

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : V.S.Gen.Hospital, Thane

Date:-

Sr . No.	Seat No.	Signature of Student
1	582	
2	583	
3	584	
4	585	
5	586	
6	587	
7	588	
8	589	
9	590	
10	591	
11	592	
12	593	
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16	597	
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18	599	
19	600	
20	601	
21	602	
22	603	
23	604	
24	605	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
25	606	
26	607	
27	608	
28	609	
29	610	
30	611	
31	612	
32	613	
33	614	
34	615	
35	616	
36	617	
37	618	
38	619	
39	620	
40	621	
41	622	
42	623	
43	624	
44	625	
45	626	
46	627	
47	628	
48	629	

Signature of centre incharge

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

Date:-

Sr . No.	Seat No.	Signature of Student
49	630	
50	631	
51	632	
52	633	
53	634	
54	635	
55	636	
56	637	
57	638	
58	639	
59	640	
60	641	
61	642	
62	643	
63	644	
64	645	
65	646	
66	647	
67	648	
68	649	
69	650	
70	651	
71	652	
72	653	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
73	654	
74	655	
75	656	
76	657	
77	658	
78	659	
79	660	
80	661	
81	662	
82	663	
83	664	
84	665	
85	666	
86	667	
87	668	
88	669	
89	670	
90	671	
91	672	
92	673	
93	674	
94	675	
95	676	
96	677	

Signature of centre incharge

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

Date:-

Sr . No.	Seat No.	Signature of Student
97	678	
98	679	
99	680	
100	681	
101	682	
102	683	
103	684	
104	685	
105	686	
106	687	
107	688	
108	689	
109	690	
110	691	
111	692	
112	693	
113	694	
114	695	
115	696	
116	697	
117	698	
118	699	
119	700	
120	701	

Signature of centre incharge

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Sr . No.	Seat No.	Signature of Student
121	702	
122	703	
123	704	
124	705	
125	706	
126	707	
127	708	
128	709	
129	710	
130	711	
131	712	
132	713	
133	714	
134	715	
135	716	
136	717	
137	718	
138	719	
139	720	
140	721	
141	722	
142	723	
143	724	
144	725	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
145	726	
146	727	
147	728	
148	729	
149	730	
150	7988	

Signature of centre incharge

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Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Alibag,

Date:-

Sr . No.	Seat No.	Signature of Student
151	731	
152	732	
153	733	
154	734	
155	735	
156	736	
157	737	
158	738	
159	739	
160	740	
161	741	
162	742	
163	743	
164	744	
165	745	
166	746	
167	747	
168	748	
169	749	
170	750	
171	751	
172	752	
173	753	
174	754	

Signature of centre incharge

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Center Name : GENERAL HOSPITAL, Alibag,

Date:-

Sr . No.	Seat No.	Signature of Student
175	755	
176	756	
177	757	
178	758	
179	759	
180	760	
181	761	
182	762	
183	763	
184	764	
185	765	
186	766	
187	767	
188	768	
189	769	
190	770	
191	771	
192	772	
193	773	
194	774	
195	775	
196	776	
197	777	
198	778	

Signature of centre incharge

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Center Name : GENERAL HOSPITAL, Alibag,

Date:-

Sr . No.	Seat No.	Signature of Student
199	779	
200	780	
201	781	
202	782	
203	783	
204	784	
205	785	
206	786	
207	787	
208	788	
209	789	
210	790	
211	791	
212	792	
213	793	
214	794	
215	795	
216	796	
217	7926	
218	7927	
219	7928	
220	7929	
221	7930	
222	7931	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
223	7932	
224	7933	
225	7934	
226	7935	
227	7936	
228	7937	
229	7938	
230	7939	
231	7940	
232	7941	
233	7942	
234	7943	
235	7944	
236	7945	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Ratnagiri

Date:-

Sr . No.	Seat No.	Signature of Student
237	797	
238	798	
239	799	
240	800	
241	801	
242	802	
243	803	
244	804	
245	805	
246	806	
247	807	
248	808	
249	809	
250	810	
251	811	
252	812	
253	813	
254	814	
255	815	
256	816	
257	817	
258	818	
259	819	
260	820	

Signature of centre incharge

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Center Name : GENERAL HOSPITAL, Ratnagiri

Date:-

Sr . No.	Seat No.	Signature of Student
261	821	
262	822	
263	823	
264	824	
265	825	
266	826	
267	827	
268	828	
269	829	
270	830	
271	831	
272	832	
273	833	
274	834	
275	835	
276	836	
277	837	
278	838	
279	839	
280	840	
281	841	
282	842	
283	843	
284	844	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Ratnagiri

Date:-

Sr . No.	Seat No.	Signature of Student
285	845	
286	846	
287	847	
288	848	
289	849	
290	850	
291	851	
292	852	
293	853	
294	854	
295	855	
296	856	
297	857	
298	858	
299	859	
300	860	
301	861	
302	862	
303	863	
304	864	
305	865	
306	866	
307	867	
308	868	

Signature of centre incharge

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Center Name : GENERAL HOSPITAL, Ratnagiri

Date:-

Sr . No.	Seat No.	Signature of Student
309	869	
310	870	
311	871	
312	872	
313	873	
314	874	
315	875	
316	876	
317	877	
318	878	
319	879	
320	880	
321	881	
322	882	
323	883	
324	884	
325	885	
326	886	
327	887	
328	888	
329	889	
330	890	
331	891	
332	892	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
333	893	
334	894	
335	895	
336	896	
337	897	
338	898	
339	899	
340	900	
341	901	
342	902	
343	903	
344	904	
345	905	
346	906	
347	907	
348	908	
349	909	
350	910	
351	911	
352	912	
353	913	
354	914	
355	915	
356	916	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
357	917	
358	918	
359	919	
360	920	
361	921	
362	922	
363	923	
364	924	
365	925	
366	926	
367	927	
368	928	
369	929	
370	930	
371	931	
372	932	
373	933	
374	934	
375	935	
376	936	
377	937	
378	938	
379	939	
380	940	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Ratnagiri

Date:-

Sr . No.	Seat No.	Signature of Student
381	941	
382	942	
383	943	
384	944	
385	945	
386	946	
387	947	
388	948	
389	949	
390	950	
391	951	
392	952	
393	953	
394	954	
395	955	
396	956	
397	957	
398	958	
399	959	
400	960	
401	961	
402	962	
403	963	
404	964	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Ratnagiri

Date:-

Sr . No.	Seat No.	Signature of Student
405	965	
406	966	
407	967	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Nasik

Date:-

Sr . No.	Seat No.	Signature of Student
408	968	
409	969	
410	970	
411	971	
412	972	
413	973	
414	974	
415	975	
416	976	
417	977	
418	978	
419	979	
420	980	
421	981	
422	982	
423	983	
424	984	
425	985	
426	986	
427	987	
428	988	
429	989	
430	990	
431	991	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Nasik

Date:-

Sr . No.	Seat No.	Signature of Student
432	992	
433	993	
434	994	
435	995	
436	996	
437	997	
438	998	
439	999	
440	1000	
441	1001	
442	1002	
443	1003	
444	1004	
445	1005	
446	1006	
447	1007	
448	1008	
449	1009	
450	1010	
451	1011	
452	1012	
453	1013	
454	1014	
455	1015	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
456	1016	
457	1017	
458	1018	
459	1019	
460	1020	
461	1021	
462	1022	
463	1023	
464	1024	
465	1025	
466	1026	
467	1027	
468	1028	
469	1029	
470	1030	
471	1031	
472	1032	
473	1033	
474	1034	
475	1035	
476	1036	
477	1037	
478	1038	
479	1039	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
480	1040	
481	1041	
482	1042	
483	1043	
484	1044	
485	1045	
486	1046	
487	1047	
488	1048	
489	1049	
490	1050	
491	1051	
492	1052	
493	1053	
494	1054	
495	1055	
496	1056	
497	1057	
498	1058	
499	1059	
500	1060	
501	1061	
502	1062	
503	1063	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
504	1064	
505	1065	
506	1066	
507	1067	
508	1068	
509	1069	
510	1070	
511	1071	
512	1072	
513	1073	
514	1074	
515	1075	
516	1076	
517	1077	
518	1078	
519	1079	
520	1080	
521	1081	
522	1082	
523	1083	
524	1084	
525	1085	
526	1086	
527	1087	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
528	1088	
529	1089	
530	1090	
531	1091	
532	1092	
533	1093	
534	1094	
535	1095	
536	1096	
537	1097	
538	1098	
539	1099	
540	1100	
541	1101	
542	1102	
543	1103	
544	1104	
545	1105	
546	1106	
547	1107	
548	1108	
549	1109	
550	1110	
551	1111	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
552	1112	
553	1113	
554	1114	
555	1115	
556	1116	
557	1117	
558	1118	
559	1119	
560	1120	
561	1121	
562	1122	
563	1123	
564	1124	
565	1125	
566	1126	
567	1127	
568	1128	
569	1129	
570	1130	
571	1131	
572	1132	
573	1133	
574	1134	
575	1135	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
576	1136	
577	1137	
578	1138	
579	1139	
580	1140	
581	1141	
582	1142	
583	1143	
584	1144	
585	1145	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Dhule

Date:-

Sr . No.	Seat No.	Signature of Student
586	1146	
587	1147	
588	1148	
589	1149	
590	1150	
591	1151	
592	1152	
593	1153	
594	1154	
595	1155	
596	1156	
597	1157	
598	1158	
599	1159	
600	1160	
601	1161	
602	1162	
603	1163	
604	1164	
605	1165	
606	1166	
607	1167	
608	1168	
609	1169	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
610	1170	
611	1171	
612	1172	
613	1173	
614	1174	
615	1175	
616	1176	
617	1177	
618	1178	
619	1179	
620	1180	
621	1181	
622	1182	
623	1183	
624	1184	
625	1185	
626	1186	
627	1187	
628	1188	
629	1189	
630	1190	
631	1191	
632	1192	
633	1193	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
634	1194	
635	1195	
636	1196	
637	1197	
638	1198	
639	1199	
640	1200	
641	1201	
642	1202	
643	1203	
644	1204	
645	1205	
646	1206	
647	1207	
648	1208	
649	1209	
650	1210	
651	1211	
652	1212	
653	1213	
654	1214	
655	1215	
656	1216	
657	1217	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
658	1218	
659	1219	
660	1220	
661	1221	
662	1222	
663	1223	
664	1224	
665	1225	
666	1226	
667	1227	
668	1228	
669	1229	
670	1230	
671	1231	
672	1232	
673	1233	
674	1234	
675	1235	
676	1236	
677	1237	
678	1238	
679	1239	
680	1240	
681	1241	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
682	1242	
683	1243	
684	1244	
685	1245	
686	1246	
687	1247	
688	1248	
689	1249	
690	1250	
691	1251	
692	1252	
693	1253	
694	1254	
695	1255	
696	1256	
697	1257	
698	1258	
699	1259	
700	1260	
701	1261	
702	1262	
703	1263	
704	1264	
705	1265	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
706	1266	
707	1267	
708	1268	
709	1269	
710	1270	
711	1271	
712	1272	
713	1273	
714	1274	
715	1275	
716	1276	
717	1277	
718	1278	
719	1279	
720	1280	
721	1281	
722	1282	
723	1283	
724	1284	
725	1285	
726	1286	
727	1287	
728	1288	
729	1289	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Dhule

Date:-

Sr . No.	Seat No.	Signature of Student
730	1290	
731	1291	
732	1292	
733	1293	
734	1294	
735	1295	
736	1296	
737	1297	
738	1298	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, JALGAON

Date:-

Sr . No.	Seat No.	Signature of Student
739	1299	
740	1300	
741	1301	
742	1302	
743	1303	
744	1304	
745	1305	
746	1306	
747	1307	
748	1308	
749	1309	
750	1310	
751	1311	
752	1312	
753	1313	
754	1314	
755	1315	
756	1316	
757	1317	
758	1318	
759	1319	
760	1320	
761	1321	
762	1322	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, JALGAON

Date:-

Sr . No.	Seat No.	Signature of Student
763	1323	
764	1324	
765	1325	
766	1326	
767	1327	
768	1328	
769	1329	
770	1330	
771	1331	
772	1332	
773	1333	
774	1334	
775	1335	
776	1336	
777	1337	
778	1338	
779	1339	
780	1340	
781	1341	
782	1342	
783	1343	
784	1344	
785	1345	
786	1346	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, JALGAON

Date:-

Sr . No.	Seat No.	Signature of Student
787	1347	
788	1348	
789	1349	
790	1350	
791	1351	
792	1352	
793	1353	
794	1354	
795	1355	
796	1356	
797	1357	
798	1358	
799	1359	
800	1360	
801	1361	
802	1362	
803	1363	
804	1364	
805	1365	
806	1366	
807	1367	
808	1368	
809	1369	
810	1370	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, JALGAON

Date:-

Sr . No.	Seat No.	Signature of Student
811	1371	
812	1372	
813	1373	
814	1374	
815	1375	
816	1376	
817	1377	
818	1378	
819	1379	
820	1380	
821	1381	
822	1382	
823	1383	
824	1384	
825	1385	
826	1386	
827	1387	
828	1388	
829	1389	
830	1390	
831	1391	
832	1392	
833	1393	
834	1394	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, JALGAON

Date:-

Sr . No.	Seat No.	Signature of Student
835	1395	
836	1396	
837	1397	
838	1398	
839	1399	
840	1400	
841	1401	
842	1402	
843	1403	
844	1404	
845	1405	
846	1406	
847	1407	
848	1408	
849	1409	
850	1410	
851	1411	
852	1412	
853	1413	
854	1414	
855	1415	
856	1416	
857	1417	
858	1418	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, JALGAON

Date:-

Sr . No.	Seat No.	Signature of Student
859	1419	
860	1420	
861	1421	
862	1422	
863	1423	
864	1424	
865	1425	
866	1426	
867	7946	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
868	2205	
869	2206	
870	2207	
871	2208	
872	2209	
873	2210	
874	2211	
875	2212	
876	2213	
877	2214	
878	2215	
879	2216	
880	2217	
881	2218	
882	2219	
883	2220	
884	2221	
885	2222	
886	2223	
887	2224	
888	2225	
889	2226	
890	2227	
891	2228	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
892	2229	
893	2230	
894	2231	
895	2232	
896	2233	
897	2234	
898	2235	
899	2236	
900	2237	
901	2238	
902	2239	
903	2240	
904	2241	
905	2242	
906	2243	
907	2244	
908	2245	
909	2246	
910	2247	
911	2248	
912	2249	
913	2250	
914	2251	
915	2252	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
916	2253	
917	2254	
918	2255	
919	2256	
920	2257	
921	2258	
922	2259	
923	2260	
924	2261	
925	2262	
926	2263	
927	2264	
928	2265	
929	2266	
930	2267	
931	2268	
932	2269	
933	2270	
934	2271	
935	2272	
936	2273	
937	2274	
938	2275	
939	2276	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
940	2277	
941	2278	
942	2279	
943	2280	
944	2281	
945	2282	
946	2283	
947	2284	
948	2285	
949	2286	
950	2287	
951	2288	
952	2289	
953	2290	
954	2291	
955	2292	
956	2293	
957	2294	
958	2295	
959	2296	
960	2297	
961	2298	
962	2299	
963	2300	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
964	2301	
965	2302	
966	2303	
967	2304	
968	2305	
969	2306	
970	2307	
971	2308	
972	2309	
973	2310	
974	2311	
975	2312	
976	2313	
977	2314	
978	2315	
979	2316	
980	2317	
981	2318	
982	2319	
983	2320	
984	2321	
985	2322	
986	2323	
987	2324	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
988	2325	
989	2326	
990	2327	
991	2328	
992	2329	
993	2330	
994	2331	
995	2332	
996	2333	
997	2334	
998	2335	
999	2336	
1000	2337	
1001	2338	
1002	2339	
1003	2340	
1004	2341	
1005	2342	
1006	2343	
1007	2344	
1008	2345	
1009	2395	
1010	2396	
1011	2397	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
1012	2398	
1013	2399	
1014	2400	
1015	2401	
1016	2402	
1017	2403	
1018	2404	
1019	2405	
1020	2406	
1021	2407	
1022	2408	
1023	2409	
1024	2410	
1025	2411	
1026	2412	
1027	2413	
1028	2414	
1029	2415	
1030	2416	
1031	2417	
1032	2418	
1033	2419	
1034	2420	
1035	2421	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
1036	2422	
1037	2798	
1038	2799	
1039	2800	
1040	2801	
1041	2802	
1042	2803	
1043	2804	
1044	2805	
1045	2806	
1046	2807	
1047	2808	
1048	2809	
1049	2810	
1050	2811	
1051	2812	
1052	2813	
1053	2814	
1054	2815	
1055	2816	
1056	2817	
1057	4438	
1058	4439	
1059	4440	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
1060	4441	
1061	4442	
1062	4443	
1063	4444	
1064	4445	
1065	4446	
1066	4447	
1067	4448	
1068	4449	
1069	4450	
1070	4451	
1071	4452	
1072	4453	
1073	4454	
1074	4455	
1075	4456	
1076	4457	
1077	4458	
1078	4459	
1079	4460	
1080	4461	
1081	4462	
1082	4463	
1083	4464	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
1084	4465	
1085	4466	
1086	4467	
1087	4468	
1088	4469	
1089	4470	
1090	4471	
1091	4472	
1092	4473	
1093	4474	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1094	4637	
1095	4638	
1096	4639	
1097	4640	
1098	4641	
1099	4642	
1100	4643	
1101	4644	
1102	4645	
1103	4646	
1104	4647	
1105	4648	
1106	4649	
1107	4650	
1108	4651	
1109	4652	
1110	4653	
1111	4654	
1112	4655	
1113	4656	
1114	4657	
1115	4658	
1116	4659	
1117	4660	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1118	4661	
1119	4662	
1120	4663	
1121	4664	
1122	4665	
1123	4666	
1124	4667	
1125	4668	
1126	4669	
1127	4670	
1128	4671	
1129	4672	
1130	4673	
1131	4674	
1132	4675	
1133	4676	
1134	4677	
1135	4678	
1136	4679	
1137	4680	
1138	4681	
1139	4682	
1140	4683	
1141	4684	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1142	4685	
1143	4686	
1144	4687	
1145	4688	
1146	4689	
1147	4690	
1148	4691	
1149	4692	
1150	4693	
1151	4694	
1152	4695	
1153	4696	
1154	4697	
1155	4698	
1156	4699	
1157	4700	
1158	4701	
1159	4702	
1160	4703	
1161	4704	
1162	4705	
1163	4706	
1164	4707	
1165	4708	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1166	4709	
1167	4710	
1168	4711	
1169	4712	
1170	4713	
1171	4714	
1172	4715	
1173	4716	
1174	4717	
1175	4718	
1176	4719	
1177	4720	
1178	4721	
1179	4722	
1180	4723	
1181	4724	
1182	4725	
1183	4726	
1184	4727	
1185	4728	
1186	4729	
1187	4730	
1188	4731	
1189	4732	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1190	4733	
1191	4734	
1192	4735	
1193	4736	
1194	4737	
1195	4738	
1196	4739	
1197	4740	
1198	4741	
1199	4742	
1200	4743	
1201	4744	
1202	4745	
1203	4746	
1204	4747	
1205	4748	
1206	4749	
1207	4750	
1208	4751	
1209	4752	
1210	4753	
1211	4754	
1212	4755	
1213	4756	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1214	4757	
1215	4758	
1216	4759	
1217	4760	
1218	4761	
1219	4762	
1220	4763	
1221	4764	
1222	4765	
1223	4766	
1224	4767	
1225	4768	
1226	4769	
1227	4770	
1228	4771	
1229	4772	
1230	4773	
1231	4774	
1232	4775	
1233	4776	
1234	4777	
1235	4778	
1236	4779	
1237	4780	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1238	4781	
1239	4782	
1240	4783	
1241	4784	
1242	4785	
1243	4786	
1244	4787	
1245	4788	
1246	4789	
1247	4790	
1248	4791	
1249	4792	
1250	4793	
1251	4794	
1252	4795	
1253	4796	
1254	4797	
1255	4798	
1256	4799	
1257	4800	
1258	4801	
1259	4802	
1260	4803	
1261	4804	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1262	4805	
1263	4806	
1264	4807	
1265	4808	
1266	4809	
1267	4810	
1268	4811	
1269	4812	
1270	4813	
1271	4814	
1272	4815	
1273	4816	
1274	4817	
1275	4818	
1276	4819	
1277	4820	
1278	4821	
1279	4822	
1280	4823	
1281	4824	
1282	4825	
1283	4826	
1284	4827	
1285	4828	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1286	4829	
1287	4830	
1288	4831	
1289	4832	
1290	4833	
1291	4834	
1292	4835	
1293	4836	
1294	4837	
1295	4838	
1296	4839	
1297	4840	
1298	4841	
1299	4842	
1300	4843	
1301	4844	
1302	4845	
1303	4846	
1304	4847	
1305	4848	
1306	4849	
1307	4850	
1308	4851	
1309	4852	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : DIST.HOSPITAL FOR WOMEN , AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
1310	4853	
1311	4854	
1312	4855	
1313	4856	
1314	4857	
1315	4858	
1316	4859	
1317	4860	
1318	4861	
1319	4862	
1320	4863	
1321	4864	
1322	4865	
1323	4866	
1324	4867	
1325	4868	
1326	4869	
1327	4870	
1328	4871	
1329	4872	
1330	4873	
1331	4874	
1332	4875	
1333	4876	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : DIST.HOSPITAL FOR WOMEN , AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
1334	4877	
1335	4878	
1336	4879	
1337	4880	
1338	4881	
1339	4882	
1340	4883	
1341	4884	
1342	4885	
1343	4886	
1344	4887	
1345	4888	
1346	4889	
1347	4890	
1348	4891	
1349	4892	
1350	4893	
1351	4894	
1352	4895	
1353	4896	
1354	4897	
1355	4898	
1356	4899	
1357	4900	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : DIST.HOSPITAL FOR WOMEN , AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
1358	4901	
1359	4902	
1360	4903	
1361	4904	
1362	4905	
1363	4906	
1364	4907	
1365	4908	
1366	4909	
1367	4910	
1368	4911	
1369	4912	
1370	4913	
1371	4914	
1372	4915	
1373	4916	
1374	4917	
1375	4918	
1376	4919	
1377	4920	
1378	4921	
1379	4922	
1380	4923	
1381	4924	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : DIST.HOSPITAL FOR WOMEN , AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
1382	4925	
1383	4926	
1384	4927	
1385	4928	
1386	4929	
1387	4930	
1388	4931	
1389	4932	
1390	4933	
1391	4934	
1392	4935	
1393	4936	
1394	4937	
1395	4938	
1396	4939	
1397	4940	
1398	4941	
1399	4942	
1400	4943	
1401	4944	
1402	4945	
1403	4946	
1404	4947	
1405	4948	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : DIST.HOSPITAL FOR WOMEN , AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
1406	4949	
1407	4950	
1408	4951	
1409	4952	
1410	4953	
1411	4954	
1412	4955	
1413	4956	
1414	4957	
1415	4958	
1416	4959	
1417	4960	
1418	4961	
1419	4962	
1420	4963	
1421	4964	
1422	4965	
1423	4966	
1424	4967	
1425	4968	
1426	4969	
1427	4970	
1428	4971	
1429	4972	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : DIST.HOSPITAL FOR WOMEN , AMRAVATI

Date:-

Sr . No.	Seat No.	Signature of Student
1430	4973	
1431	4974	
1432	4975	
1433	4976	
1434	4977	
1435	4978	
1436	4979	
1437	4980	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,CHANDRAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1438	4981	
1439	4982	
1440	4983	
1441	4984	
1442	4985	
1443	4986	
1444	4987	
1445	4988	
1446	4989	
1447	4990	
1448	4991	
1449	4992	
1450	4993	
1451	4994	
1452	4995	
1453	4996	
1454	4997	
1455	4998	
1456	4999	
1457	5000	
1458	5001	
1459	5002	
1460	5003	
1461	5004	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,CHANDRAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1462	5005	
1463	5006	
1464	5007	
1465	5008	
1466	5009	
1467	5010	
1468	5011	
1469	5012	
1470	5013	
1471	5014	
1472	5015	
1473	5016	
1474	5017	
1475	5018	
1476	5019	
1477	5020	
1478	5021	
1479	5022	
1480	5023	
1481	5024	
1482	5025	
1483	5026	
1484	5027	
1485	5028	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,CHANDRAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1486	5029	
1487	5030	
1488	5031	
1489	5032	
1490	5033	
1491	5034	
1492	5035	
1493	5036	
1494	5037	
1495	5038	
1496	5039	
1497	5040	
1498	5041	
1499	5042	
1500	5043	
1501	5044	
1502	5045	
1503	5046	
1504	5047	
1505	5048	
1506	5049	
1507	5050	
1508	5051	
1509	5052	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,CHANDRAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1510	5053	
1511	5054	
1512	5055	
1513	5056	
1514	5057	
1515	5058	
1516	5059	
1517	5060	
1518	5061	
1519	5062	
1520	5063	
1521	5064	
1522	5065	
1523	5066	
1524	5067	
1525	5068	
1526	5069	
1527	5070	
1528	5071	
1529	5072	
1530	5073	
1531	5074	
1532	5075	
1533	5076	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,CHANDRAPUR

Date:-

Sr . No.	Seat No.	Signature of Student
1534	5077	
1535	5078	
1536	5079	
1537	5080	
1538	5081	
1539	5082	
1540	5083	
1541	5084	
1542	5085	
1543	5086	
1544	5087	
1545	5088	
1546	5089	
1547	5090	
1548	5091	
1549	5092	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, BULDANA

Date:-

Sr . No.	Seat No.	Signature of Student
1550	5093	
1551	5094	
1552	5095	
1553	5096	
1554	5097	
1555	5098	
1556	5099	
1557	5100	
1558	5101	
1559	5102	
1560	5103	
1561	5104	
1562	5105	
1563	5106	
1564	5107	
1565	5108	
1566	5109	
1567	5110	
1568	5111	
1569	5112	
1570	5113	
1571	5114	
1572	5115	
1573	5116	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, BULDANA

Date:-

Sr . No.	Seat No.	Signature of Student
1574	5117	
1575	5118	
1576	5119	
1577	5120	
1578	5121	
1579	5122	
1580	5123	
1581	5124	
1582	5125	
1583	5126	
1584	5127	
1585	5128	
1586	5129	
1587	5130	
1588	5131	
1589	5132	
1590	5133	
1591	5134	
1592	5135	
1593	5136	
1594	5137	
1595	5138	
1596	5139	
1597	5140	

Signature of centre incharge

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Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, BULDANA

Date:-

Sr . No.	Seat No.	Signature of Student
1598	5141	
1599	5142	
1600	5143	
1601	5144	
1602	5145	
1603	5146	
1604	5147	
1605	5148	
1606	5149	
1607	5150	
1608	5151	
1609	5152	
1610	5153	
1611	5154	
1612	5155	
1613	5156	
1614	5157	
1615	5158	
1616	5159	
1617	5160	
1618	5161	
1619	5162	
1620	5163	
1621	5164	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, BULDANA

Date:-

Sr . No.	Seat No.	Signature of Student
1622	5165	
1623	5166	
1624	5167	
1625	5168	
1626	5169	
1627	5170	
1628	5171	
1629	5172	
1630	5173	
1631	5174	
1632	5175	
1633	5176	
1634	5177	
1635	5178	
1636	5179	
1637	5180	
1638	5181	
1639	5182	
1640	5183	
1641	5184	
1642	5185	
1643	5186	
1644	5187	
1645	5188	

Signature of centre incharge

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Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, BULDANA

Date:-

Sr . No.	Seat No.	Signature of Student
1646	5189	
1647	5190	
1648	5191	
1649	5192	
1650	5193	
1651	5194	
1652	5195	
1653	5196	
1654	5197	
1655	5198	
1656	5199	
1657	5200	
1658	5201	
1659	5202	
1660	5203	
1661	5204	
1662	5205	
1663	5206	
1664	5207	
1665	5208	
1666	5209	
1667	5210	
1668	5211	
1669	5212	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, BULDANA

Date:-

Sr . No.	Seat No.	Signature of Student
1670	5213	
1671	5214	
1672	5215	
1673	5216	
1674	5217	
1675	5218	
1676	5219	
1677	5220	
1678	5221	
1679	5222	
1680	5223	
1681	5224	
1682	5225	
1683	5226	
1684	5227	
1685	5228	
1686	5229	
1687	5230	
1688	5231	
1689	5232	
1690	5233	
1691	5234	
1692	5235	
1693	5236	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, BULDANA

Date:-

Sr . No.	Seat No.	Signature of Student
1694	5237	
1695	5238	
1696	5239	
1697	5240	
1698	5241	
1699	5242	
1700	5243	
1701	5244	
1702	5245	
1703	5246	
1704	5247	
1705	5248	
1706	5249	
1707	5250	
1708	5251	
1709	5252	
1710	5253	
1711	5254	
1712	5255	
1713	5256	

Signature of centre incharge

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Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL GADCHIROLI

Date:-

Sr . No.	Seat No.	Signature of Student
1714	5257	
1715	5258	
1716	5259	
1717	5260	
1718	5261	
1719	5262	
1720	5263	
1721	5264	
1722	5265	
1723	5266	
1724	5267	
1725	5268	
1726	5269	
1727	5270	
1728	5271	
1729	5272	
1730	5273	
1731	5274	
1732	5275	
1733	5276	
1734	5277	
1735	5278	
1736	5279	
1737	5280	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL GADCHIROLI

Date:-

Sr . No.	Seat No.	Signature of Student
1738	5281	
1739	5282	
1740	5283	
1741	5284	
1742	5285	
1743	5286	
1744	5287	
1745	5288	
1746	5289	
1747	5290	
1748	5291	
1749	5292	
1750	5293	
1751	5294	
1752	5295	
1753	5296	
1754	5297	
1755	5298	
1756	5299	
1757	5300	
1758	5301	
1759	5302	
1760	5303	
1761	5304	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL GADCHIROLI

Date:-

Sr . No.	Seat No.	Signature of Student
1762	5305	
1763	5306	
1764	5307	
1765	5308	
1766	5309	
1767	5310	
1768	5311	
1769	5312	
1770	5313	
1771	5314	
1772	5315	
1773	5316	
1774	5317	
1775	5318	
1776	5319	
1777	5320	
1778	5321	
1779	5322	
1780	5323	
1781	5324	
1782	5325	
1783	5326	
1784	5327	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1785	6106	
1786	6107	
1787	6108	
1788	6109	
1789	6110	
1790	6111	
1791	6112	
1792	6113	
1793	6114	
1794	6115	
1795	6116	
1796	6117	
1797	6118	
1798	6119	
1799	6120	
1800	6121	
1801	6122	
1802	6123	
1803	6124	
1804	6125	
1805	6126	
1806	6127	
1807	6128	
1808	6129	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1809	6130	
1810	6131	
1811	6132	
1812	6133	
1813	6134	
1814	6135	
1815	6136	
1816	6137	
1817	6138	
1818	6139	
1819	6140	
1820	6141	
1821	6142	
1822	6143	
1823	6144	
1824	6145	
1825	6146	
1826	6147	
1827	6148	
1828	6149	
1829	6150	
1830	6151	
1831	6152	
1832	6153	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1833	6154	
1834	6155	
1835	6156	
1836	6157	
1837	6158	
1838	6159	
1839	6160	
1840	6161	
1841	6162	
1842	6163	
1843	6164	
1844	6165	
1845	6166	
1846	6167	
1847	6168	
1848	6169	
1849	6170	
1850	6171	
1851	6172	
1852	6173	
1853	6174	
1854	6175	
1855	6176	
1856	6177	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1857	6178	
1858	6179	
1859	6180	
1860	6181	
1861	6182	
1862	6183	
1863	6184	
1864	6185	
1865	6186	
1866	6187	
1867	6188	
1868	6189	
1869	6190	
1870	6191	
1871	6192	
1872	6193	
1873	6194	
1874	6195	
1875	6196	
1876	6197	
1877	6198	
1878	6199	
1879	6200	
1880	6201	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1881	6202	
1882	6203	
1883	6204	
1884	6205	
1885	6206	
1886	6207	
1887	6208	
1888	6209	
1889	6210	
1890	6211	
1891	6212	
1892	6213	
1893	6214	
1894	6215	
1895	6216	
1896	6217	
1897	6218	
1898	6219	
1899	6220	
1900	6221	
1901	6222	
1902	6223	
1903	6224	
1904	6225	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1905	6226	
1906	6227	
1907	6228	
1908	6229	
1909	6230	
1910	6231	
1911	6232	
1912	6233	
1913	6234	
1914	6235	
1915	6236	
1916	6237	
1917	6238	
1918	6239	
1919	6240	
1920	6241	
1921	6242	
1922	6243	
1923	6244	
1924	6245	
1925	6246	
1926	6247	
1927	6248	
1928	6249	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1929	6250	
1930	6251	
1931	6252	
1932	6253	
1933	6254	
1934	6255	
1935	6256	
1936	6257	
1937	6258	
1938	6259	
1939	6260	
1940	6261	
1941	6262	
1942	6263	
1943	6264	
1944	6265	
1945	6266	
1946	6267	
1947	6268	
1948	6269	
1949	6270	
1950	6271	
1951	6272	
1952	6273	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1953	6274	
1954	6275	
1955	6276	
1956	6277	
1957	6278	
1958	6279	
1959	6280	
1960	6281	
1961	6282	
1962	6283	
1963	6284	
1964	6285	
1965	6307	
1966	6308	
1967	6309	
1968	6310	
1969	6311	
1970	6312	
1971	6313	
1972	6314	
1973	6315	
1974	6316	
1975	6317	
1976	6318	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
1977	6319	
1978	6320	
1979	6321	
1980	6322	
1981	6323	
1982	6324	
1983	6325	
1984	6326	
1985	6327	
1986	6328	
1987	6329	
1988	6330	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Osmanabad

Date:-

Sr . No.	Seat No.	Signature of Student
1989	6331	
1990	6332	
1991	6333	
1992	6334	
1993	6335	
1994	6336	
1995	6337	
1996	6338	
1997	6339	
1998	6340	
1999	6341	
2000	6342	
2001	6343	
2002	6344	
2003	6345	
2004	6346	
2005	6347	
2006	6348	
2007	6349	
2008	6350	
2009	6351	
2010	6352	
2011	6353	
2012	6354	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,Osmanabad

Date:-

Sr . No.	Seat No.	Signature of Student
2013	6355	
2014	6356	
2015	6357	
2016	6358	
2017	6359	
2018	6360	
2019	6361	
2020	6362	
2021	6363	
2022	6364	
2023	6365	
2024	6366	
2025	6367	
2026	6368	
2027	6369	
2028	6370	
2029	6371	
2030	6372	
2031	6373	
2032	6374	
2033	6375	
2034	6376	
2035	6377	
2036	6378	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,Osmanabad

Date:-

Sr . No.	Seat No.	Signature of Student
2037	6379	
2038	6380	
2039	6381	
2040	6382	
2041	6383	
2042	6384	
2043	6385	
2044	6386	
2045	6387	
2046	6388	
2047	6389	
2048	6390	
2049	6391	
2050	6392	
2051	6393	
2052	6394	
2053	6395	
2054	6396	
2055	6397	
2056	6398	
2057	6399	
2058	6400	
2059	6401	
2060	6402	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,Osmanabad

Date:-

Sr . No.	Seat No.	Signature of Student
2061	6403	
2062	6404	
2063	6405	
2064	6406	
2065	6407	
2066	6408	
2067	6409	
2068	6410	
2069	6411	
2070	6412	
2071	6413	
2072	6414	
2073	6415	
2074	6416	
2075	6417	
2076	6418	
2077	6419	
2078	6420	
2079	6421	
2080	6422	
2081	6423	
2082	6424	
2083	6425	
2084	6426	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : GENERAL HOSPITAL, Osmanabad

Date:-

Sr . No.	Seat No.	Signature of Student
2085	6427	
2086	6428	
2087	6429	
2088	6430	
2089	6431	
2090	6432	
2091	6433	
2092	6434	
2093	6435	
2094	6436	
2095	6437	
2096	6438	
2097	6439	
2098	6440	
2099	6441	
2100	6442	
2101	6443	
2102	6444	
2103	6445	
2104	6446	
2105	6447	
2106	6448	
2107	6449	
2108	6450	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Osmanabad

Date:-

Sr . No.	Seat No.	Signature of Student
2109	6451	
2110	6452	
2111	6453	
2112	6454	
2113	6455	
2114	6456	
2115	6457	
2116	6458	
2117	6459	
2118	6460	
2119	6461	
2120	6462	
2121	6463	
2122	6464	
2123	6465	
2124	6466	
2125	6467	
2126	6468	
2127	6469	
2128	6470	
2129	6471	
2130	6472	
2131	6473	
2132	6474	

Signature of centre incharge

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Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL,Osmanabad

Date:-

Sr . No.	Seat No.	Signature of Student
2133	6475	
2134	6476	
2135	6477	
2136	6478	
2137	6479	
2138	6480	
2139	6481	
2140	6482	
2141	6483	
2142	6484	
2143	6485	
2144	6486	
2145	6487	
2146	6488	
2147	6489	
2148	6490	
2149	6491	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : B.Y.L.NAIR CHA. HOSP, MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
2150	1	
2151	2	
2152	3	
2153	4	
2154	5	
2155	6	
2156	7	
2157	8	
2158	9	
2159	10	
2160	11	
2161	12	
2162	13	
2163	14	
2164	15	
2165	16	
2166	17	
2167	18	
2168	19	
2169	20	
2170	21	
2171	22	
2172	23	
2173	24	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : B.Y.L.NAIR CHA. HOSP, MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
2174	25	
2175	26	
2176	27	
2177	28	
2178	29	
2179	30	
2180	31	
2181	32	
2182	33	
2183	34	
2184	35	
2185	36	
2186	37	
2187	38	
2188	39	
2189	40	
2190	41	
2191	42	
2192	43	
2193	44	
2194	45	
2195	46	
2196	47	
2197	48	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : B.Y.L.NAIR CHA. HOSP, MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
2198	49	
2199	50	
2200	51	
2201	52	
2202	53	
2203	54	
2204	55	
2205	56	
2206	57	
2207	58	
2208	59	
2209	60	
2210	61	
2211	62	
2212	63	
2213	64	
2214	65	
2215	66	
2216	67	
2217	68	
2218	69	
2219	70	
2220	71	
2221	72	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : B.Y.L.NAIR CHA. HOSP, MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
2222	73	
2223	74	
2224	75	
2225	76	
2226	77	
2227	78	
2228	79	
2229	80	
2230	81	
2231	82	
2232	83	
2233	84	
2234	85	
2235	86	
2236	87	
2237	88	
2238	89	
2239	90	
2240	91	
2241	92	
2242	93	
2243	94	
2244	95	
2245	96	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : B.Y.L.NAIR CHA. HOSP, MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
2246	97	
2247	98	
2248	99	
2249	100	
2250	101	
2251	102	
2252	103	
2253	104	
2254	105	
2255	106	
2256	107	
2257	108	
2258	109	
2259	110	
2260	111	
2261	112	
2262	113	
2263	114	
2264	115	
2265	116	
2266	117	
2267	118	
2268	119	
2269	120	

Signature of centre incharge

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Academic Year : 2018-19
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Subject : COMMUNITY HEALTH NURSING
Center Name : B.Y.L.NAIR CHA. HOSP, MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
2270	121	
2271	122	
2272	123	
2273	124	
2274	125	
2275	126	
2276	127	
2277	128	
2278	129	
2279	130	
2280	131	
2281	132	
2282	133	
2283	134	
2284	135	
2285	136	
2286	137	
2287	138	
2288	139	
2289	140	
2290	141	
2291	142	
2292	143	
2293	144	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : B.Y.L.NAIR CHA. HOSP, MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
2294	145	
2295	146	
2296	147	
2297	148	
2298	149	
2299	150	
2300	151	
2301	152	
2302	153	
2303	154	
2304	155	
2305	156	
2306	157	
2307	158	
2308	159	
2309	160	
2310	161	
2311	162	
2312	163	
2313	164	
2314	165	
2315	166	
2316	167	
2317	168	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : B.Y.L.NAIR CHA. HOSP, MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
2318	169	
2319	170	
2320	171	
2321	172	
2322	173	
2323	174	
2324	175	
2325	176	
2326	177	
2327	178	
2328	179	
2329	180	
2330	181	
2331	182	
2332	183	
2333	184	
2334	185	
2335	186	
2336	187	

Signature of centre incharge

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Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : K.E.M. HOSPITAL , MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
2337	188	
2338	189	
2339	190	
2340	191	
2341	192	
2342	193	
2343	194	
2344	195	
2345	196	
2346	197	
2347	198	
2348	199	
2349	200	
2350	201	
2351	202	
2352	203	
2353	204	
2354	205	
2355	206	
2356	207	
2357	208	
2358	209	
2359	210	
2360	211	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : K.E.M. HOSPITAL , MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
2361	212	
2362	213	
2363	214	
2364	215	
2365	216	
2366	217	
2367	218	
2368	219	
2369	220	
2370	221	
2371	222	
2372	223	
2373	224	
2374	225	
2375	226	
2376	227	
2377	228	
2378	229	
2379	230	
2380	231	
2381	232	
2382	233	
2383	234	
2384	235	

Signature of centre incharge

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Academic Year : 2018-19
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Subject : COMMUNITY HEALTH NURSING
Center Name : K.E.M. HOSPITAL , MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
2385	236	
2386	237	
2387	238	
2388	239	
2389	240	
2390	241	
2391	242	
2392	243	
2393	244	
2394	245	
2395	246	
2396	247	
2397	248	
2398	249	
2399	250	
2400	251	
2401	252	
2402	253	
2403	254	
2404	255	
2405	256	
2406	257	
2407	258	
2408	259	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : K.E.M. HOSPITAL , MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
2409	260	
2410	261	
2411	262	
2412	263	
2413	264	
2414	265	
2415	266	
2416	267	
2417	268	
2418	269	
2419	270	
2420	271	
2421	272	
2422	273	
2423	274	
2424	275	
2425	276	
2426	277	
2427	278	
2428	279	
2429	280	
2430	281	
2431	282	
2432	283	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Subject : COMMUNITY HEALTH NURSING
Center Name : K.E.M. HOSPITAL , MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
2433	284	
2434	285	
2435	286	
2436	287	
2437	288	
2438	289	
2439	290	
2440	291	
2441	292	
2442	293	
2443	294	
2444	295	
2445	296	
2446	297	
2447	298	
2448	299	
2449	300	
2450	301	
2451	302	
2452	303	
2453	304	
2454	305	
2455	306	
2456	307	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Subject : COMMUNITY HEALTH NURSING
Center Name : K.E.M. HOSPITAL , MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
2457	308	
2458	309	
2459	310	
2460	311	
2461	312	
2462	313	
2463	314	
2464	315	
2465	316	
2466	317	
2467	318	
2468	319	
2469	320	
2470	321	
2471	322	
2472	323	
2473	324	
2474	325	
2475	326	
2476	327	
2477	328	
2478	329	
2479	330	
2480	331	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
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Subject : COMMUNITY HEALTH NURSING
Center Name : K.E.M. HOSPITAL , MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
2481	332	
2482	333	
2483	334	
2484	335	
2485	336	
2486	337	
2487	338	
2488	339	
2489	340	
2490	341	
2491	342	
2492	343	
2493	344	
2494	345	
2495	346	
2496	347	
2497	348	
2498	349	
2499	350	
2500	351	
2501	352	
2502	353	
2503	354	
2504	355	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Subject : COMMUNITY HEALTH NURSING

Center Name : K.E.M. HOSPITAL , MUMBAI

Date:-

Sr . No.	Seat No.	Signature of Student
2505	356	
2506	357	
2507	358	
2508	359	
2509	360	
2510	361	
2511	362	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : L.T.M.G.Hospital, Sion, Mumbai

Date:-

Sr . No.	Seat No.	Signature of Student
2512	363	
2513	364	
2514	365	
2515	366	
2516	367	
2517	368	
2518	369	
2519	370	
2520	371	
2521	372	
2522	373	
2523	374	
2524	375	
2525	376	
2526	377	
2527	378	
2528	379	
2529	380	
2530	381	
2531	382	
2532	383	
2533	384	
2534	385	
2535	386	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : L.T.M.G.Hospital, Sion, Mumbai

Date:-

Sr . No.	Seat No.	Signature of Student
2536	387	
2537	388	
2538	389	
2539	390	
2540	391	
2541	392	
2542	393	
2543	394	
2544	395	
2545	396	
2546	397	
2547	398	
2548	399	
2549	400	
2550	401	
2551	402	
2552	403	
2553	404	
2554	405	
2555	406	
2556	407	
2557	408	
2558	409	
2559	410	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : L.T.M.G.Hospital, Sion, Mumbai

Date:-

Sr . No.	Seat No.	Signature of Student
2560	411	
2561	412	
2562	413	
2563	414	
2564	415	
2565	416	
2566	417	
2567	418	
2568	419	
2569	420	
2570	421	
2571	422	
2572	423	
2573	424	
2574	425	
2575	426	
2576	427	
2577	428	
2578	429	
2579	430	
2580	431	
2581	432	
2582	433	
2583	434	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : L.T.M.G.Hospital, Sion, Mumbai

Date:-

Sr . No.	Seat No.	Signature of Student
2584	435	
2585	436	
2586	437	
2587	438	
2588	439	
2589	440	
2590	441	
2591	442	
2592	443	
2593	444	
2594	445	
2595	446	
2596	447	
2597	448	
2598	449	
2599	450	
2600	451	
2601	452	
2602	453	
2603	454	
2604	455	
2605	456	
2606	457	
2607	458	

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Subject : COMMUNITY HEALTH NURSING
Center Name : L.T.M.G.Hospital, Sion, Mumbai

Date:-

Sr . No.	Seat No.	Signature of Student
2608	459	
2609	460	
2610	461	
2611	462	
2612	463	
2613	464	
2614	465	
2615	466	
2616	517	
2617	518	
2618	519	
2619	520	
2620	521	
2621	522	
2622	523	
2623	524	
2624	525	
2625	526	
2626	527	
2627	528	
2628	529	
2629	530	
2630	531	
2631	532	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : L.T.M.G.Hospital, Sion, Mumbai

Date:-

Sr . No.	Seat No.	Signature of Student
2632	533	
2633	534	
2634	535	
2635	536	
2636	537	
2637	538	
2638	539	
2639	540	
2640	541	
2641	542	
2642	543	
2643	544	
2644	545	
2645	546	
2646	547	
2647	548	
2648	549	
2649	550	
2650	551	
2651	552	
2652	553	
2653	554	
2654	555	
2655	556	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : L.T.M.G.Hospital, Sion, Mumbai

Date:-

Sr . No.	Seat No.	Signature of Student
2656	557	
2657	558	
2658	559	
2659	560	
2660	561	
2661	562	
2662	563	
2663	564	
2664	565	
2665	566	
2666	567	
2667	568	
2668	569	
2669	570	
2670	571	
2671	572	
2672	573	
2673	574	
2674	575	
2675	576	
2676	577	
2677	578	
2678	579	
2679	580	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : L.T.M.G.Hospital, Sion, Mumbai

Date:-

Sr . No.	Seat No.	Signature of Student
2680	581	

Signature of centre incharge

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Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : N.D.M.V.P.SAMAJ'S SCHOL OF NSG., NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
2681	1427	
2682	1428	
2683	1429	
2684	1430	
2685	1431	
2686	1432	
2687	1433	
2688	1434	
2689	1435	
2690	1436	
2691	1437	
2692	1438	
2693	1439	
2694	1440	
2695	1441	
2696	1442	
2697	1443	
2698	1444	
2699	1445	
2700	1446	
2701	1447	
2702	1448	
2703	1449	
2704	1450	

Signature of centre incharge

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Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : N.D.M.V.P.SAMAJ'S SCHOL OF NSG., NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
2705	1451	
2706	1452	
2707	1453	
2708	1454	
2709	1455	
2710	1456	
2711	1457	
2712	1458	
2713	1459	
2714	1460	
2715	1461	
2716	1462	
2717	1463	
2718	1464	
2719	1465	
2720	1466	
2721	1467	
2722	1468	
2723	1469	
2724	1470	
2725	1471	
2726	1472	
2727	1473	
2728	1474	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : N.D.M.V.P.SAMAJ'S SCHOL OF NSG., NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
2729	1475	
2730	1476	
2731	1477	
2732	1478	
2733	1479	
2734	1480	
2735	1481	
2736	1482	
2737	1483	
2738	1484	
2739	1485	
2740	1486	
2741	1487	
2742	1488	
2743	1489	
2744	1490	
2745	1491	
2746	1492	
2747	1493	
2748	1494	
2749	1495	
2750	1496	
2751	1497	
2752	1498	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : N.D.M.V.P.SAMAJ'S SCHOL OF NSG., NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
2753	1499	
2754	1500	
2755	1501	
2756	1502	
2757	1503	
2758	1504	
2759	1505	
2760	1506	
2761	1507	
2762	1508	
2763	1509	
2764	1510	
2765	1511	
2766	1512	
2767	1513	
2768	1514	
2769	1515	
2770	1516	
2771	1517	
2772	1518	
2773	1519	
2774	1520	
2775	1521	
2776	1522	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : N.D.M.V.P.SAMAJ'S SCHOL OF NSG., NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
2777	1523	
2778	1524	
2779	1525	
2780	1526	
2781	1527	
2782	1528	
2783	1529	
2784	1530	
2785	1531	
2786	1532	
2787	1533	
2788	1534	
2789	1535	
2790	1536	
2791	1537	
2792	1538	
2793	1539	
2794	1540	
2795	1541	
2796	1542	
2797	1543	
2798	1544	
2799	1545	
2800	1546	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : N.D.M.V.P.SAMAJ'S SCHOL OF NSG., NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
2801	1547	
2802	1548	
2803	1549	
2804	1550	
2805	1551	
2806	1552	
2807	1553	
2808	1554	
2809	1555	
2810	1556	
2811	1557	
2812	1558	
2813	1559	
2814	1560	
2815	1561	
2816	1562	
2817	1563	
2818	1564	
2819	1565	
2820	1566	
2821	1567	
2822	1568	
2823	1569	
2824	7947	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : N.D.M.V.P.SAMAJ'S SCHOL OF NSG., NASIK

Date:-

Sr . No.	Seat No.	Signature of Student
2825	7948	
2826	7949	
2827	7950	
2828	7951	
2829	7952	
2830	7953	
2831	7954	
2832	7955	
2833	7956	
2834	7957	
2835	7958	
2836	7959	
2837	7960	
2838	7961	
2839	7962	
2840	7963	
2841	7964	
2842	7965	
2843	7966	
2844	7967	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
2845	1570	
2846	1571	
2847	1572	
2848	1573	
2849	1574	
2850	1575	
2851	1576	
2852	1577	
2853	1578	
2854	1579	
2855	1580	
2856	1581	
2857	1582	
2858	1583	
2859	1584	
2860	1585	
2861	1586	
2862	1587	
2863	1588	
2864	1589	
2865	1590	
2866	1591	
2867	1592	
2868	1593	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
2869	1594	
2870	1595	
2871	1596	
2872	1597	
2873	1598	
2874	1599	
2875	1600	
2876	1601	
2877	1602	
2878	1603	
2879	1604	
2880	1605	
2881	1606	
2882	1607	
2883	1608	
2884	1609	
2885	1610	
2886	1611	
2887	1612	
2888	1613	
2889	1614	
2890	1615	
2891	1616	
2892	1617	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
2893	1618	
2894	1619	
2895	1620	
2896	1621	
2897	1622	
2898	1623	
2899	1624	
2900	1625	
2901	1626	
2902	1627	
2903	1628	
2904	1629	
2905	1630	
2906	1631	
2907	1632	
2908	1633	
2909	1634	
2910	1635	
2911	1636	
2912	1637	
2913	1638	
2914	1639	
2915	1640	
2916	1641	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
2917	1642	
2918	1643	
2919	1644	
2920	1645	
2921	1646	
2922	1647	
2923	1648	
2924	1649	
2925	1650	
2926	1651	
2927	1652	
2928	1653	
2929	1654	
2930	1655	
2931	1656	
2932	1657	
2933	1658	
2934	1659	
2935	1660	
2936	1661	
2937	1662	
2938	1663	
2939	1664	
2940	1665	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
2941	1666	
2942	1667	
2943	1668	
2944	1669	
2945	1670	
2946	1671	
2947	1672	
2948	1673	
2949	1674	
2950	1675	
2951	1676	
2952	1677	
2953	1678	
2954	1679	
2955	1680	
2956	1681	
2957	1682	
2958	1683	
2959	1684	
2960	1685	
2961	1686	
2962	1687	
2963	1688	
2964	1689	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
2965	1690	
2966	1691	
2967	1692	
2968	1693	
2969	1694	
2970	1695	
2971	1696	
2972	1697	
2973	1698	
2974	1699	
2975	1700	
2976	1701	
2977	1702	
2978	1703	
2979	1704	
2980	1705	
2981	1706	
2982	1707	
2983	1708	
2984	1709	
2985	1710	
2986	1711	
2987	1712	
2988	1713	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
2989	1714	
2990	1715	
2991	1716	
2992	1717	
2993	1718	
2994	1719	
2995	1720	
2996	1721	
2997	1722	
2998	1723	
2999	1724	
3000	1725	
3001	1726	
3002	1727	
3003	1728	
3004	1729	
3005	1730	
3006	1731	
3007	1732	
3008	1733	
3009	1734	
3010	1735	
3011	1736	
3012	1737	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
3013	1738	
3014	1739	
3015	1740	
3016	1741	
3017	1742	
3018	1743	
3019	1744	
3020	1745	
3021	1746	
3022	1747	
3023	1748	
3024	1749	
3025	1750	
3026	1751	
3027	1752	
3028	1753	
3029	1754	
3030	1755	
3031	1756	
3032	1757	
3033	1758	
3034	1759	
3035	1760	
3036	1761	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
3037	1762	
3038	1763	
3039	1764	
3040	1765	
3041	1766	
3042	1767	
3043	1768	
3044	1769	
3045	1770	
3046	1771	
3047	1772	
3048	1773	
3049	1774	
3050	1775	
3051	1776	
3052	1777	
3053	1778	
3054	1779	
3055	1780	
3056	1781	
3057	1782	
3058	1783	
3059	1784	
3060	1785	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
3061	1786	
3062	1787	
3063	1788	
3064	1789	
3065	1790	
3066	1791	
3067	1792	
3068	1793	
3069	1794	
3070	1795	
3071	1796	
3072	1797	
3073	1798	
3074	1799	
3075	1800	
3076	1801	
3077	1802	
3078	1803	
3079	1804	
3080	1805	
3081	1806	
3082	1807	
3083	1808	
3084	1809	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
3085	1810	
3086	1811	
3087	1812	
3088	1813	
3089	1814	
3090	1815	
3091	1816	
3092	1817	
3093	1818	
3094	1819	
3095	1820	
3096	1821	
3097	1822	
3098	1823	
3099	1824	
3100	1825	
3101	1826	
3102	1827	
3103	1828	
3104	1829	
3105	1830	
3106	1831	
3107	1832	
3108	1833	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
3109	1834	
3110	1835	
3111	1836	
3112	1837	
3113	1838	
3114	1839	
3115	1840	
3116	1841	
3117	1842	
3118	1843	
3119	1844	
3120	1845	
3121	1846	
3122	1847	
3123	1848	
3124	1849	
3125	1850	
3126	1851	
3127	1852	
3128	1853	
3129	1854	
3130	1855	
3131	1856	
3132	1857	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
3133	1858	
3134	1859	
3135	1860	
3136	1861	
3137	1862	
3138	1863	
3139	1864	
3140	1865	
3141	1866	
3142	1867	
3143	1868	
3144	1869	
3145	1870	
3146	1871	
3147	1872	
3148	1873	
3149	1874	
3150	1875	
3151	1876	
3152	1877	
3153	1878	
3154	1879	
3155	1880	
3156	1881	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
3157	1882	
3158	1883	
3159	1884	
3160	1885	
3161	1886	
3162	1887	
3163	1888	
3164	1889	
3165	1890	
3166	1891	
3167	1892	
3168	1893	
3169	1894	
3170	1895	
3171	1896	
3172	1897	
3173	1898	
3174	1899	
3175	1900	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : BHAKTI VEDANTA HOSPITAL , SCHOOL OF NURSING , THANE

Date:-

Sr . No.	Seat No.	Signature of Student
3176	467	
3177	468	
3178	469	
3179	470	
3180	471	
3181	472	
3182	473	
3183	474	
3184	475	
3185	476	
3186	477	
3187	478	
3188	479	
3189	480	
3190	481	
3191	482	
3192	483	
3193	484	
3194	485	
3195	486	
3196	487	
3197	488	
3198	489	
3199	490	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : BHAKTI VEDANTA HOSPITAL , SCHOOL OF NURSING , THANE

Date:-

Sr . No.	Seat No.	Signature of Student
3200	491	
3201	492	
3202	493	
3203	494	
3204	495	
3205	496	
3206	497	
3207	498	
3208	499	
3209	500	
3210	501	
3211	502	
3212	503	
3213	504	
3214	505	
3215	506	
3216	507	
3217	508	
3218	509	
3219	510	
3220	511	
3221	512	
3222	513	
3223	514	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : BHAKTI VEDANTA HOSPITAL , SCHOOL OF NURSING , THANE

Date:-

Sr . No.	Seat No.	Signature of Student
3224	515	
3225	516	
3226	1901	
3227	1902	
3228	1903	
3229	1904	
3230	1905	
3231	1906	
3232	1907	
3233	1908	
3234	1909	
3235	1910	
3236	1911	
3237	1912	
3238	1913	
3239	1914	
3240	1915	
3241	1916	
3242	1917	
3243	1918	
3244	1919	
3245	1920	
3246	1921	
3247	1922	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : BHAKTI VEDANTA HOSPITAL , SCHOOL OF NURSING , THANE

Date:-

Sr . No.	Seat No.	Signature of Student
3248	1923	
3249	1924	
3250	1925	
3251	1926	
3252	1927	
3253	1928	
3254	1929	
3255	1930	
3256	1931	
3257	1932	
3258	1933	
3259	1934	
3260	1935	
3261	1936	
3262	1937	
3263	1938	
3264	1939	
3265	1940	
3266	1941	
3267	1942	
3268	1943	
3269	1944	
3270	1945	
3271	1946	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : BHAKTI VEDANTA HOSPITAL , SCHOOL OF NURSING , THANE

Date:-

Sr . No.	Seat No.	Signature of Student
3272	1947	
3273	1948	
3274	1949	
3275	1950	
3276	1951	
3277	1952	
3278	1953	
3279	1954	
3280	1955	
3281	1956	
3282	1957	
3283	1958	
3284	1959	
3285	1960	
3286	1961	
3287	1962	
3288	1963	
3289	1964	
3290	1965	
3291	1966	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
3292	1967	
3293	1968	
3294	1969	
3295	1970	
3296	1971	
3297	1972	
3298	1973	
3299	1974	
3300	1975	
3301	1976	
3302	1977	
3303	1978	
3304	1979	
3305	1980	
3306	1981	
3307	1982	
3308	1983	
3309	1984	
3310	1985	
3311	1986	
3312	1987	
3313	1988	
3314	1989	
3315	1990	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
3316	1991	
3317	1992	
3318	1993	
3319	1994	
3320	1995	
3321	1996	
3322	1997	
3323	1998	
3324	1999	
3325	2000	
3326	2001	
3327	2002	
3328	2003	
3329	2004	
3330	2005	
3331	2006	
3332	2007	
3333	2008	
3334	2009	
3335	2010	
3336	2011	
3337	2012	
3338	2013	
3339	2014	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
3340	2015	
3341	2016	
3342	2017	
3343	2018	
3344	2019	
3345	2020	
3346	2021	
3347	2022	
3348	2023	
3349	2024	
3350	2025	
3351	2026	
3352	2027	
3353	2028	
3354	2029	
3355	2030	
3356	2031	
3357	2032	
3358	2033	
3359	2034	
3360	2035	
3361	2036	
3362	2037	
3363	2038	

Signature of centre incharge

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

Date:-

Sr . No.	Seat No.	Signature of Student
3364	2039	
3365	2040	
3366	2041	
3367	2042	
3368	2043	
3369	2044	
3370	2045	
3371	2046	
3372	2047	
3373	2048	
3374	2049	
3375	2050	
3376	2051	
3377	2052	
3378	2053	
3379	2054	
3380	2055	
3381	2056	
3382	2057	
3383	2058	
3384	2059	
3385	2060	
3386	2061	
3387	2062	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
3388	2063	
3389	2064	
3390	2065	
3391	2066	
3392	2067	
3393	2068	
3394	2069	
3395	2070	
3396	2071	
3397	2072	
3398	2073	
3399	2074	
3400	2075	
3401	2076	
3402	2077	
3403	2078	
3404	2079	
3405	2080	
3406	2081	
3407	2082	
3408	2083	
3409	2084	
3410	2085	
3411	2086	

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

Date:-

Sr . No.	Seat No.	Signature of Student
3412	2087	
3413	2088	
3414	2089	
3415	2090	
3416	2091	
3417	2092	
3418	2093	
3419	2094	
3420	2095	
3421	2096	
3422	2097	
3423	2098	
3424	2099	
3425	2100	
3426	2101	
3427	2102	
3428	2103	
3429	2104	
3430	2105	
3431	2106	
3432	2107	
3433	2108	
3434	2109	
3435	2110	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
3436	2111	
3437	2112	
3438	2113	
3439	2114	
3440	2115	
3441	2116	
3442	2117	
3443	2118	
3444	2119	
3445	2120	
3446	2121	
3447	2122	
3448	2123	
3449	2124	
3450	2125	

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Center Name : ST.LUKES HOSPITAL, SHRIRAMPUR, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
3451	2423	
3452	2424	
3453	2425	
3454	2426	
3455	2427	
3456	2428	
3457	2429	
3458	2430	
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3460	2432	
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3463	2435	
3464	2436	
3465	2437	
3466	2438	
3467	2439	
3468	2440	
3469	2441	
3470	2442	
3471	2443	
3472	2444	
3473	2445	
3474	2446	

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Center Name : ST.LUKES HOSPITAL, SHRIRAMPUR, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
3475	2447	
3476	2448	
3477	2449	
3478	2450	
3479	2451	
3480	2452	
3481	2453	
3482	2454	
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3488	2460	
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3490	2462	
3491	2463	
3492	2464	
3493	2465	
3494	2466	
3495	2467	
3496	2468	
3497	2469	
3498	2470	

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Center Name : ST.LUKES HOSPITAL, SHRIRAMPUR, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
3499	2471	
3500	2472	
3501	2473	
3502	2515	
3503	2516	
3504	2517	
3505	2518	
3506	2519	
3507	2520	
3508	2521	
3509	2522	
3510	2523	
3511	2524	
3512	2525	
3513	2526	
3514	2527	
3515	2528	
3516	2529	
3517	2530	
3518	2531	
3519	2532	
3520	2533	
3521	2534	
3522	2535	

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Center Name : ST.LUKES HOSPITAL, SHRIRAMPUR, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
3523	2536	
3524	2537	
3525	2538	
3526	2539	
3527	2540	
3528	2541	
3529	2542	
3530	2543	
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3538	2551	
3539	2552	
3540	2553	
3541	2554	
3542	2555	
3543	2556	
3544	2557	
3545	2558	
3546	2559	

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Center Name : ST.LUKES HOSPITAL, SHRIRAMPUR, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
3547	2560	
3548	2561	
3549	2562	
3550	2563	
3551	2564	
3552	2565	
3553	2566	
3554	2567	
3555	2568	
3556	2569	
3557	2570	
3558	2571	
3559	2572	
3560	2573	
3561	2574	
3562	2575	
3563	2576	
3564	2577	
3565	2578	
3566	2579	
3567	2580	
3568	2581	
3569	2582	
3570	2583	

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Center Name : ST.LUKES HOSPITAL, SHRIRAMPUR, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
3571	2584	
3572	2585	
3573	2586	
3574	2587	
3575	2588	
3576	2589	
3577	2590	
3578	2591	
3579	2592	
3580	2593	
3581	2594	
3582	2595	
3583	2596	
3584	2597	
3585	2598	
3586	2599	
3587	2600	
3588	2601	
3589	2602	
3590	2603	
3591	2604	
3592	2605	
3593	2606	
3594	2607	

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Center Name : ST.LUKES HOSPITAL, SHRIRAMPUR, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
3595	2608	
3596	2609	
3597	2610	
3598	2611	
3599	2612	
3600	2613	
3601	2614	
3602	2615	
3603	2616	
3604	2617	
3605	2618	
3606	2619	
3607	2620	
3608	2621	
3609	2622	
3610	2623	
3611	2624	
3612	2625	
3613	2626	
3614	2627	
3615	2628	
3616	2629	
3617	2630	
3618	2631	

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Center Name : ST.LUKES HOSPITAL, SHRIRAMPUR, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
3619	2632	
3620	2633	
3621	2634	
3622	2635	
3623	2636	
3624	2637	
3625	2638	
3626	2639	
3627	2640	
3628	2641	
3629	2642	
3630	2643	
3631	2644	
3632	2645	
3633	2646	
3634	2647	
3635	2648	
3636	2649	
3637	2650	
3638	2651	
3639	2652	
3640	2653	
3641	2654	
3642	2655	

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Center Name : ST.LUKES HOSPITAL, SHRIRAMPUR, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
3643	2656	
3644	2657	
3645	2658	
3646	2659	
3647	2660	
3648	2661	
3649	2662	
3650	2663	
3651	2664	
3652	2665	
3653	2666	
3654	2667	
3655	2668	
3656	2669	
3657	2670	
3658	2671	
3659	2672	
3660	2673	
3661	2674	
3662	2675	
3663	2676	
3664	2677	
3665	2678	
3666	2679	

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Center Name : ST.LUKES HOSPITAL, SHRIRAMPUR, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
3667	4475	
3668	4476	
3669	4477	
3670	4478	
3671	4479	
3672	4480	
3673	4481	
3674	4482	
3675	4483	
3676	4484	
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3678	4486	
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3680	4488	
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3682	4490	
3683	4491	
3684	4492	
3685	4493	
3686	4494	
3687	4495	
3688	4496	
3689	4497	
3690	4498	

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Center Name : ST.LUKES HOSPITAL, SHRIRAMPUR, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
3691	4499	

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

Date:-

Sr . No.	Seat No.	Signature of Student
3692	2346	
3693	2347	
3694	2348	
3695	2349	
3696	2350	
3697	2351	
3698	2352	
3699	2353	
3700	2354	
3701	2355	
3702	2356	
3703	2357	
3704	2358	
3705	2359	
3706	2360	
3707	2361	
3708	2362	
3709	2363	
3710	2364	
3711	2365	
3712	2366	
3713	2367	
3714	2368	
3715	2369	

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

Date:-

Sr . No.	Seat No.	Signature of Student
3716	2370	
3717	2371	
3718	2372	
3719	2373	
3720	2374	
3721	2375	
3722	2376	
3723	2377	
3724	2378	
3725	2379	
3726	2380	
3727	2381	
3728	2382	
3729	2383	
3730	2384	
3731	2385	
3732	2386	
3733	2387	
3734	2388	
3735	2389	
3736	2390	
3737	2391	
3738	2392	
3739	2393	

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Date:-

Sr . No.	Seat No.	Signature of Student
3740	2394	
3741	2474	
3742	2475	
3743	2476	
3744	2477	
3745	2478	
3746	2479	
3747	2480	
3748	2481	
3749	2482	
3750	2483	
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3753	2486	
3754	2487	
3755	2488	
3756	2489	
3757	2490	
3758	2491	
3759	2492	
3760	2493	
3761	2494	
3762	2495	
3763	2496	

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

Date:-

Sr . No.	Seat No.	Signature of Student
3764	2497	
3765	2498	
3766	2499	
3767	2500	
3768	2501	
3769	2502	
3770	2503	
3771	2504	
3772	2505	
3773	2506	
3774	2507	
3775	2508	
3776	2509	
3777	2510	
3778	2511	
3779	2512	
3780	2513	
3781	2514	
3782	2680	
3783	2681	
3784	2682	
3785	2683	
3786	2684	
3787	2685	

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

Date:-

Sr . No.	Seat No.	Signature of Student
3788	2686	
3789	2687	
3790	2688	
3791	2689	
3792	2690	
3793	2691	
3794	2692	
3795	2693	
3796	2694	
3797	2695	
3798	2696	
3799	2697	
3800	2698	
3801	2699	
3802	2700	
3803	2701	
3804	2702	
3805	2703	
3806	2704	
3807	2705	
3808	2706	
3809	2707	
3810	2708	
3811	2709	

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

Date:-

Sr . No.	Seat No.	Signature of Student
3812	2710	
3813	2711	
3814	2712	
3815	2713	
3816	2714	
3817	2715	
3818	2716	
3819	2717	
3820	2718	
3821	2719	
3822	2720	
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3831	2729	
3832	2730	
3833	2731	
3834	2732	
3835	2733	

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

Date:-

Sr . No.	Seat No.	Signature of Student
3836	2734	
3837	2735	
3838	2736	
3839	2737	
3840	2738	
3841	2739	
3842	2740	
3843	2741	
3844	2742	
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3855	2753	
3856	2754	
3857	2755	
3858	2756	
3859	2757	

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

Date:-

Sr . No.	Seat No.	Signature of Student
3860	2758	
3861	2759	
3862	2760	
3863	2761	
3864	2762	
3865	2763	
3866	2764	
3867	2765	
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3869	2767	
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3877	2775	
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3879	2777	
3880	2778	
3881	2779	
3882	2780	
3883	2781	

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

Date:-

Sr . No.	Seat No.	Signature of Student
3884	2782	
3885	2783	
3886	2784	
3887	2785	
3888	2786	
3889	2787	
3890	2788	
3891	2789	
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3893	2791	
3894	2792	
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3898	2796	
3899	2797	
3900	2818	
3901	2819	
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3903	2821	
3904	2822	
3905	2823	
3906	2824	
3907	2825	

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

Date:-

Sr . No.	Seat No.	Signature of Student
3908	2826	
3909	2827	
3910	2828	
3911	2829	
3912	2830	
3913	2831	
3914	2832	
3915	2833	
3916	2834	
3917	2835	
3918	2836	
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3926	2844	
3927	2845	
3928	2846	
3929	2847	
3930	2848	
3931	2849	

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

Date:-

Sr . No.	Seat No.	Signature of Student
3932	2850	
3933	2851	
3934	2852	
3935	2853	
3936	2854	
3937	2855	
3938	2856	
3939	2857	
3940	2858	
3941	2859	
3942	2860	
3943	2861	
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3950	2922	
3951	2923	
3952	2924	
3953	2925	
3954	2926	
3955	2927	

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Date:-

Sr . No.	Seat No.	Signature of Student
3956	2928	
3957	2929	
3958	2930	
3959	2931	
3960	2932	
3961	2933	
3962	2934	
3963	2935	
3964	2936	
3965	2937	
3966	2938	
3967	2939	
3968	2940	
3969	2941	
3970	2942	
3971	2943	
3972	2944	
3973	2945	
3974	2946	
3975	2947	
3976	2948	
3977	2949	
3978	2950	
3979	2951	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
3980	2952	
3981	2953	
3982	2954	
3983	2955	
3984	2956	
3985	2957	
3986	2958	
3987	2959	
3988	2960	
3989	2961	
3990	2962	
3991	2963	
3992	2964	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Krishna Hosp.& M.R.C.,Karad. Dist-Satara

Date:-

Sr . No.	Seat No.	Signature of Student
3993	2965	
3994	2966	
3995	2967	
3996	2968	
3997	2969	
3998	2970	
3999	2971	
4000	2972	
4001	2973	
4002	2974	
4003	2975	
4004	2976	
4005	2977	
4006	2978	
4007	2979	
4008	2980	
4009	2981	
4010	2982	
4011	2983	
4012	2984	
4013	2985	
4014	2986	
4015	2987	
4016	2988	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Krishna Hosp.& M.R.C.,Karad. Dist-Satara

Date:-

Sr . No.	Seat No.	Signature of Student
4017	2989	
4018	2990	
4019	2991	
4020	2992	
4021	2993	
4022	2994	
4023	2995	
4024	2996	
4025	2997	
4026	2998	
4027	2999	
4028	3000	
4029	3001	
4030	3002	
4031	3003	
4032	3004	
4033	3005	
4034	3006	
4035	3007	
4036	3008	
4037	3009	
4038	3010	
4039	3011	
4040	3012	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Krishna Hosp.& M.R.C.,Karad. Dist-Satara

Date:-

Sr . No.	Seat No.	Signature of Student
4041	3013	
4042	3014	
4043	3015	
4044	3016	
4045	3017	
4046	3018	
4047	3019	
4048	3020	
4049	3021	
4050	3022	
4051	3023	
4052	3024	
4053	3025	
4054	3026	
4055	3027	
4056	3028	
4057	3029	
4058	3030	
4059	3031	
4060	3032	
4061	3033	
4062	3034	
4063	3035	
4064	3036	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Krishna Hosp.& M.R.C.,Karad. Dist-Satara

Date:-

Sr . No.	Seat No.	Signature of Student
4065	3037	
4066	3038	
4067	3039	
4068	3040	
4069	3041	
4070	3042	
4071	3043	
4072	3044	
4073	3045	
4074	3046	
4075	3047	
4076	3048	
4077	3049	
4078	3050	
4079	3051	
4080	3052	
4081	3053	
4082	3054	
4083	3055	
4084	3056	
4085	3057	
4086	3058	
4087	3059	
4088	3060	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Krishna Hosp.& M.R.C.,Karad. Dist-Satara

Date:-

Sr . No.	Seat No.	Signature of Student
4089	3061	
4090	3062	
4091	3063	
4092	3064	
4093	3065	
4094	3066	
4095	3067	
4096	3068	
4097	3069	
4098	3070	
4099	3071	
4100	3072	
4101	3073	
4102	3074	
4103	3075	
4104	3076	
4105	3077	
4106	3078	
4107	3079	
4108	3080	
4109	3081	
4110	3082	
4111	3083	
4112	3084	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Krishna Hosp.& M.R.C.,Karad. Dist-Satara

Date:-

Sr . No.	Seat No.	Signature of Student
4113	3085	
4114	3086	
4115	3087	
4116	3088	
4117	3089	
4118	3090	
4119	3091	
4120	3092	
4121	3093	
4122	3094	
4123	3095	
4124	3096	
4125	3097	
4126	3098	
4127	3099	
4128	3100	
4129	3101	
4130	3102	
4131	3103	
4132	3104	
4133	3105	
4134	3106	
4135	3107	
4136	3108	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Krishna Hosp.& M.R.C.,Karad. Dist-Satara

Date:-

Sr . No.	Seat No.	Signature of Student
4137	3109	
4138	3110	
4139	3111	
4140	3112	
4141	3113	
4142	3114	
4143	3115	
4144	3116	
4145	3117	
4146	3118	
4147	3119	
4148	3120	
4149	3121	
4150	3122	
4151	3123	
4152	3124	
4153	3125	
4154	3126	
4155	3127	
4156	3128	
4157	3129	
4158	3130	
4159	3131	
4160	3132	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Krishna Hosp.& M.R.C.,Karad. Dist-Satara

Date:-

Sr . No.	Seat No.	Signature of Student
4161	3133	
4162	3134	
4163	3135	
4164	3136	
4165	3137	
4166	3138	
4167	3139	
4168	3140	
4169	3141	
4170	3142	
4171	3143	
4172	3144	
4173	3145	
4174	3146	
4175	3147	
4176	3148	
4177	3149	
4178	3150	
4179	3151	
4180	3152	
4181	3153	
4182	3154	
4183	3155	
4184	3156	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Krishna Hosp.& M.R.C.,Karad. Dist-Satara

Date:-

Sr . No.	Seat No.	Signature of Student
4185	3157	
4186	3158	
4187	3159	
4188	3160	
4189	3161	
4190	3162	
4191	3163	
4192	3164	
4193	3165	
4194	3166	
4195	3167	
4196	3168	
4197	3169	
4198	3170	
4199	3171	
4200	3172	
4201	3173	
4202	3174	
4203	3175	
4204	3176	
4205	3177	
4206	3178	
4207	3179	
4208	3180	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Krishna Hosp.& M.R.C.,Karad. Dist-Satara

Date:-

Sr . No.	Seat No.	Signature of Student
4209	3181	
4210	3182	
4211	3183	
4212	3184	
4213	3185	
4214	3186	
4215	3187	
4216	3188	
4217	3189	
4218	3190	
4219	3191	
4220	3192	
4221	3193	
4222	3194	
4223	3195	
4224	3196	
4225	3197	
4226	3198	
4227	3199	
4228	3200	
4229	3201	
4230	3202	
4231	3203	
4232	3204	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Krishna Hosp.& M.R.C.,Karad. Dist-Satara

Date:-

Sr . No.	Seat No.	Signature of Student
4233	7925	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Sangli

Date:-

Sr . No.	Seat No.	Signature of Student
4234	3205	
4235	3206	
4236	3207	
4237	3208	
4238	3209	
4239	3210	
4240	3211	
4241	3212	
4242	3213	
4243	3214	
4244	3215	
4245	3216	
4246	3217	
4247	3218	
4248	3219	
4249	3220	
4250	3221	
4251	3222	
4252	3223	
4253	3224	
4254	3225	
4255	3226	
4256	3227	
4257	3228	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Sangli

Date:-

Sr . No.	Seat No.	Signature of Student
4258	3229	
4259	3230	
4260	3231	
4261	3232	
4262	3233	
4263	3234	
4264	3235	
4265	3236	
4266	3237	
4267	3238	
4268	3239	
4269	3240	
4270	3241	
4271	3242	
4272	3243	
4273	3244	
4274	3245	
4275	3246	
4276	3247	
4277	3248	
4278	3249	
4279	3250	
4280	3251	
4281	3252	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Sangli

Date:-

Sr . No.	Seat No.	Signature of Student
4282	3253	
4283	3254	
4284	3255	
4285	3256	
4286	3257	
4287	3258	
4288	3259	
4289	3260	
4290	3261	
4291	3262	
4292	3263	
4293	3264	
4294	3265	
4295	3266	
4296	3267	
4297	3268	
4298	3269	
4299	3270	
4300	3271	
4301	3272	
4302	3273	
4303	3274	
4304	3275	
4305	3276	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Sangli

Date:-

Sr . No.	Seat No.	Signature of Student
4306	3277	
4307	3278	
4308	3279	
4309	3280	
4310	3281	
4311	3282	
4312	3283	
4313	3284	
4314	3285	
4315	3286	
4316	3287	
4317	3288	
4318	3289	
4319	3290	
4320	3291	
4321	3292	
4322	3293	
4323	3294	
4324	3295	
4325	3296	
4326	3297	
4327	3298	
4328	3299	
4329	3300	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Sangli

Date:-

Sr . No.	Seat No.	Signature of Student
4330	3301	
4331	3302	
4332	3303	
4333	3304	
4334	3305	
4335	3306	
4336	3307	
4337	3308	
4338	3309	
4339	3310	
4340	3311	
4341	3312	
4342	3313	
4343	3314	
4344	3315	
4345	3316	
4346	3317	
4347	3318	
4348	3319	
4349	3320	
4350	3321	
4351	3322	
4352	3323	
4353	3324	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Sangli

Date:-

Sr . No.	Seat No.	Signature of Student
4354	3325	
4355	3326	
4356	3327	
4357	3328	
4358	3329	
4359	3330	
4360	3331	
4361	3332	
4362	3333	
4363	3334	
4364	3335	
4365	3336	
4366	3337	
4367	3338	
4368	3339	
4369	3340	
4370	3341	
4371	3342	
4372	3343	
4373	3344	
4374	3345	
4375	3346	
4376	3347	
4377	3348	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : GENERAL HOSPITAL, Sangli

Date:-

Sr . No.	Seat No.	Signature of Student
4378	3349	
4379	3350	
4380	3351	
4381	3352	
4382	3353	
4383	3354	
4384	3355	
4385	3356	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Solapur

Date:-

Sr . No.	Seat No.	Signature of Student
4386	3357	
4387	3358	
4388	3359	
4389	3360	
4390	3361	
4391	3362	
4392	3363	
4393	3364	
4394	3365	
4395	3366	
4396	3367	
4397	3368	
4398	3369	
4399	3370	
4400	3371	
4401	3372	
4402	3373	
4403	3374	
4404	3375	
4405	3376	
4406	3377	
4407	3378	
4408	3379	
4409	3380	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Solapur

Date:-

Sr . No.	Seat No.	Signature of Student
4410	3381	
4411	3382	
4412	3383	
4413	3384	
4414	3385	
4415	3386	
4416	3387	
4417	3388	
4418	3389	
4419	3390	
4420	3391	
4421	3392	
4422	3393	
4423	3394	
4424	3395	
4425	3396	
4426	3397	
4427	3398	
4428	3399	
4429	3400	
4430	3401	
4431	3402	
4432	3403	
4433	3404	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Solapur

Date:-

Sr . No.	Seat No.	Signature of Student
4434	3405	
4435	3406	
4436	3407	
4437	3408	
4438	3409	
4439	3410	
4440	3411	
4441	3412	
4442	3413	
4443	3414	
4444	3415	
4445	3416	
4446	3417	
4447	3418	
4448	3419	
4449	3420	
4450	3421	
4451	3422	
4452	3423	
4453	3424	
4454	3425	
4455	3426	
4456	3427	
4457	3428	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Solapur

Date:-

Sr . No.	Seat No.	Signature of Student
4458	3429	
4459	3430	
4460	3431	
4461	3432	
4462	3433	
4463	3434	
4464	3435	
4465	3436	
4466	3437	
4467	3438	
4468	3439	
4469	3440	
4470	3441	
4471	3442	
4472	3443	
4473	3444	
4474	3445	
4475	3446	
4476	3447	
4477	3448	
4478	3449	
4479	3450	
4480	3451	
4481	3452	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Solapur

Date:-

Sr . No.	Seat No.	Signature of Student
4482	3453	
4483	3454	
4484	3455	
4485	3456	
4486	3457	
4487	3458	
4488	3459	
4489	3460	
4490	3461	
4491	3462	
4492	3463	
4493	3464	
4494	3465	
4495	3466	
4496	3467	
4497	3468	
4498	3469	
4499	3470	
4500	3471	
4501	3472	
4502	3473	
4503	3474	
4504	3475	
4505	3476	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Solapur

Date:-

Sr . No.	Seat No.	Signature of Student
4506	3477	
4507	3478	
4508	3479	
4509	3480	
4510	3481	
4511	3482	
4512	3483	
4513	3484	
4514	3485	
4515	3486	
4516	3487	
4517	3488	
4518	3489	
4519	3490	
4520	3491	
4521	3492	
4522	3493	
4523	3494	
4524	3495	
4525	3496	
4526	3497	
4527	3498	
4528	3499	
4529	3500	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Solapur

Date:-

Sr . No.	Seat No.	Signature of Student
4530	3501	
4531	3502	
4532	3503	
4533	3504	
4534	3505	
4535	3506	
4536	3507	
4537	3508	
4538	3509	
4539	3510	
4540	3511	
4541	3512	
4542	3513	
4543	3514	
4544	3515	
4545	3516	
4546	3517	
4547	3518	
4548	3519	
4549	3520	
4550	3521	
4551	3522	
4552	3523	
4553	3524	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Solapur

Date:-

Sr . No.	Seat No.	Signature of Student
4554	3525	
4555	3526	
4556	7989	
4557	7990	
4558	7991	
4559	7992	
4560	7993	
4561	7994	
4562	7995	
4563	7996	
4564	7997	
4565	7998	
4566	7999	
4567	8000	
4568	8001	
4569	8002	
4570	8003	
4571	8004	
4572	8005	
4573	8006	
4574	8007	
4575	8008	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI ,PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4576	3527	
4577	3528	
4578	3529	
4579	3530	
4580	3531	
4581	3532	
4582	3533	
4583	3534	
4584	3535	
4585	3536	
4586	3537	
4587	3538	
4588	3539	
4589	3540	
4590	3541	
4591	3542	
4592	3543	
4593	3544	
4594	3545	
4595	3546	
4596	3547	
4597	3548	
4598	3549	
4599	3550	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI ,PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4600	3551	
4601	3552	
4602	3553	
4603	3554	
4604	3555	
4605	3556	
4606	3557	
4607	3558	
4608	3559	
4609	3560	
4610	3561	
4611	3562	
4612	3563	
4613	3564	
4614	3565	
4615	3566	
4616	3567	
4617	3568	
4618	3569	
4619	3570	
4620	3571	
4621	3572	
4622	3573	
4623	3574	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI ,PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4624	3575	
4625	3576	
4626	3577	
4627	3578	
4628	3579	
4629	3580	
4630	3581	
4631	3582	
4632	3583	
4633	3584	
4634	3585	
4635	3586	
4636	3587	
4637	3588	
4638	3589	
4639	3590	
4640	3591	
4641	3592	
4642	3593	
4643	3594	
4644	3595	
4645	3596	
4646	3597	
4647	3598	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI ,PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4648	3599	
4649	3600	
4650	3601	
4651	3602	
4652	3603	
4653	3604	
4654	3605	
4655	3606	
4656	3607	
4657	3608	
4658	3609	
4659	3610	
4660	3611	
4661	3612	
4662	3613	
4663	3643	
4664	3644	
4665	3645	
4666	3646	
4667	3647	
4668	3648	
4669	3649	
4670	3650	
4671	3651	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Subject : COMMUNITY HEALTH NURSING

Center Name : DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI ,PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4672	3652	
4673	3653	
4674	3654	
4675	3655	
4676	3656	
4677	3657	
4678	3658	
4679	3659	
4680	3660	
4681	3661	
4682	3662	
4683	3663	
4684	3664	
4685	3665	
4686	3666	
4687	3667	
4688	3668	
4689	3669	
4690	3670	
4691	3671	
4692	3672	
4693	3673	
4694	3674	
4695	3675	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

Center Name : DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI ,PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4696	3676	
4697	3677	
4698	3678	
4699	3679	
4700	3680	
4701	3681	
4702	3682	
4703	3683	
4704	3684	
4705	4034	
4706	4035	
4707	4036	
4708	4037	
4709	4038	
4710	4039	
4711	4040	
4712	4041	
4713	4042	
4714	4043	
4715	4044	
4716	4045	
4717	4046	
4718	4047	
4719	4048	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

Center Name : DR. D.Y. PATIL INST OF NURSING EDU , PIMPRI ,PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4720	4049	
4721	4050	
4722	4051	
4723	4052	
4724	4053	
4725	4054	
4726	4055	
4727	4056	
4728	4057	
4729	4058	
4730	4059	
4731	4060	
4732	4061	
4733	4062	
4734	4063	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : BAKUL TAMBAT INSTITUTE OF NURSING EDUCATION, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4735	3685	
4736	3686	
4737	3687	
4738	3688	
4739	3689	
4740	3690	
4741	3691	
4742	3692	
4743	3693	
4744	3694	
4745	3695	
4746	3696	
4747	3697	
4748	3698	
4749	3699	
4750	3700	
4751	3701	
4752	3702	
4753	3703	
4754	3704	
4755	3705	
4756	3706	
4757	3707	
4758	3708	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : BAKUL TAMBAT INSTITUTE OF NURSING EDUCATION, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4759	3709	
4760	3710	
4761	3711	
4762	3712	
4763	3713	
4764	3714	
4765	3715	
4766	3716	
4767	3717	
4768	3718	
4769	3719	
4770	3720	
4771	3721	
4772	3722	
4773	3723	
4774	3724	
4775	3725	
4776	3726	
4777	3727	
4778	3728	
4779	3729	
4780	3730	
4781	3731	
4782	3732	

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Subject : COMMUNITY HEALTH NURSING
Center Name : BAKUL TAMBAT INSTITUTE OF NURSING EDUCATION, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4783	3733	
4784	3734	
4785	3735	
4786	3736	
4787	3737	
4788	3738	
4789	3739	
4790	3740	
4791	3741	
4792	3742	
4793	3743	
4794	3744	
4795	3745	
4796	3746	
4797	3747	
4798	3748	
4799	3749	
4800	3750	
4801	3751	
4802	3752	
4803	3753	
4804	3754	
4805	3755	
4806	3756	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

Center Name : BAKUL TAMBAT INSTITUTE OF NURSING EDUCATION, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4807	3757	
4808	3758	
4809	3759	
4810	3760	
4811	3761	
4812	3762	
4813	3763	
4814	3764	
4815	3765	
4816	3766	
4817	3767	
4818	3768	
4819	3769	
4820	3770	
4821	3771	
4822	3772	
4823	3773	
4824	3774	
4825	3775	
4826	3776	
4827	3777	
4828	3778	
4829	3779	
4830	3780	

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Subject : COMMUNITY HEALTH NURSING
Center Name : BAKUL TAMBAT INSTITUTE OF NURSING EDUCATION, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4831	3781	
4832	3782	
4833	3783	
4834	3784	
4835	3785	
4836	3786	
4837	3787	
4838	3788	
4839	3789	
4840	3790	
4841	3791	
4842	3792	
4843	3793	
4844	3794	
4845	3795	
4846	3796	
4847	3797	
4848	3798	
4849	3799	
4850	3800	
4851	3801	
4852	3802	
4853	3803	
4854	3804	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : BAKUL TAMBAT INSTITUTE OF NURSING EDUCATION, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4855	3805	
4856	3806	
4857	3807	
4858	3808	
4859	3809	
4860	3810	
4861	3811	
4862	3812	
4863	3813	
4864	3814	
4865	3815	
4866	3816	
4867	3817	
4868	3818	
4869	3819	
4870	3820	
4871	3821	
4872	3822	
4873	3823	
4874	3824	
4875	3825	
4876	3826	
4877	3827	
4878	3828	

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Subject : COMMUNITY HEALTH NURSING
Center Name : BAKUL TAMBAT INSTITUTE OF NURSING EDUCATION, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4879	3829	
4880	3830	
4881	3831	
4882	3832	
4883	3833	
4884	3834	
4885	3835	
4886	3836	
4887	3837	
4888	3838	
4889	3839	
4890	3840	
4891	3841	
4892	3842	
4893	3843	
4894	3844	
4895	3845	
4896	3846	
4897	3847	
4898	3848	
4899	3849	
4900	3850	
4901	3851	
4902	3852	

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Subject : COMMUNITY HEALTH NURSING
Center Name : BAKUL TAMBAT INSTITUTE OF NURSING EDUCATION, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4903	3853	
4904	3854	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

Center Name : BHARATI VIDYAPEETH COLLEGE OF NURSING , PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4905	3911	
4906	3912	
4907	3913	
4908	3914	
4909	3915	
4910	3916	
4911	3917	
4912	3918	
4913	3919	
4914	3920	
4915	3921	
4916	3922	
4917	3923	
4918	3924	
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4920	3926	
4921	3927	
4922	3928	
4923	3929	
4924	3930	
4925	3931	
4926	3932	
4927	3933	
4928	3934	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

Center Name : BHARATI VIDYAPEETH COLLEGE OF NURSING , PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4929	3935	
4930	3936	
4931	3937	
4932	3938	
4933	3939	
4934	3940	
4935	3941	
4936	3942	
4937	3943	
4938	3944	
4939	3945	
4940	3946	
4941	3947	
4942	3948	
4943	3949	
4944	3950	
4945	3951	
4946	3952	
4947	3953	
4948	3954	
4949	3955	
4950	3956	
4951	3957	
4952	3958	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : BHARATI VIDYAPEETH COLLEGE OF NURSING , PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4953	3959	
4954	3960	
4955	3961	
4956	3962	
4957	3963	
4958	3964	
4959	3965	
4960	3966	
4961	3967	
4962	3968	
4963	3969	
4964	3970	
4965	3971	
4966	3972	
4967	3973	
4968	3974	
4969	3975	
4970	3976	
4971	3977	
4972	3978	
4973	3979	
4974	3980	
4975	3981	
4976	3982	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : BHARATI VIDYAPEETH COLLEGE OF NURSING , PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
4977	3983	
4978	3984	
4979	3985	
4980	3986	
4981	3987	
4982	3988	
4983	3989	
4984	3990	
4985	3991	
4986	3992	
4987	3993	
4988	3994	
4989	3995	
4990	3996	
4991	3997	
4992	3998	
4993	3999	
4994	4000	
4995	4001	
4996	4002	
4997	4003	
4998	4004	
4999	4005	
5000	4006	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : BHARATI VIDYAPEETH COLLEGE OF NURSING , PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
5001	4007	
5002	4008	
5003	4009	
5004	4010	
5005	4011	
5006	4012	
5007	4013	
5008	4014	
5009	4015	
5010	4016	
5011	4017	
5012	4018	
5013	4019	
5014	4020	
5015	4021	
5016	4022	
5017	4023	
5018	4024	
5019	4025	
5020	4026	
5021	4027	
5022	4028	
5023	4029	
5024	4030	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : BHARATI VIDYAPEETH COLLEGE OF NURSING , PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
5025	4031	
5026	4032	
5027	4033	
5028	4064	
5029	4065	
5030	4066	
5031	4067	
5032	4068	
5033	4069	
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5035	4071	
5036	4072	
5037	4073	
5038	4074	
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5040	4076	
5041	4077	
5042	4078	
5043	4079	
5044	4080	
5045	4081	
5046	4082	
5047	4083	
5048	4084	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : BHARATI VIDYAPEETH COLLEGE OF NURSING , PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
5049	4085	
5050	4086	
5051	4087	
5052	4088	
5053	4089	
5054	4090	
5055	4091	
5056	4092	
5057	4093	
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5061	4097	
5062	4098	
5063	4099	
5064	4100	
5065	4101	
5066	4102	
5067	4103	
5068	4104	
5069	4105	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
5070	4106	
5071	4107	
5072	4108	
5073	4109	
5074	4110	
5075	4111	
5076	4112	
5077	4113	
5078	4114	
5079	4115	
5080	4116	
5081	4117	
5082	4118	
5083	4119	
5084	4120	
5085	4121	
5086	4122	
5087	4123	
5088	4124	
5089	4125	
5090	4126	
5091	4127	
5092	4128	
5093	4129	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
5094	4130	
5095	4131	
5096	4132	
5097	4133	
5098	4134	
5099	4135	
5100	4136	
5101	4137	
5102	4138	
5103	4139	
5104	4140	
5105	4141	
5106	4142	
5107	4143	
5108	4144	
5109	4145	
5110	4146	
5111	4147	
5112	4148	
5113	4149	
5114	4150	
5115	4151	
5116	4152	
5117	4153	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
5118	4154	
5119	4155	
5120	4156	
5121	4157	
5122	4158	
5123	4159	
5124	4160	
5125	4161	
5126	4162	
5127	4163	
5128	4164	
5129	4165	
5130	4166	
5131	4167	
5132	4168	
5133	4169	
5134	4170	
5135	4171	
5136	4172	
5137	4173	
5138	4174	
5139	4175	
5140	4176	
5141	4177	

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
5142	4178	
5143	4179	
5144	4180	
5145	4181	
5146	4182	
5147	4183	
5148	4184	
5149	4185	
5150	4186	
5151	4187	
5152	4188	
5153	4189	
5154	4190	
5155	4191	
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5157	4193	
5158	4194	
5159	4195	
5160	4196	
5161	4197	
5162	4198	
5163	4199	
5164	4200	
5165	4201	

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

Date:-

Sr . No.	Seat No.	Signature of Student
5166	4202	
5167	4203	
5168	4204	
5169	4205	
5170	4206	
5171	4207	
5172	4208	
5173	4209	
5174	4210	
5175	4211	
5176	4212	
5177	4213	
5178	4214	
5179	4215	
5180	4216	
5181	4217	
5182	4218	
5183	4219	
5184	4220	
5185	4221	
5186	4222	
5187	4223	
5188	4224	
5189	4225	

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

Date:-

Sr . No.	Seat No.	Signature of Student
5190	4226	
5191	4227	
5192	4228	
5193	4229	
5194	4230	
5195	4231	
5196	4232	
5197	4233	
5198	4234	
5199	4235	
5200	4236	
5201	4237	
5202	4238	
5203	4239	
5204	4240	
5205	4241	
5206	4242	
5207	4243	
5208	4244	
5209	4245	
5210	4246	
5211	4247	
5212	4248	
5213	4249	

Signature of centre incharge

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

Date:-

Sr . No.	Seat No.	Signature of Student
5214	4250	
5215	4251	
5216	4252	
5217	4253	
5218	4254	
5219	4255	
5220	4256	
5221	4257	
5222	4258	
5223	4259	
5224	4260	
5225	4261	
5226	4262	
5227	4263	
5228	4264	
5229	4265	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : PAD DR. V. VIKHE PATIL INSTITUTE OF NURSING EDUCATION, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
5230	2866	
5231	2867	
5232	2868	
5233	2869	
5234	2870	
5235	2871	
5236	2872	
5237	2873	
5238	2874	
5239	2875	
5240	2876	
5241	2877	
5242	2878	
5243	2879	
5244	2880	
5245	2881	
5246	2882	
5247	2883	
5248	2884	
5249	2885	
5250	2886	
5251	2887	
5252	2888	
5253	2889	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : PAD DR. V. VIKHE PATIL INSTITUTE OF NURSING EDUCATION, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
5254	2890	
5255	2891	
5256	2892	
5257	2893	
5258	2894	
5259	2895	
5260	2896	
5261	2897	
5262	2898	
5263	2899	
5264	2900	
5265	2901	
5266	2902	
5267	2903	
5268	2904	
5269	2905	
5270	2906	
5271	2907	
5272	2908	
5273	2909	
5274	2910	
5275	2911	
5276	2912	
5277	2913	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : PAD DR. V. VIKHE PATIL INSTITUTE OF NURSING EDUCATION, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
5278	2914	
5279	2915	
5280	2916	
5281	2917	
5282	2918	
5283	2919	
5284	4266	
5285	4267	
5286	4268	
5287	4269	
5288	4270	
5289	4271	
5290	4272	
5291	4273	
5292	4274	
5293	4275	
5294	4276	
5295	4277	
5296	4278	
5297	4279	
5298	4280	
5299	4281	
5300	4282	
5301	4283	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : PAD DR. V. VIKHE PATIL INSTITUTE OF NURSING EDUCATION, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
5302	4284	
5303	4285	
5304	4286	
5305	4287	
5306	4288	
5307	4289	
5308	4290	
5309	4291	
5310	4292	
5311	4293	
5312	4294	
5313	4295	
5314	4296	
5315	4297	
5316	4298	
5317	4299	
5318	4300	
5319	4301	
5320	4302	
5321	4303	
5322	4304	
5323	4305	
5324	4306	
5325	4307	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : PAD DR. V. VIKHE PATIL INSTITUTE OF NURSING EDUCATION, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
5326	4308	
5327	4309	
5328	4310	
5329	4311	
5330	4312	
5331	4313	
5332	4314	
5333	4315	
5334	4316	
5335	4317	
5336	4318	
5337	4319	
5338	4320	
5339	4321	
5340	4322	
5341	4323	
5342	4324	
5343	4325	
5344	4326	
5345	4327	
5346	4328	
5347	4329	
5348	4330	
5349	4331	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : PAD DR. V. VIKHE PATIL INSTITUTE OF NURSING EDUCATION, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
5350	4332	
5351	4333	
5352	4334	
5353	4335	
5354	4336	
5355	4337	
5356	4338	
5357	4339	
5358	4340	
5359	4341	
5360	4342	
5361	4343	
5362	4344	
5363	4345	
5364	4346	
5365	4347	
5366	4348	
5367	4349	
5368	4350	
5369	4351	
5370	4352	
5371	4353	
5372	4354	
5373	4355	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : PAD DR. V. VIKHE PATIL INSTITUTE OF NURSING EDUCATION, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
5374	4356	
5375	4357	
5376	4358	
5377	4359	
5378	4360	
5379	4361	
5380	4362	
5381	4363	
5382	4364	
5383	4365	
5384	4366	
5385	4367	
5386	4368	
5387	4369	
5388	4370	
5389	4371	
5390	4372	
5391	4373	
5392	4374	
5393	4375	
5394	4376	
5395	4377	
5396	4378	
5397	4379	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : PAD DR. V. VIKHE PATIL INSTITUTE OF NURSING EDUCATION, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
5398	4380	
5399	4381	
5400	4382	
5401	4383	
5402	4384	
5403	4385	
5404	4386	
5405	4387	
5406	4388	
5407	4389	
5408	4390	
5409	4391	
5410	4392	
5411	4393	
5412	4394	
5413	4395	
5414	4396	
5415	4397	
5416	4398	
5417	4399	
5418	4400	
5419	4401	
5420	4402	
5421	4403	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : PAD DR. V. VIKHE PATIL INSTITUTE OF NURSING EDUCATION, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
5422	4404	
5423	4405	
5424	4406	
5425	4407	
5426	4408	
5427	4409	
5428	4410	
5429	4411	
5430	4412	
5431	4413	
5432	4414	
5433	4415	
5434	4416	
5435	4417	
5436	4418	
5437	4419	
5438	4420	
5439	4421	
5440	4422	
5441	4423	
5442	4424	
5443	4425	
5444	4426	
5445	4427	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : PAD DR. V. VIKHE PATIL INSTITUTE OF NURSING EDUCATION, AHMEDNAGAR

Date:-

Sr . No.	Seat No.	Signature of Student
5446	4428	
5447	4429	
5448	4430	
5449	4431	
5450	4432	
5451	4433	
5452	4434	
5453	4435	
5454	4436	
5455	4437	
5456	8009	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : GUILABRAO PATIL INSTITUTE OF NURSING SCIENCES, MIRAJ, SANGLI

Date:-

Sr . No.	Seat No.	Signature of Student
5457	4500	
5458	4501	
5459	4502	
5460	4503	
5461	4504	
5462	4505	
5463	4506	
5464	4507	
5465	4508	
5466	4509	
5467	4510	
5468	4511	
5469	4512	
5470	4513	
5471	4514	
5472	4515	
5473	4516	
5474	4517	
5475	4518	
5476	4519	
5477	4520	
5478	4521	
5479	4522	
5480	4523	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : GUILABRAO PATIL INSTITUTE OF NURSING SCIENCES, MIRAJ, SANGLI

Date:-

Sr . No.	Seat No.	Signature of Student
5481	4524	
5482	4525	
5483	4526	
5484	4527	
5485	4528	
5486	4529	
5487	4530	
5488	4531	
5489	4532	
5490	4533	
5491	4534	
5492	4535	
5493	4536	
5494	4537	
5495	4538	
5496	4539	
5497	4540	
5498	4541	
5499	4542	
5500	4543	
5501	4544	
5502	4545	
5503	4546	
5504	4547	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : GUILABRAO PATIL INSTITUTE OF NURSING SCIENCES, MIRAJ, SANGLI

Date:-

Sr . No.	Seat No.	Signature of Student
5505	4548	
5506	4549	
5507	4550	
5508	4551	
5509	4552	
5510	4553	
5511	4554	
5512	4555	
5513	4556	
5514	4557	
5515	4558	
5516	4559	
5517	4560	
5518	4561	
5519	4562	
5520	4563	
5521	4564	
5522	4565	
5523	4566	
5524	4567	
5525	4568	
5526	4569	
5527	4570	
5528	4571	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : GUILABRAO PATIL INSTITUTE OF NURSING SCIENCES, MIRAJ, SANGLI

Date:-

Sr . No.	Seat No.	Signature of Student
5529	4572	
5530	4573	
5531	4574	
5532	4575	
5533	4576	
5534	4577	
5535	4578	
5536	4579	
5537	4580	
5538	4581	
5539	4582	
5540	4583	
5541	4584	
5542	4585	
5543	4586	
5544	4587	
5545	4588	
5546	4589	
5547	4590	
5548	4591	
5549	4592	
5550	4593	
5551	4594	
5552	4595	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : GUILABRAO PATIL INSTITUTE OF NURSING SCIENCES, MIRAJ, SANGLI

Date:-

Sr . No.	Seat No.	Signature of Student
5553	4596	
5554	4597	
5555	4598	
5556	4599	
5557	4600	
5558	4601	
5559	4602	
5560	4603	
5561	4604	
5562	4605	
5563	4606	
5564	4607	
5565	4608	
5566	4609	
5567	4610	
5568	4611	
5569	4612	
5570	4613	
5571	4614	
5572	4615	
5573	4616	
5574	4617	
5575	4618	
5576	4619	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : GUILABRAO PATIL INSTITUTE OF NURSING SCIENCES, MIRAJ, SANGLI

Date:-

Sr . No.	Seat No.	Signature of Student
5577	4620	
5578	4621	
5579	4622	
5580	4623	
5581	4624	
5582	4625	
5583	4626	
5584	4627	
5585	4628	
5586	4629	
5587	4630	
5588	4631	
5589	4632	
5590	4633	
5591	4634	
5592	4635	
5593	4636	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Indira Gandhi Medical College & Hospital, Nagpur

Date:-

Sr . No.	Seat No.	Signature of Student
5594	5328	
5595	5329	
5596	5330	
5597	5331	
5598	5332	
5599	5333	
5600	5334	
5601	5335	
5602	5336	
5603	5337	
5604	5338	
5605	5339	
5606	5340	
5607	5341	
5608	5342	
5609	5343	
5610	5344	
5611	5345	
5612	5346	
5613	5347	
5614	5348	
5615	5349	
5616	5350	
5617	5351	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Indira Gandhi Medical College & Hospital, Nagpur

Date:-

Sr . No.	Seat No.	Signature of Student
5618	5352	
5619	5353	
5620	5354	
5621	5396	
5622	5397	
5623	5398	
5624	5399	
5625	5400	
5626	5401	
5627	5402	
5628	5403	
5629	5404	
5630	5405	
5631	5406	
5632	5407	
5633	5408	
5634	5409	
5635	5410	
5636	5411	
5637	5412	
5638	5413	
5639	5414	
5640	5415	
5641	5416	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Indira Gandhi Medical College & Hospital, Nagpur

Date:-

Sr . No.	Seat No.	Signature of Student
5642	5417	
5643	5418	
5644	5419	
5645	5420	
5646	5421	
5647	5422	
5648	5423	
5649	5424	
5650	5425	
5651	5426	
5652	5427	
5653	5428	
5654	5429	
5655	5430	
5656	5431	
5657	5432	
5658	5433	
5659	5434	
5660	5435	
5661	5436	
5662	5437	
5663	5438	
5664	5439	
5665	5440	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Indira Gandhi Medical College & Hospital, Nagpur

Date:-

Sr . No.	Seat No.	Signature of Student
5666	5441	
5667	5442	
5668	5443	
5669	5444	
5670	5445	
5671	5446	
5672	5447	
5673	5448	
5674	5449	
5675	5450	
5676	5451	
5677	5452	
5678	5453	
5679	5454	
5680	5455	
5681	5456	
5682	5457	
5683	5458	
5684	5459	
5685	5460	
5686	5461	
5687	5462	
5688	5463	
5689	5464	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Indira Gandhi Medical College & Hospital, Nagpur

Date:-

Sr . No.	Seat No.	Signature of Student
5690	5465	
5691	5466	
5692	5467	
5693	5468	
5694	5469	
5695	5470	
5696	5471	
5697	5472	
5698	5473	
5699	5474	
5700	5475	
5701	5476	
5702	5477	
5703	5478	
5704	5479	
5705	5480	
5706	5481	
5707	5482	
5708	5483	
5709	5484	
5710	5485	
5711	5486	
5712	5487	
5713	5488	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Indira Gandhi Medical College & Hospital, Nagpur

Date:-

Sr . No.	Seat No.	Signature of Student
5714	5489	
5715	5490	
5716	5491	
5717	5492	
5718	5493	
5719	5494	
5720	5495	
5721	5496	
5722	5497	
5723	5498	
5724	5499	
5725	5500	
5726	5501	
5727	5502	
5728	5503	
5729	5504	
5730	5505	
5731	5506	
5732	5507	
5733	5508	
5734	5509	
5735	5510	
5736	5511	
5737	5512	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Indira Gandhi Medical College & Hospital, Nagpur

Date:-

Sr . No.	Seat No.	Signature of Student
5738	5513	
5739	5514	
5740	5515	
5741	5516	
5742	5517	
5743	5518	
5744	5519	
5745	5520	
5746	5521	
5747	5522	
5748	5523	
5749	5524	
5750	5525	
5751	5526	
5752	5527	
5753	5528	
5754	5529	
5755	5530	
5756	5531	
5757	5532	
5758	5533	
5759	5534	
5760	5535	
5761	5536	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Indira Gandhi Medical College & Hospital, Nagpur

Date:-

Sr . No.	Seat No.	Signature of Student
5762	5537	
5763	5538	
5764	5539	
5765	5540	
5766	5541	
5767	5542	
5768	5543	
5769	5544	
5770	5545	
5771	5546	
5772	5547	
5773	5548	
5774	5549	
5775	5550	
5776	5551	
5777	5552	
5778	5553	
5779	5554	
5780	5555	
5781	5556	
5782	5557	
5783	5558	
5784	5559	
5785	5560	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : Indira Gandhi Medical College & Hospital, Nagpur

Date:-

Sr . No.	Seat No.	Signature of Student
5786	5561	
5787	5562	
5788	5563	
5789	5564	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
5790	5355	
5791	5356	
5792	5357	
5793	5358	
5794	5359	
5795	5360	
5796	5361	
5797	5362	
5798	5363	
5799	5364	
5800	5365	
5801	5366	
5802	5367	
5803	5368	
5804	5369	
5805	5370	
5806	5371	
5807	5372	
5808	5373	
5809	5374	
5810	5375	
5811	5376	
5812	5377	
5813	5378	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
5814	5379	
5815	5380	
5816	5381	
5817	5382	
5818	5383	
5819	5384	
5820	5385	
5821	5386	
5822	5387	
5823	5388	
5824	5389	
5825	5390	
5826	5391	
5827	5392	
5828	5393	
5829	5394	
5830	5395	
5831	5565	
5832	5566	
5833	5567	
5834	5568	
5835	5569	
5836	5570	
5837	5571	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
5838	5572	
5839	5573	
5840	5574	
5841	5575	
5842	5576	
5843	5577	
5844	5578	
5845	5579	
5846	5580	
5847	5581	
5848	5582	
5849	5583	
5850	5584	
5851	5585	
5852	5586	
5853	5587	
5854	5588	
5855	5589	
5856	5590	
5857	5591	
5858	5592	
5859	5593	
5860	5594	
5861	5595	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
5862	5596	
5863	5597	
5864	5598	
5865	5599	
5866	5600	
5867	5601	
5868	5602	
5869	5603	
5870	5604	
5871	5605	
5872	5606	
5873	5607	
5874	5608	
5875	5609	
5876	5610	
5877	5611	
5878	5612	
5879	5613	
5880	5614	
5881	5615	
5882	5616	
5883	5617	
5884	5618	
5885	5619	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
5886	5620	
5887	5621	
5888	5622	
5889	5623	
5890	5624	
5891	5625	
5892	5626	
5893	5627	
5894	5628	
5895	5629	
5896	5630	
5897	5631	
5898	5632	
5899	5633	
5900	5634	
5901	5635	
5902	5636	
5903	5637	
5904	5638	
5905	5639	
5906	5640	
5907	5641	
5908	5642	
5909	5643	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
5910	5644	
5911	5645	
5912	5646	
5913	5647	
5914	5648	
5915	5649	
5916	5650	
5917	5651	
5918	5652	
5919	5653	
5920	5654	
5921	5655	
5922	5656	
5923	5657	
5924	5658	
5925	5659	
5926	5660	
5927	5661	
5928	5662	
5929	5663	
5930	5664	
5931	5665	
5932	5666	
5933	5667	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
5934	5668	
5935	5669	
5936	5670	
5937	5671	
5938	5672	
5939	5673	
5940	5674	
5941	5675	
5942	5676	
5943	5677	
5944	5678	
5945	5679	
5946	5680	
5947	5681	
5948	5682	
5949	5683	
5950	5684	
5951	5685	
5952	5686	
5953	5687	
5954	5688	
5955	5689	
5956	5690	
5957	5691	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
5958	5692	
5959	5693	
5960	5694	
5961	5695	
5962	5696	
5963	5697	
5964	5698	
5965	5699	
5966	5700	
5967	5701	
5968	5702	
5969	5703	
5970	5704	
5971	5705	
5972	5706	
5973	5707	
5974	5708	
5975	5709	
5976	5710	
5977	5711	
5978	5712	
5979	5713	
5980	5714	
5981	5715	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
5982	5716	
5983	5717	
5984	5718	
5985	5719	
5986	5720	
5987	5721	
5988	5722	
5989	5723	
5990	5724	
5991	5725	
5992	5726	
5993	5727	
5994	5728	
5995	5729	
5996	5730	
5997	5731	
5998	5732	
5999	5733	
6000	5734	
6001	5735	
6002	5736	
6003	5737	
6004	5738	
6005	5739	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6006	5740	
6007	5741	
6008	5742	
6009	5743	
6010	5744	
6011	5745	
6012	5746	
6013	5747	
6014	5748	
6015	5749	
6016	5750	
6017	5751	
6018	5752	
6019	5753	
6020	5754	
6021	5755	
6022	5756	
6023	5757	
6024	5758	
6025	5759	
6026	5760	
6027	5761	
6028	5762	
6029	5763	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6030	5764	
6031	5765	
6032	5766	
6033	5767	
6034	5768	
6035	5769	
6036	5770	
6037	5771	
6038	5772	
6039	5773	
6040	5774	
6041	5775	
6042	5776	
6043	5777	
6044	5778	
6045	5779	
6046	5780	
6047	5781	
6048	5782	
6049	5783	
6050	5784	
6051	5785	
6052	5786	
6053	5787	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6054	5788	
6055	5789	
6056	5790	
6057	5791	
6058	5792	
6059	5793	
6060	5794	
6061	5795	
6062	5796	
6063	5797	
6064	5798	
6065	5799	
6066	5800	
6067	5801	
6068	5802	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : KASTURBA HEALTH SOCIETY, SEVAGRAM, WARDHA

Date:-

Sr . No.	Seat No.	Signature of Student
6069	5803	
6070	5804	
6071	5805	
6072	5806	
6073	5807	
6074	5808	
6075	5809	
6076	5810	
6077	5811	
6078	5812	
6079	5813	
6080	5814	
6081	5815	
6082	5816	
6083	5817	
6084	5818	
6085	5819	
6086	5820	
6087	5821	
6088	5822	
6089	5823	
6090	5824	
6091	5825	
6092	5826	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : KASTURBA HEALTH SOCIETY, SEVAGRAM, WARDHA

Date:-

Sr . No.	Seat No.	Signature of Student
6093	5827	
6094	5828	
6095	5829	
6096	5830	
6097	5831	
6098	5832	
6099	5833	
6100	5834	
6101	5835	
6102	5836	
6103	5837	
6104	5838	
6105	5839	
6106	5840	
6107	5841	
6108	5842	
6109	5843	
6110	5844	
6111	5845	
6112	5846	
6113	5847	
6114	5848	
6115	5849	
6116	5850	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : KASTURBA HEALTH SOCIETY, SEVAGRAM, WARDHA

Date:-

Sr . No.	Seat No.	Signature of Student
6117	5851	
6118	5852	
6119	5853	
6120	5854	
6121	5855	
6122	5856	
6123	5857	
6124	5858	
6125	5859	
6126	5860	
6127	5861	
6128	5862	
6129	5863	
6130	5864	
6131	5865	
6132	5866	
6133	5867	
6134	5868	
6135	5869	
6136	5870	
6137	5871	
6138	5872	
6139	5873	
6140	5874	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : KASTURBA HEALTH SOCIETY, SEVAGRAM, WARDHA

Date:-

Sr . No.	Seat No.	Signature of Student
6141	5875	
6142	5876	
6143	5877	
6144	5878	
6145	5879	
6146	5880	
6147	5881	
6148	5882	
6149	5883	
6150	5884	
6151	5885	
6152	5886	
6153	5887	
6154	5888	
6155	5889	
6156	5890	
6157	5891	
6158	5892	
6159	5893	
6160	5894	
6161	5895	
6162	5896	
6163	5897	
6164	5898	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : KASTURBA HEALTH SOCIETY, SEVAGRAM, WARDHA

Date:-

Sr . No.	Seat No.	Signature of Student
6165	5899	
6166	5900	
6167	5901	
6168	5902	
6169	5903	
6170	5904	
6171	5905	
6172	5906	
6173	5907	
6174	5908	
6175	5909	
6176	5910	
6177	5911	
6178	5912	
6179	5913	
6180	5914	
6181	5915	
6182	5916	
6183	5917	
6184	5918	
6185	5919	
6186	5920	
6187	5921	
6188	5922	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : KASTURBA HEALTH SOCIETY, SEVAGRAM, WARDHA

Date:-

Sr . No.	Seat No.	Signature of Student
6189	5923	
6190	5924	
6191	5925	
6192	5926	
6193	5927	
6194	5928	
6195	5929	
6196	5930	
6197	5931	
6198	5932	
6199	5933	
6200	5934	
6201	5935	
6202	5936	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
6203	5937	
6204	5938	
6205	5939	
6206	5940	
6207	5941	
6208	5942	
6209	5943	
6210	5944	
6211	5945	
6212	5946	
6213	5947	
6214	5948	
6215	5949	
6216	5950	
6217	5951	
6218	5952	
6219	5953	
6220	5954	
6221	5955	
6222	5956	
6223	5957	
6224	5958	
6225	5959	
6226	5960	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
6227	5961	
6228	5962	
6229	5963	
6230	5964	
6231	5965	
6232	5966	
6233	5967	
6234	5968	
6235	5969	
6236	5970	
6237	5971	
6238	5972	
6239	5973	
6240	5974	
6241	5975	
6242	5976	
6243	5977	
6244	5978	
6245	5979	
6246	5980	
6247	5981	
6248	5982	
6249	5983	
6250	5984	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
6251	5985	
6252	5986	
6253	5987	
6254	5988	
6255	5989	
6256	5990	
6257	5991	
6258	5992	
6259	5993	
6260	5994	
6261	5995	
6262	5996	
6263	5997	
6264	5998	
6265	5999	
6266	6000	
6267	6001	
6268	6002	
6269	6003	
6270	6004	
6271	6005	
6272	6006	
6273	6007	
6274	6008	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
6275	6009	
6276	6010	
6277	6011	
6278	6012	
6279	6013	
6280	6014	
6281	6015	
6282	6016	
6283	6017	
6284	6018	
6285	6019	
6286	6020	
6287	6021	
6288	6022	
6289	6023	
6290	6024	
6291	6025	
6292	6026	
6293	6027	
6294	6028	
6295	6029	
6296	6030	
6297	6031	
6298	6032	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
6299	6033	
6300	6034	
6301	6035	
6302	6036	
6303	6037	
6304	6038	
6305	6039	
6306	6040	
6307	6041	
6308	6042	
6309	6043	
6310	6044	
6311	6045	
6312	6046	
6313	6047	
6314	6048	
6315	6049	
6316	6050	
6317	6051	
6318	6052	
6319	6053	
6320	6054	
6321	6055	
6322	6056	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
6323	6057	
6324	6058	
6325	6059	
6326	6060	
6327	6061	
6328	6062	
6329	6063	
6330	6064	
6331	6065	
6332	6066	
6333	6067	
6334	6068	
6335	6069	
6336	6070	
6337	6071	
6338	6072	
6339	6073	
6340	6074	
6341	6075	
6342	6076	
6343	6077	
6344	6078	
6345	6079	
6346	6080	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
6347	6081	
6348	6082	
6349	6083	
6350	6084	
6351	6085	
6352	6086	
6353	6087	
6354	6088	
6355	6089	
6356	6090	
6357	6091	
6358	6092	
6359	6093	
6360	6094	
6361	6095	
6362	6096	
6363	6097	
6364	6098	
6365	6099	
6366	6100	
6367	6101	
6368	6102	
6369	6103	
6370	6104	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Akola

Date:-

Sr . No.	Seat No.	Signature of Student
6371	6105	
6372	7968	
6373	7969	
6374	7970	
6375	7971	
6376	7972	
6377	7973	
6378	7974	
6379	7975	
6380	7976	
6381	7977	
6382	7978	
6383	7979	
6384	7980	
6385	7981	
6386	7982	
6387	7983	
6388	7984	
6389	7985	
6390	7986	
6391	7987	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6392	6492	
6393	6493	
6394	6494	
6395	6495	
6396	6496	
6397	6497	
6398	6498	
6399	6499	
6400	6500	
6401	6501	
6402	6502	
6403	6503	
6404	6504	
6405	6505	
6406	6506	
6407	6507	
6408	6508	
6409	6509	
6410	6510	
6411	6511	
6412	6512	
6413	6513	
6414	6514	
6415	6515	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6416	6516	
6417	6517	
6418	6518	
6419	6519	
6420	6520	
6421	6521	
6422	6522	
6423	6523	
6424	6524	
6425	6525	
6426	6526	
6427	6527	
6428	6528	
6429	6529	
6430	6530	
6431	6531	
6432	6532	
6433	6533	
6434	6534	
6435	6535	
6436	6536	
6437	6537	
6438	6538	
6439	6539	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6440	6540	
6441	6541	
6442	6542	
6443	6543	
6444	6544	
6445	6545	
6446	6546	
6447	6547	
6448	6548	
6449	6549	
6450	6550	
6451	6551	
6452	6552	
6453	6553	
6454	6554	
6455	6555	
6456	6556	
6457	6557	
6458	6558	
6459	6559	
6460	6560	
6461	6561	
6462	6562	
6463	6563	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6464	6564	
6465	6565	
6466	6566	
6467	6567	
6468	6568	
6469	6569	
6470	6570	
6471	6571	
6472	6572	
6473	6573	
6474	6574	
6475	6575	
6476	6576	
6477	6577	
6478	6578	
6479	6579	
6480	6580	
6481	6581	
6482	6582	
6483	6583	
6484	6584	
6485	6585	
6486	6586	
6487	6587	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6488	6588	
6489	6589	
6490	6590	
6491	6591	
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6493	6593	
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6501	6601	
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6506	6606	
6507	6607	
6508	6608	
6509	6609	
6510	6610	
6511	6611	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6512	6612	
6513	6613	
6514	6614	
6515	6615	
6516	6616	
6517	6617	
6518	6618	
6519	6619	
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6527	6627	
6528	6628	
6529	6629	
6530	6630	
6531	6631	
6532	6632	
6533	6633	
6534	6634	
6535	6635	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6536	6636	
6537	6637	
6538	6638	
6539	6639	
6540	6640	
6541	6641	
6542	6642	
6543	6643	
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6553	6653	
6554	6654	
6555	6655	
6556	6656	
6557	6657	
6558	6658	
6559	6659	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6560	6660	
6561	6661	
6562	6662	
6563	6663	
6564	6664	
6565	6665	
6566	6666	
6567	6667	
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6571	6671	
6572	6672	
6573	6673	
6574	6674	
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6576	6676	
6577	6677	
6578	6678	
6579	6679	
6580	6680	
6581	6681	
6582	6682	
6583	6683	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6584	6684	
6585	6685	
6586	6686	
6587	6687	
6588	6688	
6589	6689	
6590	6690	
6591	6691	
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6601	6701	
6602	6702	
6603	6703	
6604	6704	
6605	6705	
6606	6706	
6607	6707	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6608	6708	
6609	6709	
6610	6710	
6611	6711	
6612	6712	
6613	6713	
6614	6714	
6615	6715	
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6625	6725	
6626	6726	
6627	6727	
6628	6728	
6629	6729	
6630	6730	
6631	6731	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6632	6732	
6633	6733	
6634	6734	
6635	6735	
6636	6736	
6637	6737	
6638	6738	
6639	6739	
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6647	6747	
6648	6748	
6649	6749	
6650	6750	
6651	6751	
6652	6752	
6653	6753	
6654	6754	
6655	6755	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6656	6756	
6657	6757	
6658	6758	
6659	6759	
6660	6760	
6661	6761	
6662	6762	
6663	6763	
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6671	6771	
6672	6772	
6673	6773	
6674	6774	
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6676	6776	
6677	6777	
6678	6778	
6679	6779	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6680	6780	
6681	6781	
6682	6782	
6683	6783	
6684	6784	
6685	6785	
6686	6786	
6687	6787	
6688	6788	
6689	6789	
6690	6790	
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6695	6795	
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6697	6797	
6698	6798	
6699	6799	
6700	6800	
6701	6801	
6702	6802	
6703	6803	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
6704	6804	
6705	6805	
6706	6806	
6707	6807	
6708	6808	
6709	6809	
6710	6810	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Latur

Date:-

Sr . No.	Seat No.	Signature of Student
6711	6811	
6712	6812	
6713	6813	
6714	6814	
6715	6815	
6716	6816	
6717	6817	
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6728	6828	
6729	6829	
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6731	6831	
6732	6832	
6733	6833	
6734	6834	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Latur

Date:-

Sr . No.	Seat No.	Signature of Student
6735	6835	
6736	6836	
6737	6837	
6738	6838	
6739	6839	
6740	6840	
6741	6841	
6742	6842	
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6750	6850	
6751	6851	
6752	6852	
6753	6853	
6754	6854	
6755	6855	
6756	6856	
6757	6857	
6758	6858	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Latur

Date:-

Sr . No.	Seat No.	Signature of Student
6759	6859	
6760	6860	
6761	6861	
6762	6862	
6763	6863	
6764	6864	
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6776	6876	
6777	6877	
6778	6878	
6779	6879	
6780	6880	
6781	6881	
6782	6882	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Latur

Date:-

Sr . No.	Seat No.	Signature of Student
6783	6883	
6784	6884	
6785	6885	
6786	6886	
6787	6887	
6788	6888	
6789	6889	
6790	6890	
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6798	6898	
6799	6899	
6800	6900	
6801	6901	
6802	6902	
6803	6903	
6804	6904	
6805	6905	
6806	6906	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Latur

Date:-

Sr . No.	Seat No.	Signature of Student
6807	6907	
6808	6908	
6809	6909	
6810	6910	
6811	6911	
6812	6912	
6813	6913	
6814	6914	
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6824	6924	
6825	6925	
6826	6926	
6827	6927	
6828	6928	
6829	6929	
6830	6930	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Latur

Date:-

Sr . No.	Seat No.	Signature of Student
6831	6931	
6832	6932	
6833	6933	
6834	6934	
6835	6935	
6836	6936	
6837	6937	
6838	6938	
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6846	6946	
6847	6947	
6848	6948	
6849	6949	
6850	6950	
6851	6951	
6852	6952	
6853	6953	
6854	6954	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Latur

Date:-

Sr . No.	Seat No.	Signature of Student
6855	6955	
6856	6956	
6857	6957	
6858	6958	
6859	6959	
6860	6960	
6861	6961	
6862	6962	
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6872	6972	
6873	6973	
6874	6974	
6875	6975	
6876	6976	
6877	6977	
6878	6978	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Latur

Date:-

Sr . No.	Seat No.	Signature of Student
6879	6979	
6880	6980	
6881	6981	
6882	6982	
6883	6983	
6884	6984	
6885	6985	
6886	6986	
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6893	6993	
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6895	6995	
6896	6996	
6897	6997	
6898	6998	
6899	6999	
6900	7000	
6901	7001	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : SHARDABAI PAWAR INSTITUTE OF NURSING, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
6902	3614	
6903	3615	
6904	3616	
6905	3617	
6906	3618	
6907	3619	
6908	3620	
6909	3621	
6910	3622	
6911	3623	
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6917	3629	
6918	3630	
6919	3631	
6920	3632	
6921	3633	
6922	3634	
6923	3635	
6924	3636	
6925	3637	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : SHARDABAI PAWAR INSTITUTE OF NURSING, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
6926	3638	
6927	3639	
6928	3640	
6929	3641	
6930	3642	
6931	3855	
6932	3856	
6933	3857	
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6941	3865	
6942	3866	
6943	3867	
6944	3868	
6945	3869	
6946	3870	
6947	3871	
6948	3872	
6949	3873	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : SHARDABAI PAWAR INSTITUTE OF NURSING, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
6950	3874	
6951	3875	
6952	3876	
6953	3877	
6954	3878	
6955	3879	
6956	3880	
6957	3881	
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6965	3889	
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6967	3891	
6968	3892	
6969	3893	
6970	3894	
6971	3895	
6972	3896	
6973	3897	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : SHARDABAI PAWAR INSTITUTE OF NURSING, PUNE

Date:-

Sr . No.	Seat No.	Signature of Student
6974	3898	
6975	3899	
6976	3900	
6977	3901	
6978	3902	
6979	3903	
6980	3904	
6981	3905	
6982	3906	
6983	3907	
6984	3908	
6985	3909	
6986	3910	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
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Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, SINDHUDURG

Date:-

Sr . No.	Seat No.	Signature of Student
6987	2126	
6988	2127	
6989	2128	
6990	2129	
6991	2130	
6992	2131	
6993	2132	
6994	2133	
6995	2134	
6996	2135	
6997	2136	
6998	2137	
6999	2138	
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7002	2141	
7003	2142	
7004	2143	
7005	2144	
7006	2145	
7007	2146	
7008	2147	
7009	2148	
7010	2149	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
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Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, SINDHUDURG

Date:-

Sr . No.	Seat No.	Signature of Student
7011	2150	
7012	2151	
7013	2152	
7014	2153	
7015	2154	
7016	2155	
7017	2156	
7018	2157	
7019	2158	
7020	2159	
7021	2160	
7022	2161	
7023	2162	
7024	2163	
7025	2164	
7026	2165	
7027	2166	
7028	2167	
7029	2168	
7030	2169	
7031	2170	
7032	2171	
7033	2172	
7034	2173	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, SINDHUDURG

Date:-

Sr . No.	Seat No.	Signature of Student
7035	2174	
7036	2175	
7037	2176	
7038	2177	
7039	2178	
7040	2179	
7041	2180	
7042	2181	
7043	2182	
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7045	2184	
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7047	2186	
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7049	2188	
7050	2189	
7051	2190	
7052	2191	
7053	2192	
7054	2193	
7055	2194	
7056	2195	
7057	2196	
7058	2197	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, SINDHUDURG

Date:-

Sr . No.	Seat No.	Signature of Student
7059	2198	
7060	2199	
7061	2200	
7062	2201	
7063	2202	
7064	2203	
7065	2204	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : VAIDYANATH NURSING SCHOOL, ,PARALI-VAIJNATH, BEED

Date:-

Sr . No.	Seat No.	Signature of Student
7066	7002	
7067	7003	
7068	7004	
7069	7005	
7070	7006	
7071	7007	
7072	7008	
7073	7009	
7074	7010	
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7083	7019	
7084	7020	
7085	7021	
7086	7022	
7087	7023	
7088	7024	
7089	7025	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : VAIDYANATH NURSING SCHOOL, ,PARALI-VAIJNATH, BEED

Date:-

Sr . No.	Seat No.	Signature of Student
7090	7026	
7091	7027	
7092	7028	
7093	7029	
7094	7030	
7095	7031	
7096	7032	
7097	7033	
7098	7034	
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7100	7036	
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7105	7041	
7106	7042	
7107	7043	
7108	7044	
7109	7045	
7110	7046	
7111	7047	
7112	7048	
7113	7049	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : VAIDYANATH NURSING SCHOOL, ,PARALI-VAIJNATH, BEED

Date:-

Sr . No.	Seat No.	Signature of Student
7114	7050	
7115	7051	
7116	7052	
7117	7053	
7118	7054	
7119	7055	
7120	7056	
7121	7057	
7122	7058	
7123	7059	
7124	7060	
7125	7061	
7126	7062	
7127	7063	
7128	7064	
7129	7065	
7130	7066	
7131	7067	
7132	7068	
7133	7069	
7134	7070	
7135	7071	
7136	7072	
7137	7073	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19

Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : VAIDYANATH NURSING SCHOOL, ,PARALI-VAIJNATH, BEED

Date:-

Sr . No.	Seat No.	Signature of Student
7138	7074	
7139	7075	
7140	7076	
7141	7077	
7142	7078	
7143	7079	
7144	7080	
7145	7081	
7146	7082	
7147	7083	
7148	7084	
7149	7085	
7150	7086	
7151	7087	
7152	7088	
7153	7089	
7154	7090	
7155	7091	
7156	7092	
7157	7093	
7158	7094	
7159	7095	
7160	7096	
7161	7097	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : VAIDYANATH NURSING SCHOOL, ,PARALI-VAIJNATH, BEED

Date:-

Sr . No.	Seat No.	Signature of Student
7162	7098	
7163	7099	
7164	7100	
7165	7101	
7166	7102	
7167	7103	
7168	7104	
7169	7105	
7170	7106	
7171	7107	
7172	7108	
7173	7109	
7174	7110	
7175	7111	
7176	7112	
7177	7113	
7178	7163	
7179	7164	
7180	7165	
7181	7166	
7182	7167	
7183	7168	
7184	7169	
7185	7170	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

Center Name : VAIDYANATH NURSING SCHOOL, ,PARALI-VAIJNATH, BEED

Date:-

Sr . No.	Seat No.	Signature of Student
7186	7171	
7187	7172	
7188	7173	
7189	7174	
7190	7175	
7191	7176	
7192	7177	
7193	7178	
7194	7179	
7195	7180	
7196	7181	
7197	7182	
7198	7183	
7199	7184	
7200	7185	
7201	7186	
7202	7187	
7203	7188	
7204	7189	
7205	7190	
7206	7191	
7207	7192	
7208	7193	
7209	7194	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR

Subject : COMMUNITY HEALTH NURSING

Center Name : VAIDYANATH NURSING SCHOOL, ,PARALI-VAIJNATH, BEED

Date:-

Sr . No.	Seat No.	Signature of Student
7210	7195	
7211	7196	
7212	7197	
7213	7198	
7214	7199	
7215	7200	
7216	7201	
7217	7202	
7218	7203	
7219	7204	
7220	7205	
7221	7206	
7222	7207	
7223	7208	
7224	7209	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
7225	7210	
7226	7211	
7227	7212	
7228	7213	
7229	7214	
7230	7215	
7231	7216	
7232	7217	
7233	7218	
7234	7219	
7235	7220	
7236	7221	
7237	7222	
7238	7223	
7239	7224	
7240	7225	
7241	7226	
7242	7227	
7243	7228	
7244	7229	
7245	7230	
7246	7231	
7247	7232	
7248	7233	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
7249	7234	
7250	7235	
7251	7236	
7252	7237	
7253	7238	
7254	7239	
7255	7240	
7256	7241	
7257	7242	
7258	7243	
7259	7244	
7260	7245	
7261	7246	
7262	7247	
7263	7248	
7264	7249	
7265	7250	
7266	7251	
7267	7252	
7268	7253	
7269	7254	
7270	7255	
7271	7256	
7272	7257	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
7273	7258	
7274	7259	
7275	7260	
7276	7261	
7277	7262	
7278	7263	
7279	7264	
7280	7265	
7281	7266	
7282	7267	
7283	7268	
7284	7269	
7285	7270	
7286	7271	
7287	7272	
7288	7273	
7289	7274	
7290	7275	
7291	7276	
7292	7277	
7293	7278	
7294	7279	
7295	7280	
7296	7281	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
7297	7282	
7298	7283	
7299	7284	
7300	7285	
7301	7286	
7302	7287	
7303	7288	
7304	7289	
7305	7290	
7306	7291	
7307	7292	
7308	7293	
7309	7294	
7310	7295	
7311	7296	
7312	7297	
7313	7298	
7314	7299	
7315	7300	
7316	7301	
7317	7302	
7318	7303	
7319	7304	
7320	7305	

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

Date:-

Sr . No.	Seat No.	Signature of Student
7321	7306	
7322	7307	
7323	7308	
7324	7309	
7325	7310	
7326	7311	
7327	7312	
7328	7313	
7329	7314	
7330	7315	
7331	7316	
7332	7317	
7333	7318	
7334	7319	
7335	7320	
7336	7321	
7337	7322	
7338	7323	
7339	7324	
7340	7325	
7341	7326	
7342	7327	
7343	7328	
7344	7329	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
7345	7330	
7346	7331	
7347	7332	
7348	7333	
7349	7334	
7350	7335	
7351	7336	
7352	7337	
7353	7338	
7354	7339	
7355	7340	
7356	7341	
7357	7342	
7358	7343	
7359	7344	
7360	7345	
7361	7346	
7362	7347	
7363	7348	
7364	7349	
7365	7350	
7366	7351	
7367	7352	
7368	7353	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
7369	7354	
7370	7355	
7371	7356	
7372	7357	
7373	7358	
7374	7359	
7375	7360	
7376	7361	
7377	7362	
7378	7363	
7379	7364	
7380	7365	
7381	7366	
7382	7367	
7383	7368	
7384	7369	
7385	7370	
7386	7371	
7387	7372	
7388	7373	
7389	7374	
7390	7375	
7391	7376	
7392	7377	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
7393	7378	
7394	7379	
7395	7380	
7396	7381	
7397	7382	
7398	7383	
7399	7384	
7400	7385	
7401	7386	
7402	7387	
7403	7388	
7404	7389	
7405	7390	
7406	7391	
7407	7392	
7408	7393	
7409	7394	
7410	7395	
7411	7396	
7412	7397	
7413	7398	
7414	7399	
7415	7400	
7416	7401	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING

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

Date:-

Sr . No.	Seat No.	Signature of Student
7417	7402	
7418	7403	
7419	7404	
7420	7405	
7421	7406	
7422	7407	
7423	7408	
7424	7409	
7425	7410	
7426	7411	
7427	7412	
7428	7413	
7429	7414	
7430	7415	
7431	7416	
7432	7417	
7433	7418	
7434	7419	
7435	7420	
7436	7421	
7437	7422	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Jalna

Date:-

Sr . No.	Seat No.	Signature of Student
7438	7423	
7439	7424	
7440	7425	
7441	7426	
7442	7427	
7443	7428	
7444	7429	
7445	7430	
7446	7431	
7447	7432	
7448	7433	
7449	7434	
7450	7435	
7451	7436	
7452	7437	
7453	7438	
7454	7439	
7455	7440	
7456	7441	
7457	7442	
7458	7443	
7459	7444	
7460	7445	
7461	7446	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Jalna

Date:-

Sr . No.	Seat No.	Signature of Student
7462	7447	
7463	7448	
7464	7449	
7465	7450	
7466	7451	
7467	7452	
7468	7453	
7469	7454	
7470	7455	
7471	7456	
7472	7457	
7473	7458	
7474	7459	
7475	7460	
7476	7461	
7477	7462	
7478	7463	
7479	7464	
7480	7465	
7481	7466	
7482	7467	
7483	7468	
7484	7469	
7485	7470	

Signature of centre incharge

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Date:-

Sr . No.	Seat No.	Signature of Student
7486	7471	
7487	7472	
7488	7473	
7489	7474	
7490	7475	
7491	7476	
7492	7477	
7493	7478	
7494	7479	
7495	7480	
7496	7481	
7497	7482	
7498	7483	
7499	7484	
7500	7485	
7501	7486	
7502	7487	
7503	7488	
7504	7489	
7505	7490	
7506	7491	
7507	7492	
7508	7493	
7509	7494	

Signature of centre incharge

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Center Name : GENERAL HOSPITAL, Jalna

Date:-

Sr . No.	Seat No.	Signature of Student
7510	7495	
7511	7496	
7512	7497	
7513	7498	
7514	7499	
7515	7500	
7516	7501	
7517	7502	
7518	7503	
7519	7504	
7520	7505	
7521	7506	
7522	7507	
7523	7508	
7524	7509	
7525	7510	
7526	7511	
7527	7512	
7528	7513	
7529	7514	
7530	7515	
7531	7516	
7532	7517	
7533	7518	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Jalna

Date:-

Sr . No.	Seat No.	Signature of Student
7534	7519	
7535	7520	
7536	7521	
7537	7522	
7538	7523	
7539	7524	
7540	7525	
7541	7526	
7542	7527	
7543	7528	
7544	7529	
7545	7530	
7546	7531	
7547	7532	
7548	7533	
7549	7534	
7550	7535	
7551	7536	
7552	7537	
7553	7538	
7554	7539	
7555	7540	
7556	7541	
7557	7542	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Jalna

Date:-

Sr . No.	Seat No.	Signature of Student
7558	7543	
7559	7544	
7560	7545	
7561	7546	
7562	7547	
7563	7548	
7564	7549	
7565	7550	
7566	7551	
7567	7552	
7568	7553	
7569	7554	
7570	7555	
7571	7556	
7572	7557	
7573	7558	
7574	7559	
7575	7560	
7576	7561	
7577	7562	
7578	7563	
7579	7564	
7580	7565	
7581	7566	

Signature of centre incharge

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Jalna

Date:-

Sr . No.	Seat No.	Signature of Student
7582	7567	
7583	7568	
7584	7569	
7585	7570	
7586	7571	
7587	7572	
7588	7573	
7589	7574	
7590	7575	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : District Hospital Beed

Date:-

Sr . No.	Seat No.	Signature of Student
7591	7576	
7592	7577	
7593	7578	
7594	7579	
7595	7580	
7596	7581	
7597	7582	
7598	7583	
7599	7584	
7600	7585	
7601	7586	
7602	7587	
7603	7588	
7604	7589	
7605	7590	
7606	7591	
7607	7592	
7608	7593	
7609	7594	
7610	7595	
7611	7596	
7612	7597	
7613	7598	
7614	7599	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : District Hospital Beed

Date:-

Sr . No.	Seat No.	Signature of Student
7615	7600	
7616	7601	
7617	7602	
7618	7603	
7619	7604	
7620	7605	
7621	7606	
7622	7607	
7623	7608	
7624	7609	
7625	7610	
7626	7611	
7627	7612	
7628	7613	
7629	7614	
7630	7615	
7631	7616	
7632	7617	
7633	7618	
7634	7619	
7635	7620	
7636	7621	
7637	7622	
7638	7623	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : District Hospital Beed

Date:-

Sr . No.	Seat No.	Signature of Student
7639	7624	
7640	7625	
7641	7626	
7642	7627	
7643	7628	
7644	7629	
7645	7630	
7646	7631	
7647	7632	
7648	7633	
7649	7634	
7650	7635	
7651	7636	
7652	7637	
7653	7638	
7654	7639	
7655	7640	
7656	7641	
7657	7642	
7658	7643	
7659	7644	
7660	7645	
7661	7646	
7662	7647	

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Date:-

Sr . No.	Seat No.	Signature of Student
7663	7648	
7664	7649	
7665	7650	
7666	7651	
7667	7652	
7668	7653	
7669	7654	
7670	7655	
7671	7656	
7672	7657	
7673	7658	
7674	7659	
7675	7660	
7676	7661	
7677	7662	
7678	7663	
7679	7664	
7680	7665	
7681	7666	
7682	7667	
7683	7668	
7684	7669	
7685	7670	
7686	7671	

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Date:-

Sr . No.	Seat No.	Signature of Student
7687	7672	
7688	7673	
7689	7674	
7690	7675	
7691	7676	
7692	7677	
7693	7678	
7694	7679	
7695	7680	
7696	7681	
7697	7682	
7698	7683	
7699	7684	
7700	7685	
7701	7686	
7702	7687	
7703	7688	
7704	7689	
7705	7690	
7706	7691	
7707	7692	
7708	7693	
7709	7694	
7710	7695	

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Center Name : District Hospital Beed

Date:-

Sr . No.	Seat No.	Signature of Student
7711	7696	
7712	7697	
7713	7698	
7714	7699	
7715	7700	
7716	7701	
7717	7702	
7718	7703	
7719	7704	
7720	7705	
7721	7706	
7722	7707	
7723	7708	
7724	7709	
7725	7710	
7726	7711	
7727	7712	
7728	7713	
7729	7714	
7730	7715	
7731	7716	
7732	7717	
7733	7718	
7734	7719	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : District Hospital Beed

Date:-

Sr . No.	Seat No.	Signature of Student
7735	7720	
7736	7721	
7737	7722	
7738	7723	
7739	7724	
7740	7725	
7741	7726	
7742	7727	
7743	7728	
7744	7729	
7745	7730	
7746	7731	
7747	7732	
7748	7733	
7749	7734	
7750	7735	

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Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Parbhani

Date:-

Sr . No.	Seat No.	Signature of Student
7751	7736	
7752	7737	
7753	7738	
7754	7739	
7755	7740	
7756	7741	
7757	7742	
7758	7743	
7759	7744	
7760	7745	
7761	7746	
7762	7747	
7763	7748	
7764	7749	
7765	7750	
7766	7751	
7767	7752	
7768	7753	
7769	7754	
7770	7755	
7771	7756	
7772	7757	
7773	7758	
7774	7759	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Parbhani

Date:-

Sr . No.	Seat No.	Signature of Student
7775	7760	
7776	7761	
7777	7762	
7778	7763	
7779	7764	
7780	7765	
7781	7766	
7782	7767	
7783	7768	
7784	7769	
7785	7770	
7786	7771	
7787	7772	
7788	7773	
7789	7774	
7790	7775	
7791	7776	
7792	7777	
7793	7778	
7794	7779	
7795	7780	
7796	7781	
7797	7782	
7798	7783	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Parbhani

Date:-

Sr . No.	Seat No.	Signature of Student
7799	7784	
7800	7785	
7801	7786	
7802	7787	
7803	7788	
7804	7789	
7805	7790	
7806	7791	
7807	7792	
7808	7793	
7809	7794	
7810	7795	
7811	7796	
7812	7797	
7813	7798	
7814	7799	
7815	7800	
7816	7801	
7817	7802	
7818	7803	
7819	7804	
7820	7805	
7821	7806	
7822	7807	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

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Center Name : GENERAL HOSPITAL, Parbhani

Date:-

Sr . No.	Seat No.	Signature of Student
7823	7808	
7824	7809	
7825	7810	
7826	7811	
7827	7812	
7828	7813	
7829	7814	
7830	7815	
7831	7816	
7832	7817	
7833	7818	
7834	7819	
7835	7820	
7836	7821	
7837	7822	
7838	7823	
7839	7824	
7840	7825	
7841	7826	
7842	7827	
7843	7828	
7844	7829	
7845	7830	
7846	7831	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Parbhani

Date:-

Sr . No.	Seat No.	Signature of Student
7847	7832	
7848	7833	
7849	7834	
7850	7835	
7851	7836	
7852	7837	
7853	7838	
7854	7839	
7855	7840	
7856	7841	
7857	7842	
7858	7843	
7859	7844	
7860	7845	
7861	7846	
7862	7847	
7863	7848	
7864	7849	
7865	7850	
7866	7851	
7867	7852	
7868	7853	
7869	7854	
7870	7855	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Parbhani

Date:-

Sr . No.	Seat No.	Signature of Student
7871	7856	
7872	7857	
7873	7858	
7874	7859	
7875	7860	
7876	7861	
7877	7862	
7878	7863	
7879	7864	
7880	7865	
7881	7866	
7882	7867	
7883	7868	
7884	7869	
7885	7870	
7886	7871	
7887	7872	
7888	7873	
7889	7874	
7890	7875	
7891	7876	
7892	7877	
7893	7878	
7894	7879	

Signature of centre incharge

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Subject : COMMUNITY HEALTH NURSING
Center Name : GENERAL HOSPITAL, Parbhani

Date:-

Sr . No.	Seat No.	Signature of Student
7895	7880	
7896	7881	
7897	7882	
7898	7883	
7899	7884	
7900	7885	
7901	7886	
7902	7887	
7903	7888	
7904	7889	
7905	7890	
7906	7891	
7907	7892	
7908	7893	
7909	7894	
7910	7895	
7911	7896	
7912	7897	
7913	7898	
7914	7899	
7915	7900	
7916	7901	
7917	7902	
7918	7903	

Signature of centre incharge

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Center Name : GENERAL HOSPITAL, Parbhani

Date:-

Sr . No.	Seat No.	Signature of Student
7919	7904	
7920	7905	
7921	7906	
7922	7907	
7923	7908	
7924	7909	
7925	7910	
7926	7911	
7927	7912	
7928	7913	
7929	7914	
7930	7915	
7931	7916	
7932	7917	
7933	7918	
7934	7919	
7935	7920	
7936	7921	
7937	7922	
7938	7923	
7939	7924	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : S.R.T.R. Govt. Med. College Hospital, Ambejogai

Date:-

Sr . No.	Seat No.	Signature of Student
7940	6286	
7941	6287	
7942	6288	
7943	6289	
7944	6290	
7945	6291	
7946	6292	
7947	6293	
7948	6294	
7949	6295	
7950	6296	
7951	6297	
7952	6298	
7953	6299	
7954	6300	
7955	6301	
7956	6302	
7957	6303	
7958	6304	
7959	6305	
7960	6306	
7961	7114	
7962	7115	
7963	7116	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : S.R.T.R. Govt. Med. College Hospital, Ambejogai

Date:-

Sr . No.	Seat No.	Signature of Student
7964	7117	
7965	7118	
7966	7119	
7967	7120	
7968	7121	
7969	7122	
7970	7123	
7971	7124	
7972	7125	
7973	7126	
7974	7127	
7975	7128	
7976	7129	
7977	7130	
7978	7131	
7979	7132	
7980	7133	
7981	7134	
7982	7135	
7983	7136	
7984	7137	
7985	7138	
7986	7139	
7987	7140	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
Examination Name : GENERAL NURSING AND MIDWIFERY FIRST YEAR
Subject : COMMUNITY HEALTH NURSING
Center Name : S.R.T.R. Govt. Med. College Hospital, Ambejogai

Date:-

Sr . No.	Seat No.	Signature of Student
7988	7141	
7989	7142	
7990	7143	
7991	7144	
7992	7145	
7993	7146	
7994	7147	
7995	7148	
7996	7149	
7997	7150	
7998	7151	
7999	7152	
8000	7153	
8001	7154	
8002	7155	
8003	7156	
8004	7157	
8005	7158	
8006	7159	
8007	7160	
8008	7161	
8009	7162	

Signature of centre incharge

MAHARASHTRA STATE BOARD OF NURSING AND PARAMEDICAL EDUCATION

Academic Year : 2018-19
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Subject : COMMUNITY HEALTH NURSING
Center Name : S.R.T.R. Govt. Med. College Hospital, Ambejogai

Date:-

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