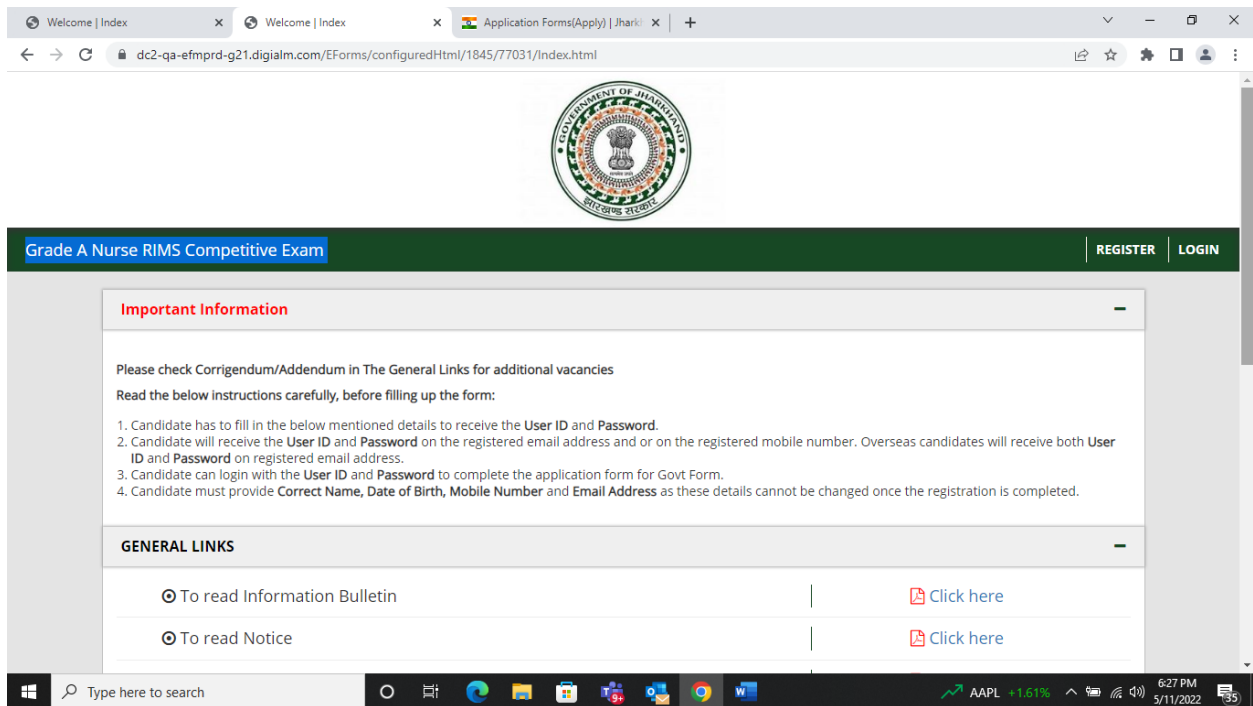


[How to Apply for Grade A Nurse RIMS Competitive Exam 2021](#)

Step 1: Go to the official site of Jharkhand Staff Selection Commission and click on Application Forms(Apply)

Step 2: Click on “Apply Now” besides the advertisement of [Grade A Nurse RIMS Competitive Exam 2021](#)

Step 3: Click on “Register” on the upper right hand corner for first time registration and fill in your basic details and click on **GENERATE OTP**



Grade A Nurse RIMS Competitive Exam

REGISTER LOGIN

Important Information

Please check Corrigendum/Addendum in The General Links for additional vacancies
Read the below instructions carefully, before filling up the form:

1. Candidate has to fill in the below mentioned details to receive the **User ID and Password**.
2. Candidate will receive the **User ID and Password** on the registered email address and or on the registered mobile number. Overseas candidates will receive both **User ID and Password** on registered email address.
3. Candidate can login with the **User ID and Password** to complete the application form for Govt Form.
4. Candidate must provide **Correct Name, Date of Birth, Mobile Number and Email Address** as these details cannot be changed once the registration is completed.

GENERAL LINKS

To read Information Bulletin	Click here
To read Notice	Click here

Welcome | Index x Welcome | Index x Grade A Nurse RIMS Competitive x Application Forms(Apply) | Jharkhand x +

dc2-qa-efmprd-g21.digialm.com/EForms/configuredHtml/1845/77031/Registration.html

Grade A Nurse RIMS Competitive Exam Application

[LOGIN](#) [HOME](#)

REGISTRATION

Candidate First Name: *
RIKI

Candidate Middle Name:
Candidate Middle Name

Candidate Last Name: *
DASH

Note:
Please enter your name strictly as per your certificate/marksheet of Matriculation/10th/SSC without any salutation(Dr., Mr., Ms., Mrs., Shri, Smt., Prof. etc.).

Date Of Birth: *
08/01/2003

Note: Please enter your D.O.B strictly as per your Matriculation/10th certificate/SSC.

Age as on 31.03.2021
18 Years 2 Months 23 Days

Gender: *
Male

Mobile Number: *
+91 9776292390

Confirm Mobile Number: *
+91 9776292390

Alternate Mobile Number:
+91 Alternate Mobile Number

Email Address: *
sidharthdash90@gmail.com

Confirm Email Address: *
sidharthdash90@gmail.com

Note:
Please enter your active Mobile No. and Email ID. Candidate should hold the same mobile number during the entire process of this recruitment.

Type here to search

30°C Haze 6:33 PM 5/11/2022

Step 4: Enter Captcha and click on SUMBIT. A OTP will be sent to your registered mobile number and email id

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Captcha Authentication

Note : Please enter the image text in the textbox provided and click on Submit to get OTP.

7 c s d y h 8

7cs

[Submit](#) [Close](#)

Type here to search

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Step 5: Enter the OTP and click on validate .A message will appear stating your OTP is successfully validated

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Grade A Nurse RIMS Competitive Exam Application dc2-qa-efmprd-g21.digialm.com says
OTP has been validated successfully.

REGISTRATION

Date Of Birth: *
08/01/2003 18 Years 2 Months 23 Days
Note: Please enter your D.O.B strictly as per your Matriculation/10th certificate/SSC.

Gender: *
Male

Mobile Number: *
+91 9776292390

Confirm Mobile Number: *
+91 9776292390

Alternate Mobile Number:
+91 Alternate Mobile Number

Email Address: *
sidharthdash90@gmail.com

Confirm Email Address: *
sidharthdash90@gmail.com

Note:
Please enter your active Mobile No. and Email ID. Candidate should hold the same mobile number during the entire process of this recruitment.

Enter OTP: *

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Step 6: Please click on the check box "I Agree", enter captcha and click on Reverify

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Grade A Nurse RIMS Competitive Exam Application

REGISTRATION

Declaration

I hereby declare that the above information is true to the best of my knowledge. I am aware that will be sending important information on my registered details. I agree that I have referred the advertisement and ensured my eligibility before applying. Also, I agree that I have read and understood all the instructions specified in the advertisement and agree to abide by the same.

☒ I Agree


u2cntvj

Note: Captcha is case insensitive.

Version 14.04.01

javascript:void(0)

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Step 7: Reverify your information, select on the checkbox besides it and click on SUBMIT

Welcome | Index x Welcome | Index x Grade A Nurse RIMS Competitive x Application Forms(Apply) | Jharkhand x

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Grade A Nurse RIMS Competitive Exam Application

LOGIN HOME

REGISTRATION

u2cntvj ?

Note: Captcha is case insensitive.

Verification For	Entered/Selected Value	Select the check-box if the entered value is displayed correctly.
Candidate First Name: *	RIKI	<input checked="" type="checkbox"/>
Candidate Last Name: *	DASH	<input checked="" type="checkbox"/>
Date Of Birth: *	08/01/2003	<input checked="" type="checkbox"/>
Gender: *	Male	<input checked="" type="checkbox"/>
Mobile Number: *	9776292390	<input checked="" type="checkbox"/>
Email Address: *	sidharthdash90@gmail.com	<input checked="" type="checkbox"/>

SUBMIT

Version 14.04.01

Type here to search

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Step 8: The information once entered cannot be changed in the Registration page. Click on OK and proceed

Welcome | Index x Welcome | Index x Grade A Nurse RIMS Competitive x Application Forms(Apply) | Jharkhand x

dc2-qa-efmprd-g21.digialm.com/EForms/configuredHtml/1845/77031/Registration.html

Grade A Nurse RIMS Competitive Exam Application

LOGIN HOME

REGISTRATION

Alert!

The information once submitted can not be modified. Click on 'OK' if you have verified the information to be correct and to submit else click 'Cancel' to review again and then to Submit.

OK Close

Verification For	Entered/Selected Value	Select the check-box if the entered value is displayed correctly.
Candidate First Name: *	RIKI	<input checked="" type="checkbox"/>
Candidate Last Name: *	DASH	<input checked="" type="checkbox"/>
Date Of Birth: *	08/01/2003	<input checked="" type="checkbox"/>
Gender: *	Male	<input checked="" type="checkbox"/>
Mobile Number: *	9776292390	<input checked="" type="checkbox"/>
Email Address: *	sidharthdash90@gmail.com	<input checked="" type="checkbox"/>

SUBMIT

Version 14.04.01

Type here to search

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Step 9: Your Application ID will be displayed and the ID along with the password will be sent to your registered mail id.

The screenshot shows a web browser window with the URL `dc2-qa-efmprd-g21.digialm.com/EForms/loginAction.do?subAction=DisplayProfile&formId=77031&eicuListing=false&encValues=WaoVf1PDmM3zEURC10H...`. A green notification box is displayed over the form, stating: "Note: Registered successfully. Registration No. Is 200032. Please note it for future reference. An email and SMS has been sent containing Registration Number/Login ID and password." The background form is titled "Grade A Nurse RIMS Competitive Exam" and includes a "GO TO APPLICATION" button and a "LOGOUT" button. The form sections are "APPLICANT DETAILS" and "Candidate Personal Details".

Candidate Personal Details		
Application Status	Application Number	Candidate's Name
Registration	200032	RIKI DASH
Date of Birth	Gender	Email ID
08/Jan/2003	Male	sidharthdash90@gmail.com
Mobile Number		
9776292390		

Declaration

I hereby certify that the information given by me in this Application Form is true to the best my knowledge. I certify that I fulfill the Grade A Nurse Application Form eligibility criteria and undertake to produce original documents whenever necessary and I will not demand any reschedule of exam. I agree to abide by the declaration of the authorities regarding the eligibility of my application and understand that any misrepresentation or omission of facts in my application may justify cancellation of my Grade A Nurse Application.

Step 10: Click on Go To Application button and fill additional information regarding the form.

The screenshot shows the same web browser window as Step 9, but the notification box is no longer present. The "GO TO APPLICATION" button is now visible and clickable. The form sections are "APPLICANT DETAILS" and "Candidate Personal Details".

Candidate Personal Details		
Application Status	Application Number	Candidate's Name
Registration	200032	RIKI DASH
Date of Birth	Gender	Email ID
08/Jan/2003	Male	sidharthdash90@gmail.com
Mobile Number		
9776292390		

Declaration

I hereby certify that the information given by me in this Application Form is true to the best my knowledge. I certify that I fulfill the Grade A Nurse Application Form eligibility criteria and undertake to produce original documents whenever necessary and I will not demand any reschedule of exam. I agree to abide by the declaration of the authorities regarding the eligibility of my application and understand that any misrepresentation or omission of facts in my application may justify cancellation of my Grade A Nurse Application.

Step 11: Fill in all information in the Personal Details, Additional Information, Communication Details, Qualification and Experience and Document and Payment Tabs respectively.

You cannot proceed further without filling in the information in the previous pages.

The screenshot shows the 'Grade A Nurse RIMS Competitive Exam' application form. The 'PERSONAL DETAILS' tab is selected. The form includes the following fields:

- Application Number:** 200032
- Candidate First Name:** RIKI
- Candidate Middle Name:** Candidate Middle Name
- Candidate Last Name:** DASH
- Date Of Birth:** 08/01/2003
- Gender:** Male
- Marital Status:** Married
- Father's Name:** JP
- Mother's Name:** K (49 Characters left)
- Mobile Number:**
- Email Address:**
- Alternate Mobile Number:**

A note at the top states: "Kindly use Edge Chromium or Mozilla Firefox (version 81 to 98) or Google Chrome (version 76 to 99) browser to fill in the Application Form. The Application Form is compatible with Android (version 4.0 and above) and iOS (version 9 and above). Fields marked with * are mandatory."

The screenshot shows the 'Grade A Nurse RIMS Competitive Exam' application form. The 'ADDITIONAL DETAILS' tab is selected. The form includes the following fields:

- Mark of Visible Identification**
- Mark of Visible Identification 2**
- Note:** Minimum One Identity Proof is mandatory. Please enter valid ID card details. This ID (Original ID Proof) will be required at all the stages of recruitment.
- Do you have Pan Card?** Yes No
- Do you have Driving License?** Yes No
- Do you have Voter Id?** Yes No
- Do you have Passport?** Yes No
- ☐ I am voluntarily submitting my identity proof to establish my identity.

Grade A Nurse RIMS Competitive Exam LOGOUT

PERSONAL DETAILS **ADDITIONAL DETAILS** COMMUNICATION DETAILS QUALIFICATION & EXPERIENCE DOCUMENT & PAYMENT

Ex Servicemen Details

Are you an Ex Servicemen (ESM) or child of ESM?*

☐ Yes ☐ No

Sports Person Details

Do you claim reservation under sports Quota?*

☐ Yes ☐ No

Person with Benchmark Disability Details

Are you PwBD i.e. Person with Benchmark Disabilities?*

☐ Yes ☐ No

Grade A Nurse RIMS Competitive Exam LOGOUT

PERSONAL DETAILS **ADDITIONAL DETAILS** **COMMUNICATION DETAILS** QUALIFICATION & EXPERIENCE DOCUMENT & PAYMENT

Correspondence Address

Address Line 1* Address Line 2 Country*

Address Line 1 Address Line 2 Select Country

State* City/District* Pincode/Postal Code*

Select State Select District. PIN Code

Is Permanent Address Same as Correspondence address?*

☐ Yes ☐ No

Permanent Address

Address Line 1* Address Line 2 Country*

Address Line 1 Address Line 2 Select Country

State* District* Pincode/Postal Code*

Select State Select District. PIN Code

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Grade A Nurse RIMS Competitive Exam

LOGOUT

Fields marked with * are mandatory.

PERSONAL DETAILS ADDITIONAL DETAILS COMMUNICATION DETAILS **QUALIFICATION & EXPERIENCE** DOCUMENT & PAYMENT

Qualification Details

Candidate Registered with State/Indian Nursing Council? *

Candidate Registered with State/Indian Nursing

Matriculation (10th) Details

Name of the Board* School/ Institute Name* Percentage of Marks*

Name of the Board Name of School Percentage of Marks

Marks Obtained Maximum Marks Year of Passing*

Marks Obtained Maximum Marks Year of Passing

Division*

Division

Type here to search 30°C Haze 6:55 PM 5/11/2022

Step 12: Upload Photo and Signature as per the specification and complete your payment.

Welcome | Index x Welcome | Index x Grade A Nurse RIMS Competi x Grade A Nurse RIMS Competi x Application Forms(Apply) | x + -

dc2-qa-efmprd-g21.digialm.com/EForms/editApplication.do

Grade A Nurse RIMS Competitive Exam

LOGOUT

PERSONAL DETAILS ADDITIONAL DETAILS COMMUNICATION DETAILS **QUALIFICATION & EXPERIENCE** **DOCUMENT & PAYMENT**

Documents Upload

Upload the scanned copy of the recent passport size photo.*

CLICK HERE TO UPLOAD View Uploaded Photo

Upload your scanned signature.*

CLICK HERE TO UPLOAD View

Payment Details

Candidate's Name : RIKI DASH

Applicable Registration Fee (Rs) : 100

Note:
For more details on applicable registration fee, please refer to the FAQs/Registration Guide provided on Grade A Nurse Application Form website.

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Step 13: Click on check box, enter captcha and click on Submit

Welcome | Index x Welcome | Index x Grade A Nurse RIMS Compete x Grade A Nurse RIMS Compete x Application Forms(Apply) | x + -

dc2-qa-efmprd-g21.digialm.com/EForms/editApplication.do

Grade A Nurse RIMS Competitive Exam


LOGOUT

PERSONAL DETAILS ADDITIONAL DETAILS COMMUNICATION DETAILS QUALIFICATION & EXPERIENCE DOCUMENT & PAYMENT

For more details on applicable registration fee, please refer to the FAQs/Registration Guide provided on Grade A Nurse Application Form website.

Declaration

☒ I Agree


e5ici5v

Note: Captcha is case insensitive.

BACK PREVIEW SUBMIT

Type here to search

GBP/INR +0.36%

7:02 PM 5/11/2022

Step 14:Complete your payment.Post submission you can also download your form by clicking on “PRINT**” button**

NOTE:You can complete your payment only 24 hours after successful form submission.

Welcome | Index x Welcome | Index x Grade A Nurse RIMS Compete x Grade A Nurse RIMS Compete x Application Forms(Apply) | x + -

dc2-qa-efmprd-g21.digialm.com/EForms/loginAction.do?subAction=DisplayProfile&formId=77031&eicListing=&encValues=Wa0VF1PDmM3zEURC10HyH0FicrP4...

Grade A Nurse RIMS Competitive Exam

PRINT LOGOUT

Print

APPLICANT DETAILS

9776292390

Candidate Domicile and Category Details

Are you an Indian Citizen? Yes	Are you a local resident of Jharkhand? No	Reservation Category UR
-----------------------------------	--	----------------------------

Additional Details

Are you an Ex Servicemen (ESM) or child of ESM? No	Do you claim reservation under sports Quota? No	Are you PwBD i.e. Person with Benchmark Disabilities? No
---	--	---

Identification Details

Mark of Visible Identification 1 SA	Mark of Visible Identification 2 AS	Do you have Pan Card? Yes
Pan Card Number : BBAS12312	Name on Pan Card: SIDAS	Do you have Driving License? No

javascript:void(0)

Type here to search

29°C Haze

7:07 PM 5/11/2022