
6217	6334	
6218	6335	
6219	6336	
6220	6337	
6221	6338	
6222	6339	
6223	6340	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : MOTHER TERESA NURSING SCHOOL, NANDED

Date:-

Sr . No.	Seat No.	Signature of Student
6224	6341	
6225	6342	
6226	6343	
6227	6344	
6228	6345	
6229	6346	
6230	6347	
6231	6348	
6232	6349	
6233	6350	
6234	6351	
6235	6352	
6236	6353	
6237	6354	
6238	6355	
6239	6356	
6240	6357	
6241	6358	
6242	6359	
6243	6360	
6244	6361	
6245	6362	
6246	6363	
6247	6364	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : MOTHER TERESA NURSING SCHOOL, NANDED

Date:-

Sr . No.	Seat No.	Signature of Student
6248	6365	
6249	6366	
6250	6367	
6251	6368	
6252	6369	
6253	6370	
6254	6371	
6255	6372	
6256	6373	
6257	6374	
6258	6375	
6259	6376	
6260	6377	
6261	6378	
6262	6379	
6263	6380	
6264	6381	
6265	6382	
6266	6383	
6267	6384	
6268	6385	
6269	6386	
6270	6387	
6271	6388	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : MOTHER TERESA NURSING SCHOOL, NANDED

Date:-

Sr . No.	Seat No.	Signature of Student
6272	6389	
6273	6390	
6274	6391	
6275	6392	
6276	6393	
6277	6394	
6278	6395	
6279	6396	
6280	6397	
6281	6398	
6282	6399	
6283	6400	
6284	6401	
6285	6402	
6286	6403	
6287	6404	
6288	6405	
6289	6406	
6290	6407	
6291	6408	
6292	6409	
6293	6410	
6294	6411	
6295	6412	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : MOTHER TERESA NURSING SCHOOL, NANDED

Date:-

Sr . No.	Seat No.	Signature of Student
6296	6413	
6297	6414	
6298	6415	
6299	6416	
6300	6417	
6301	6418	
6302	6419	
6303	6420	
6304	6421	
6305	6422	
6306	6423	
6307	6424	
6308	6425	
6309	6426	
6310	6427	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : K.T. PATIL SCHOOL OF NURSING, OSMANABAD

Date:-

Sr . No.	Seat No.	Signature of Student
6311	6428	
6312	6429	
6313	6430	
6314	6431	
6315	6432	
6316	6433	
6317	6434	
6318	6435	
6319	6436	
6320	6437	
6321	6438	
6322	6439	
6323	6440	
6324	6441	
6325	6442	
6326	6443	
6327	6444	
6328	6445	
6329	6446	
6330	6447	
6331	6448	
6332	6449	
6333	6450	
6334	6451	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : K.T. PATIL SCHOOL OF NURSING, OSMANABAD

Date:-

Sr . No.	Seat No.	Signature of Student
6335	6452	
6336	6453	
6337	6454	
6338	6455	
6339	6456	
6340	6457	
6341	6458	
6342	6459	
6343	6460	
6344	6461	
6345	6462	
6346	6463	
6347	6464	
6348	6465	
6349	6466	
6350	6467	
6351	6468	
6352	6469	
6353	6470	
6354	6471	
6355	6472	
6356	6473	
6357	6474	
6358	6475	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : K.T. PATIL SCHOOL OF NURSING, OSMANABAD

Date:-

Sr . No.	Seat No.	Signature of Student
6359	7082	
6360	7087	
6361	7088	
6362	7089	
6363	7090	
6364	7091	
6365	7092	
6366	7093	
6367	7094	
6368	7095	
6369	7096	
6370	7097	
6371	7098	
6372	7099	
6373	7100	
6374	7101	
6375	7102	
6376	7103	
6377	7106	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : NEW MOTHER TERESA A.N.M. SCHOOL OF NURSING, UDGIR, LATUR

Date:-

Sr . No.	Seat No.	Signature of Student
6378	6476	
6379	6477	
6380	6478	
6381	6479	
6382	6480	
6383	6481	
6384	6482	
6385	6483	
6386	6484	
6387	6485	
6388	6486	
6389	6487	
6390	6488	
6391	6489	
6392	6490	
6393	6491	
6394	6492	
6395	6493	
6396	6494	
6397	6495	
6398	6496	
6399	6497	
6400	6498	
6401	6499	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : NEW MOTHER TERESA A.N.M. SCHOOL OF NURSING, UDGIR, LATUR

Date:-

Sr . No.	Seat No.	Signature of Student
6402	6500	
6403	6501	
6404	6502	
6405	6503	
6406	6504	
6407	6505	
6408	6506	
6409	6507	
6410	6508	
6411	6509	
6412	6510	
6413	6511	
6414	6512	
6415	6513	
6416	6514	
6417	6515	
6418	6516	
6419	6517	
6420	6518	
6421	6519	
6422	6520	
6423	6521	
6424	6522	
6425	6523	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : NEW MOTHER TERESA A.N.M. SCHOOL OF NURSING, UDGIR, LATUR

Date:-

Sr . No.	Seat No.	Signature of Student
6426	6524	
6427	6525	
6428	6526	
6429	6527	
6430	6528	
6431	6529	
6432	6530	
6433	6531	
6434	6532	
6435	6533	
6436	6534	
6437	6535	
6438	6536	
6439	6537	
6440	6538	
6441	6539	
6442	6540	
6443	6541	
6444	6542	
6445	6543	
6446	6544	
6447	6545	
6448	6546	
6449	6547	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : NEW MOTHER TERESA A.N.M. SCHOOL OF NURSING, UDGIR, LATUR

Date:-

Sr . No.	Seat No.	Signature of Student
6450	6548	
6451	6549	
6452	6550	
6453	6551	
6454	6552	
6455	6553	
6456	6554	
6457	6555	
6458	6556	
6459	6557	
6460	6558	
6461	6559	
6462	6560	
6463	6561	
6464	6562	
6465	6563	
6466	6564	
6467	6565	
6468	6566	
6469	6567	
6470	6568	
6471	6569	
6472	6570	
6473	6571	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : NEW MOTHER TERESA A.N.M. SCHOOL OF NURSING, UDGIR, LATUR

Date:-

Sr . No.	Seat No.	Signature of Student
6474	6572	
6475	6573	
6476	6574	
6477	6575	
6478	6576	
6479	6577	
6480	6578	
6481	6579	
6482	6580	
6483	6581	
6484	6582	
6485	6583	
6486	6584	
6487	6585	
6488	6586	
6489	6587	
6490	6588	
6491	6589	
6492	6590	
6493	6591	
6494	6592	
6495	6593	
6496	6594	
6497	6595	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : NEW MOTHER TERESA A.N.M. SCHOOL OF NURSING, UDGIR, LATUR

Date:-

Sr . No.	Seat No.	Signature of Student
6498	6596	
6499	6597	
6500	6598	
6501	6599	
6502	6600	
6503	6601	
6504	6602	
6505	6603	
6506	6604	
6507	6605	
6508	6606	
6509	6607	
6510	6608	
6511	6609	
6512	6610	
6513	6611	
6514	6612	
6515	6613	
6516	6614	
6517	6615	
6518	6616	
6519	6617	
6520	6618	
6521	6619	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : District Hospital Beed

Date:-

Sr . No.	Seat No.	Signature of Student
6522	6620	
6523	6621	
6524	6622	
6525	6623	
6526	6624	
6527	6625	
6528	6626	
6529	6627	
6530	6628	
6531	6629	
6532	6630	
6533	6631	
6534	6632	
6535	6633	
6536	6634	
6537	6635	
6538	6636	
6539	6637	
6540	6638	
6541	6639	
6542	6640	
6543	6641	
6544	6642	
6545	6643	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : District Hospital Beed

Date:-

Sr . No.	Seat No.	Signature of Student
6546	6644	
6547	6645	
6548	6646	
6549	6647	
6550	6648	
6551	6649	
6552	6650	
6553	6651	
6554	6652	
6555	6653	
6556	6654	
6557	6655	
6558	6656	
6559	6657	
6560	6658	
6561	6659	
6562	6660	
6563	6661	
6564	6662	
6565	6663	
6566	6664	
6567	6665	
6568	6666	
6569	6667	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : District Hospital Beed

Date:-

Sr . No.	Seat No.	Signature of Student
6570	6668	
6571	6669	
6572	6670	
6573	6671	
6574	6672	
6575	6673	
6576	6674	
6577	6675	
6578	6676	
6579	6677	
6580	6678	
6581	6679	
6582	6680	
6583	6681	
6584	6682	
6585	6683	
6586	6684	
6587	6685	
6588	6686	
6589	6687	
6590	6688	
6591	6689	
6592	6690	
6593	6691	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : District Hospital Beed

Date:-

Sr . No.	Seat No.	Signature of Student
6594	6692	
6595	6693	
6596	6694	
6597	6695	
6598	6696	
6599	6697	
6600	6698	
6601	6699	
6602	6700	
6603	6701	
6604	6702	
6605	6703	
6606	6704	
6607	6705	
6608	6706	
6609	6707	
6610	6708	
6611	6709	
6612	6710	
6613	6711	
6614	6712	
6615	6713	
6616	6714	
6617	6715	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : District Hospital Beed

Date:-

Sr . No.	Seat No.	Signature of Student
6618	6716	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Aurangabad Training School of Nursing, Shivajinagar, Aurangabad

Date:-

Sr . No.	Seat No.	Signature of Student
6619	6717	
6620	6718	
6621	6719	
6622	6720	
6623	6721	
6624	6722	
6625	6723	
6626	6724	
6627	6725	
6628	6726	
6629	6727	
6630	6728	
6631	6729	
6632	6730	
6633	6731	
6634	6732	
6635	6733	
6636	6734	
6637	6735	
6638	6736	
6639	6737	
6640	6738	
6641	6739	
6642	6740	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Aurangabad Training School of Nursing, Shivajinagar, Aurangabad

Date:-

Sr . No.	Seat No.	Signature of Student
6643	6741	
6644	6742	
6645	6743	
6646	6744	
6647	6745	
6648	6746	
6649	6747	
6650	6748	
6651	6749	
6652	6750	
6653	6751	
6654	6752	
6655	6753	
6656	6754	
6657	6755	
6658	6756	
6659	6757	
6660	6758	
6661	6759	
6662	6760	
6663	6761	
6664	6762	
6665	6763	
6666	6764	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Aurangabad Training School of Nursing, Shivajinagar, Aurangabad

Date:-

Sr . No.	Seat No.	Signature of Student
6667	6765	
6668	6766	
6669	6767	
6670	6768	
6671	6769	
6672	6770	
6673	6771	
6674	6772	
6675	6773	
6676	6774	
6677	6775	
6678	6776	
6679	6777	
6680	6778	
6681	6779	
6682	6780	
6683	6781	
6684	6782	
6685	6783	
6686	6784	
6687	6785	
6688	6786	
6689	6787	
6690	6788	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Aurangabad Training School of Nursing, Shivajinagar, Aurangabad

Date:-

Sr . No.	Seat No.	Signature of Student
6691	6789	
6692	6790	
6693	6791	
6694	6792	
6695	6793	
6696	6794	
6697	6795	
6698	6796	
6699	6797	
6700	6798	
6701	6799	
6702	6800	
6703	6801	
6704	6802	
6705	6803	
6706	6804	
6707	6805	
6708	6806	
6709	6807	
6710	6808	
6711	6809	
6712	6810	
6713	6811	
6714	6812	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : Aurangabad Training School of Nursing, Shivajinagar, Aurangabad

Date:-

Sr . No.	Seat No.	Signature of Student
6715	6813	
6716	6814	
6717	6815	
6718	6816	
6719	6817	
6720	6818	
6721	6819	
6722	6820	
6723	6821	
6724	6822	
6725	6823	
6726	6824	
6727	6825	
6728	6826	
6729	6827	
6730	6828	
6731	6829	
6732	6830	
6733	6831	
6734	6832	
6735	6833	
6736	6834	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : K.T.S. GENERAL HOSPITAL, GONDIA

Date:-

Sr . No.	Seat No.	Signature of Student
6737	5227	
6738	5228	
6739	5229	
6740	5230	
6741	5231	
6742	5232	
6743	5233	
6744	5234	
6745	5235	
6746	5236	
6747	5237	
6748	5238	
6749	5239	
6750	5240	
6751	5241	
6752	5242	
6753	5243	
6754	5244	
6755	5245	
6756	5246	
6757	5247	
6758	5248	
6759	5249	
6760	5250	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : K.T.S. GENERAL HOSPITAL, GONDIA

Date:-

Sr . No.	Seat No.	Signature of Student
6761	5251	
6762	5252	
6763	5253	
6764	5254	
6765	5255	
6766	5256	
6767	5257	
6768	5258	
6769	5259	
6770	5260	
6771	5261	
6772	5262	
6773	5263	
6774	5264	
6775	5265	
6776	5266	
6777	5267	
6778	5268	
6779	5269	
6780	5270	
6781	5271	
6782	5272	
6783	5273	
6784	5274	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : K.T.S. GENERAL HOSPITAL, GONDIA

Date:-

Sr . No.	Seat No.	Signature of Student
6785	5275	
6786	5276	
6787	5277	
6788	5278	
6789	5279	
6790	5280	
6791	5281	
6792	5282	
6793	5283	
6794	5284	
6795	5285	
6796	5286	
6797	5287	
6798	5288	
6799	5289	
6800	5290	
6801	5291	
6802	5292	
6803	5293	
6804	5294	
6805	5295	
6806	5296	
6807	5297	
6808	5298	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : K.T.S. GENERAL HOSPITAL, GONDIA

Date:-

Sr . No.	Seat No.	Signature of Student
6809	7107	
6810	7108	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, WASHIM

Date:-

Sr . No.	Seat No.	Signature of Student
6811	5299	
6812	5300	
6813	5301	
6814	5302	
6815	5303	
6816	5304	
6817	5305	
6818	5306	
6819	5307	
6820	5308	
6821	5309	
6822	5310	
6823	5311	
6824	5312	
6825	5313	
6826	5314	
6827	5315	
6828	5316	
6829	5317	
6830	5318	
6831	5319	
6832	5320	
6833	5321	
6834	5322	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, WASHIM

Date:-

Sr . No.	Seat No.	Signature of Student
6835	5323	
6836	5324	
6837	5325	
6838	5326	
6839	5327	
6840	5328	
6841	5329	
6842	5330	
6843	5331	
6844	5332	
6845	5333	
6846	5334	
6847	5335	
6848	5336	
6849	5337	
6850	5338	
6851	5339	
6852	5340	
6853	5341	
6854	5342	
6855	5343	
6856	5344	
6857	5345	
6858	5346	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, WASHIM

Date:-

Sr . No.	Seat No.	Signature of Student
6859	5347	
6860	5348	
6861	5349	
6862	5350	
6863	5351	
6864	5352	
6865	5353	
6866	5354	
6867	5355	
6868	5356	
6869	5357	
6870	5358	
6871	5359	
6872	5360	
6873	5361	
6874	5362	
6875	5363	
6876	5364	
6877	5365	
6878	5366	
6879	5367	
6880	5368	
6881	5369	
6882	5370	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : S.R.T.R. Govt. Med. College Hospital, Ambejogai

Date:-

Sr . No.	Seat No.	Signature of Student
6883	6835	
6884	6836	
6885	6837	
6886	6838	
6887	6839	
6888	6840	
6889	6841	
6890	6842	
6891	6843	
6892	6844	
6893	6845	
6894	6846	
6895	6847	
6896	6848	
6897	6849	
6898	6850	
6899	6851	
6900	6852	
6901	6853	
6902	6854	
6903	6855	
6904	6856	
6905	6857	
6906	6858	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : S.R.T.R. Govt. Med. College Hospital, Ambejogai

Date:-

Sr . No.	Seat No.	Signature of Student
6907	6859	
6908	6860	
6909	6861	
6910	6862	
6911	6863	
6912	6864	
6913	6865	
6914	6866	
6915	6867	
6916	6868	
6917	6869	
6918	6870	
6919	6871	
6920	6872	
6921	6873	
6922	6874	
6923	6875	
6924	6876	
6925	6877	
6926	6878	
6927	6879	
6928	6880	
6929	6881	
6930	6882	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : S.R.T.R. Govt. Med. College Hospital, Ambejogai

Date:-

Sr . No.	Seat No.	Signature of Student
6931	6883	
6932	6884	
6933	6885	
6934	6886	
6935	6887	
6936	6888	
6937	6889	
6938	6890	
6939	6891	
6940	6892	
6941	6893	
6942	6894	
6943	6895	
6944	6896	
6945	6897	
6946	6898	
6947	6899	
6948	6900	
6949	6901	
6950	6902	
6951	6903	
6952	6904	
6953	6905	
6954	6906	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20

Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR

Subject : HEALTH CENTRE MANAGEMENT

Center Name : S.R.T.R. Govt. Med. College Hospital, Ambejogai

Date:-

Sr . No.	Seat No.	Signature of Student
6955	6907	
6956	6908	
6957	6909	
6958	6910	
6959	6911	
6960	6912	
6961	6913	
6962	6914	
6963	6915	
6964	6916	
6965	6917	
6966	6918	
6967	6919	
6968	7109	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, HINGOLI

Date:-

Sr . No.	Seat No.	Signature of Student
6969	6920	
6970	6921	
6971	6922	
6972	6923	
6973	6924	
6974	6925	
6975	6926	
6976	6927	
6977	6928	
6978	6929	
6979	6930	
6980	6931	
6981	6932	
6982	6933	
6983	6934	
6984	6935	
6985	6936	
6986	6937	
6987	6938	
6988	6939	
6989	6940	
6990	6941	
6991	6942	
6992	6943	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, HINGOLI

Date:-

Sr . No.	Seat No.	Signature of Student
6993	6944	
6994	6945	
6995	6946	
6996	6947	
6997	6948	
6998	6949	
6999	6950	
7000	6951	
7001	6952	
7002	6953	
7003	6954	
7004	6955	
7005	6956	
7006	6957	
7007	6958	
7008	6959	
7009	6960	
7010	6961	
7011	6962	
7012	6963	
7013	6964	
7014	6965	
7015	6966	
7016	6967	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
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Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, HINGOLI

Date:-

Sr . No.	Seat No.	Signature of Student
7017	6968	
7018	6969	
7019	6970	
7020	6971	
7021	6972	
7022	6973	
7023	6974	
7024	6975	
7025	6976	
7026	6977	
7027	6978	
7028	6979	
7029	6980	
7030	6981	
7031	6982	
7032	6983	
7033	6984	
7034	6985	
7035	6986	
7036	6987	
7037	6988	
7038	6989	
7039	6990	
7040	6991	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, HINGOLI

Date:-

Sr . No.	Seat No.	Signature of Student
7041	6992	
7042	6993	
7043	6994	
7044	6995	
7045	6996	
7046	6997	
7047	6998	
7048	6999	
7049	7000	
7050	7001	
7051	7002	
7052	7003	
7053	7004	
7054	7005	
7055	7006	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, BHABHULGAON, LATUR

Date:-

Sr . No.	Seat No.	Signature of Student
7056	7007	
7057	7008	
7058	7009	
7059	7010	
7060	7011	
7061	7012	
7062	7013	
7063	7014	
7064	7015	
7065	7016	
7066	7017	
7067	7018	
7068	7019	
7069	7020	
7070	7021	
7071	7022	
7072	7023	
7073	7024	
7074	7025	
7075	7026	
7076	7027	
7077	7028	
7078	7029	
7079	7030	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
Examination Name : AUXILLARY NURSE MIDWIFERY SECOND YEAR
Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, BHABHULGAON, LATUR

Date:-

Sr . No.	Seat No.	Signature of Student
7080	7031	
7081	7032	
7082	7033	
7083	7034	
7084	7035	
7085	7036	
7086	7037	
7087	7038	
7088	7039	
7089	7040	
7090	7041	
7091	7042	
7092	7043	
7093	7044	
7094	7045	
7095	7046	
7096	7047	
7097	7048	
7098	7049	
7099	7050	
7100	7051	
7101	7052	
7102	7053	
7103	7054	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2019-20
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Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, BHABHULGAON, LATUR

Date:-

Sr . No.	Seat No.	Signature of Student
7104	7055	
7105	7056	
7106	7057	
7107	7058	
7108	7059	
7109	7060	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Subject : HEALTH CENTRE MANAGEMENT
Center Name : GENERAL HOSPITAL, BHABHULGAON, LATUR

Date:-

Sr . No.	Seat No.	Signature of Student
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Signature of centre incharge