

Student Nurses' Assocation of India of

The Trained Nurses' Association of India

Incorporating Students Nurses' Association, Health Visitors' League and Midwives & Auxiliary Nurse- Midwives Association

L-17, Florence Nightingale Lane, Green Park, New Delhi- 110016. INDIA
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APPLICATION FORM FOR ESTABLISHING SNA-TNAI MEMBERSHIP SUBSCRIPTION

Write with ball pen (black) in CAPITAL LETTERS Only with one letter in one box. Each word should be separated by one blank box.
Write complete address with District, PINCODE, Mandatory
Applicant Should sign in full. clearly within the boxes provided.
Incomplete form will be rejected.

Signature

PASTE YOUR PHOTOGRAPH DO NOT STAPLE

Name & Address of the Institution :																										
Name of Student. : Sr. ☐ Mrs. ☐ Mr. ☐ Ms. ☐ (Please tick (✓) as appropriate)											te)															
																	Date	of B	irth [
Father's Name				ŀ	lusb	and'	s Na	me [ie [] (Tick the		appropria]				(DD)		(MM)		(YY)	
Add	Address																									
																				Pin	Pin Code (Complusory)					
E-mail : Mobile No. :																										
Programme Offered: B.Sc. (N) GNM MPHW (F)																										
Aca	cademic Year From : DD MM YY DD MM YY															Name of the Principal : TNAI No.:										
Nam	me of the Nursing Registration Council :															Signature :										

TRUCTIONS:

- 1. All Application forms will be accepted only when it is recommended by the Director of Nursing/Principal/Principal Tutor.
- 2. Every Student is required to pay one-time payment of Rs. 2000/- at the time of admission. This payment is inclusive of SNA subscription for 4 Years, Scholarship fund and SNA-TNAI membership.
- 3. Candidate's name, Father's name and Date of birth with passport size photo and signature are mandatory to issue SNA ID card.
- 4. Do not staple your photograph.
- 5. Do not send any other certificates like Mark sheet, Aadhar Card etc.
- 6. The TNAI membership cards will be issued to you once a copy of your State Nurses registration council certificate (RN/RM) and a letter from the principal of the respective school/ college of Nursing is submitted to TNAI.
- 7. Application form completed in all respects should be sent to the Secretary General, L-17, Florence Nightingale Lane, Green Park, New Delhi-110016 along with membership fee through Demand Draft in Favor of "The Trained Nurses' Association of India" by 31st December.
- 8. All rates are subject to revision from time to time by the TNAI Council.