

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

INFORMATION BROCHURE

Certificate Course in Assistant Nursing in Ayurved

(Year -2016 : Duration- Six Months)

DEPARTMENT OF AYUSH

The goal of this fellowship course is to provide Nursing Assistance in Ayurvedic Hospitals.

Who can apply?

- B. Sc (Nursing) / GNM Nursing
- Reservations as per MUHS rules.
- Language of course: Marathi, Sanskrit, Hindi & English
- Intake capacity: 10

Fees: Rs. 30,000/-

Topics (Syllabus)

- Basic knowledge of Anatomy
- Genital organs
- Introduction to Gynaecology & Obstetrics

- Basic concepts of Ayurveda e.g. Aahaar Pathya- Apathya (Diet)
- Panchakarma procedures & instruments used
- Preparation of Ayurvedic formulations
- Assistance in Labour.
- Communication Skills
- Managerial skills
- Practical Sessions
 - Exposure to various OPD & IPD patient management
 - Demonstrations of various Panchakarma procedures

• Specific Learning Objectives (SLOs):

At the end of the certificate course learner should be able to-

 Develop basic understanding of assistance to Ayurvedic Physicians.

- Complement existing knowledge of Nursing with Ayurvedic management.
- > Learn skills of assistant nursing in Ayurved..

• Future Prospects and Placement:

- Placements in Ayurvedic hospitals.
- Placements in Ayurvedic Panchakarma clinics.
- Placements in Wellness Clinics and Polyclinics in Metrocities.
- Placements in multispeciality hospital with Ayurvedic Department.

On successful completion of all modules of the course and qualifying the examination, the candidate will be awarded a Certificate in Assistant Nursing in Ayurved.

Submission of application forms on the following address: The Registrar, Maharashtra University of Health Sciences, Vani Road, Mhasrul, Nashik - 422 004 along with a D.D. of Rs. 500/- in favour of "Registrar, MUHS, Nashik". D.D. should be drawn on any Branch of nationalized bank payable at Nashik. The envelope should be superscripted with "Certificate Course in Assistant Nursing in Ayurved - Application form". Phone – 0253-2539125, FAX- 0253-2539125 E-mail- ayush@muhsnashik.com, ayush@muhs.ac.in

Last Date of Submission of Application – 10th June 2016



MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

Department of AYUSH

Registration No

 Category
 SC
 ST
 VJ
 NT1
 NT2
 NT3
 OBC
 SBC
 Open
 PH

(For Office Use Only)

Application Form

Certificate Course in Assistant Nursing in Ayurved

Please affix your recent Photograph

I confirm my intention to attend the **Certificate Course in Assistant Nursing in Ayurved**. I accept the University's admission procedures and understand that the processing of personal information and documents is subject to the requirements of the data protection act.

01) Name:							
In Capital letters	Surname	First name		Father's/Husband's Name			
2) Name in Devnaga	ri Script:		 				
		Surname	First name	Father's/Husband's Name			
3) Address for Corre	espondence:						
				Pin Code	 9:		
04) Contact: Tel. No with STD:		Mo	Mobile:		Email:		
5) Date of Birth: /	1	(in Words):					
06) Age (as on 10/06/2016) Year/s:		Мс	Month/s:		Day/s:		
3) Nationality:		8) Religion:					
9) Whether belong t	o SC/ST/VJ/NT/	OBC/SBC/Ope	en:	10) Cas	ste:		
1)Sex: Male (Please stri	· · · · · · · · · · · · · · · · · · ·		12) Marit	tal Status:	Married (Please stri	Unmarried ke √	
3)Application Fee: I		Date of DD:					
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DD should be drawn or	any Nationalised	Ponk in fover of	: "The Degistrer	MILLIC Nook	aik" and cha	uld	

(DD should be drawn on any Nationalised Bank in favor of "The Registrar, MUHS, Nashik" and should payable at Nashik only. **Kindly write your name and address at the back side of DD**)

14) Educational Qualification: (Mandatory to attach all necessary copies of attested mark sheets) Yr. of Name of Name of Total Perce-Exam. **Attempts** No. Insti./College **Passed Passing Board/University** Marks ntage 15) Presently Secured admission for any PG/Diploma Course (Write Yes/No) 16) Discontinued any PG admission in past: (Write Yes/No) 17) Passport No. (If Non India):_____ Write 18) Language Known: Read Speak 19) Any other information, which you would like to provide: _____ if (Please attach separate sheet, necessary) **DECLARATION** I hereby declare that I have not taken admission in any other Post Graduate Degree / Diploma course during this year & not in previous year in MUHS or in any other University. I further declare that, if it is proved that I have secured admission for any of the PG course presently and / or discontinued admission in past, MUHS has full right to cancel my current vear's admission without refund. The information furnished by me is correct and true. If any information submitted here is incorrect, untrue or fraudulent, I understand that I am liable for Civil / Criminal action by the Authority. Place: Date:____

Note:

- 1) Last date of receiving fully completed applications is 10th June 2016
- 2) Please attach all **Attested Photocopies** of the documents along with the application form.
- 3) Application forms which are Incomplete / Without Application fees will be rejected immediately and no correspondence will be entertained on this behalf.

Signature of Applicant

> The application form must be filled by the candidate in his / her own handwriting using black ball point pen and submit it on or before last date of submission of the application forms on the following address:

The Registrar,
Maharashtra University of Health Sciences,
Vani Road, Mhasrul, Nashik - 422 004.

- > Following attested photocopies are required to be submitted along with the application form strictly in given order:
- a) Nationality Certificate issued by District Magistrate/ Additional District Magistrate/ Chief Metropolitan Magistrate or
 - b) Photocopy of Valid Passport duly attested by Dean/ Principal /Director or
 - c) Domicile Certificate or
 - d) Birth Certificate endorsed with Nationality as 'Indian' on it.
- 2. Degree Certificate (UG/PG) (whichever is applicable)
- 3. Central/ State Council Registration Certificate
- 4. Experience Certificate (If applicable)
- 5. Leaving/ Transfer Certificate / Continuation letter
- 6. Caste Certificate (if applicable)
- 7. Caste Validity Certificate
 - (It is mandatory to the candidate belonging to reserved category to submit Caste Certificate duly supported by Caste Validity Certificate & Non Creamy Layer Certificate (if any), failing which proposal will not be accepted)
- 8. Valid Non-creamy Layer Certificate for DT/VJ, NT, OBC, SBC
- 9. Migration Certificate (if applicable)
- 10. Gazette copy / Marriage Certificate in case of change in name
- 11. Affidavit for Education Gap Certificate (made by the student duly certified by the Executive Magistrate) (if applicable)