



**TISI SANGAM INSTITUTE OF TECHNOLOGY  
SANGAM COLLEGE OF NURSING  
AND HEALTH CARE EDUCATION**



**BACHELOR OF NURSING SCIENCE APPLICATION FORM - 2024**

**B1**

The Sangam College of Nursing was established in 2005 following a Cabinet Decision and subsequent signing in 2004 of the Deed of Agreement (DOA) between the Government of Fiji and TISI Sangam.

**INSTRUCTIONS**

Each candidate must complete this form legibly and send to: The Director, TISI Sangam College of Nursing & Health Care Education P. O. Box 2047, Labasa.  
The closing date for the application will be indicated in the advertisement. Documents to be submitted with this form are as follows:

- i. A recent passport size photo stapled in the space provided above.
- ii. Certified copy of your birth certificate.
- iii. CERTIFIED copies of your academic transcripts.
- iv. TIN Letter
- v. A recent reference from the School Principal or employer.

**PHOTOGRAPH**

Write your full name on the back of a recent photograph (passport size). Your application will be deemed 'incomplete if photograph is omitted.

**PERSONAL PARTICULARS**

- 1. NAME IN FULL (as in birth certificate): \_\_\_\_\_
- 2. Place of Birth: \_\_\_\_\_ 3. Date of Birth: \_\_\_\_\_
- 4. Citizenship: \_\_\_\_\_ 5. Ethnicity: \_\_\_\_\_ 6. Gender: \_\_\_\_\_
- 7. Marital Status: \_\_\_\_\_ 8. TIN Number: \_\_\_\_\_
- 9. (a) Present Postal Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

(b) Your contact address and telephone number from December to January

\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**10. EDUCATIONAL RECORDS.** (Complete the following for Forms 6 and 7 education at secondary school /or tertiary Institution)

(a) Current / Last School Attended:  
\_\_\_\_\_

(b) FSLC Code No. : \_\_\_\_\_ (c) Form 7 Code No.: \_\_\_\_\_

FIJI SCHOOL LEAVING CERTIFICATE			FORM 7 / FOUNDATION			OTHER TERTIARY INSTITUTION		
SCHOOL:			SCHOOL:			SCHOOL:		
SUBJECTS TAKEN	RESULT YEAR:	RESULT YEAR:	SUBJECTS TAKEN	RESULT YEAR:	RESULT YEAR:	SUBJECTS TAKEN	RESULT YEAR:	RESULT YEAR:
ENGLISH			ENGLISH					
BIOLOGY			BIOLOGY					
<b>TOTAL</b> (English, Biology + 2 best subjects)								

10. List all employment during the last 3 years if applicable.

OCCUPATION	NAME OF EMPLOYER	DATES EMPLOYED		REASON FOR LEAVING
		FROM	TO	

11. Hobbies / Interests

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12. Any other information which you consider relevant to this application?

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***Please note that only shortlisted candidates will be contacted. If you have not been contacted by Sangam College of Nursing, then your application has not been successful.***

**DECLARATION BY APPLICANT**

I \_\_\_\_\_ declare that the information made in this application form, to the best of my knowledge, are accurate and complete. If awarded a place to undergo the Bachelor of Nursing Course, I undertake to comply fully all financial obligations required for my training.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date