



**APPLICATION FOR EXAMINATION
MALAYSIA NURSING BOARD (MNB)/ MALAYSIA MIDWIVES BOARD (MMB)**

A : STUDENT/ TRAINEE PERSONAL DETAILS			
Full Name (As per Identity Card / Passport in CAPITAL LETTERS)	:		
Identity Card/ Passport No	:		
Race	:	Gender	:
Telephone No.	:	Email	:
Mailing Address	:		
Training Commencement & Completion Date	:		
MNB/ MMB Examination Date	:		
Higher Education Provider (HEP)	:		
<input type="checkbox"/> ILKKM	<input type="checkbox"/> IPTA	<input type="checkbox"/> IPTS	<input type="checkbox"/> INSAN
Nursing Programme *please tick (✓) relevant boxes	:	<input type="checkbox"/> Bachelor of Nursing/ Diploma in Nursing/ Diploma in Nursing (Conversion Programme) (Select as applicable)	
	:	<input type="checkbox"/> Bachelor of Public Health Nursing/ Post Basic Certificate in Public Health Nursing (Select as applicable)	
	:	<input type="checkbox"/> Advanced Diploma in Midwifery Part 1	
	:	<input type="checkbox"/> Assistant Nurse Certificate	
Category Student/ Trainee	:	<input type="checkbox"/> New	
	:	<input type="checkbox"/> Reseat 1	
	:	<input type="checkbox"/> Reseat 2	
	:	<input type="checkbox"/> Reseat 3	
(*Applicable only to: Bachelor of Public Health Nursing, Post Basic Certificate in Public Health Nursing, Advanced Diploma in Midwifery, and Diploma in Nursing (Conversion Programme).			
* MNB/ MMB Exam Date	:		
* MNB/ MMB Registration Date	:		
*Place of Work	:		
*Designation/ Grade	:		

B: EXAMINATION ELIGIBILITY REQUIREMENT AS LJM/LBM

- i. Completion of the full prescribed training period.
- ii. Achievement 85% attendance in theory and 100% in clinical practice.
- iii. Passing of all HEP periodic examinations with a minimum CGPA of 2.5.
- iv. Achievement 100% competence for core competencies verified in the log book.
- v. Completion of 85% of optional procedures as verified in the logbook.
- vi. Enrollment in a fully accredited programme.
- vii. Sick leave taken must not exceed the maximum permissible limit throughout the training period.
- viii. Health Status must be physically and mentally fit.
- ix. Conduct Good behavioral standing with no disciplinary actions recorded.
- x. MQF Compliance Curriculum content and credit hours must align with the Malaysian Qualifications Framework (MQF).

C : CHECKLIST OF SUPPORTING DOCUMENTS

Please attach certified true copy:

- | | |
|---|--------------------------|
| i. Identity Card/ Passport (coloured and crossed); | <input type="checkbox"/> |
| ii. Student Pass issued by the Immigration Department in colour and crossed (for international students); | <input type="checkbox"/> |
| iii. Academic qualification certificate; | <input type="checkbox"/> |
| iv. *Nursing Degree/ Diploma/ Training Certificate; | <input type="checkbox"/> |
| v. *Annual Practising Certificate (APC/ TPC) - latest; | <input type="checkbox"/> |
| vi. *MNB/ MMB Registration Certificate; and | <input type="checkbox"/> |
| vii. Examination transcript for every semester. | <input type="checkbox"/> |

(*Applicable only to: Bachelor of Public Health Nursing, Post Basic Certificate in Public Health Nursing, Advanced Diploma in Midwifery, and Diploma in Nursing (Conversion Programme)

D : EXAMINATION FEE PAYMENT

I hereby enclose the examination fee for the following category please (√) in the relevant box

- Malaysia Nursing Board Examination Condition of Admission into the General Part of the Register for Nurses Bachelor of Nursing / Diploma in Nursing / Diploma in Nursing (Conversion Programme). Total fee: RM.....
- Malaysia Nursing Board Examination Conditions of Admission into the Supplementary Part of the Register for Public Health Nurses, Bachelor of Nursing (Public Health) Degree and Post Basic Certificate in Public Health Nursing Programme. Total fee: RM.....
- Malaysia Midwives Board Examination Conditions of Admission into the Midwives Under Part 1 of the Register Advanced Diploma in Midwifery. Total fee: RM.....
- Malaysia Nursing Board Examination Conditions of Admission into the Supplementary Part of the Register for Assistant Nurses Certificate in Assistant Nursing Programme. Total fee: RM.....

E : DECLARATION AND VERIFICATION

i. I hereby declare that the information provided above is true

.....
Student/ Trainee Signature

Name :

Date :

ii. I hereby certify that the above statement is true and that the student/ trainee is ELIGIBLE to sit for MNB/ MMB examination.

.....
Signature & Official Stamp
(Dean/ Director/ Principal/ Program Head)

Name :

Date :

"PART E IS SUBJECT TO THE PROVISIONS IN THE ACT AND THE REGULATIONS THEROF RELATING TO NURSES AND MIDWIFES, GUIDELINES AND EXAMINATION GUIDELINES FOR THE TIME BEING IN FORCE."

FOR MNB/ MMB USE ONLY

Application Verification

Student/ Trainee : Eligible/ Not Eligible

Remarks :

.....
Signature & Official Stamp

Name :

Designation :

Date :