

FOURTH SCHEDULE FORM B

Application to sit for the **FINAL EXAMINATION**

This form is to be filled in and signed by the Candidate.

A marriage certificate should accompany this form (if married since entering the school). This filled application form, a copy of your Social Security card, deposit slip and any other documents requested in the **MEMO** must be submitted for registration of examination.

All documents must reach the Nurses and Midwives Council of Belize no later than the due date given on the **MEMO**.

IMPORTANT – Before submitting this Form please check to see that the names given on the entry Form agree with the names given on your Birth Certificate and that the spelling is the same. If any changes have been made since the entry of your name on the Index of Student Nurses, the Birth Certificate and a copy of the Deed Poll must be sent with entry form.

I submit here with my application to sit the final examination in _____

My particulars are as follows: -

Surname _____
(These names and spelling must agree with your birth certificate)

Other Names in full _____
(First) (Middle)

Date of Birth: _____

Permanent Private Address: _____
(Council should be notified if any changes)

Contact no# _____ email address: _____

Marital Status: () Single () Married () Common-Law Gender: **M/F**

If you are already registered on **any** part of the Register; please state the part of the Register and provide your number. _____

Have you previously entered for the Final Examination? _____

If so, state year and results. Year _____ Grade: _____

Year _____ Grade: _____

Name of Nursing School _____

Application fee of \$300.00BZ should be deposited into the Nurses and Midwives Council account at **Belize Bank Limited account # 233986010120025**

Date: _____

Signature: _____

