



Serial No./0329/64

GOVERNMENT OF NEPAL  
MINISTRY OF EDUCATION AND SPORTS  
REGIONAL EDUCATION DIRECTORATE  
CENTRAL REGION  
....., Nepal

Date : 7-Feb-2008

# PROVISIONAL CERTIFICATE

Certified that..... SHOBHA KADEL

.....passed  
the School Leaving Certificate Examination of Government of Nepal in  
the Year 2057 ( 2001 ) .....in FIRST.....division.

His/Her/date of birth is 2042/09/15 B.S. ....The original  
certificate is not yet issued to him/her.

Issued as per the delegated authority  
from S.L.C. Examination Board

Symbol No.:- 0260418 B

.....

Written By

.....

Checked By

.....

Officer  
Section Officer



S. No 10329/64



GOVERNMENT OF NEPAL  
MINISTRY OF EDUCATION & SPORTS

# REGIONAL EDUCATION DIRECTORATE

CENTRAL REGION

NEPAL

DUPLICATE

## School Leaving Certificate Examination

### MARK - SHEET

THE MARKS SECURED BY **SHOBHA KADEL**DATE OF BIRTH **2042/09/15 B S**ROLL **DHADING** SYMBOL NO **0260418 B**OF **BRIGHT FUTURE MA VI MALEKHU**IN THE ANNUAL S.L.C. EXAMINATION OF **2057 ( 2001 )** ARE GIVEN BELOW

SERIAL NUMBER	SUBJECT				FULL MARKS	PASS MARKS	OBTAINED MARKS			TOTAL	GRACE MARKS	REMARKS
							TH	PR				
								EPR	IPR			
1.	ENGLISH				100	32	57	16		73		
2.	NEPALI				100	32	80			80		
3.	MATHEMATICS				100	32	57			57		
4.	SCIENCE				100	32	66		-	66		
5.	SOCIAL STUDIES				100	32	54			54		
6.	HEALTH, POP & ENV. EDU.				100	32	46		25	71		
7.	OPT - I .....MATHS				100	32	44			44		
8.	OPT - II .....O&M				100	32	54	-	25	79		
FULL MARKS		1ST DIV WITH DISTN		1ST DIV	2ND DIV	3RD DIV	GRAND TOTAL			524		
800		640		480	360	256	RESULT			FIRST		

TOTAL OBTAINED MARKS IN WORDS **FIVE HUNDRED AND TWENTY FOUR ONLY**

1. # Means subject (s) appeared in the supplementary examination.

2. F and asterisk (\*) - fail

3. A - Absent

4. C - Subject Cancelled

Issued as per the delegated authority  
from S.L.C. Examination Board

WRITTEN BY

07-Feb-08

CHECKED BY

OFFICER

Section Officer

DATE OF ISSUE :-

(Note:- TH-Theory, PR-Practical, EPR-External Practical &amp; IPR-Internal Practical)





# BRIGHT FUTURE ENGLISH BOARDING SCHOOL

Benighat-1, Malekhu, Dhading

Estd. 2052 B.S.

## CHARACTER CERTIFICATE



Serial No.

93

Certified that Mr/Miss SHOBHA KADEL

the son/daughter

of Mr. Vidhya Sagar Kadel resident of Dhading District

Benighat VDC/Municipality Ward No. 01 appeared in the S.L.C. Examination

held in the year 2057 B.S. He/She was regular student of this School from 2047 B.S.  
to 2057 B.S.

He/She was placed in Distinction/First/Second/Pass Division. His/Her conduct during his/her studying  
period in this school was Good

I know nothing against his/her character. He/She comes of a respectable family of Kadel

His/Her Date of Birth according to the School's Record is 2042/09/15

Registration No. : 5726052003

Symbol No. : 0260418 'B'

Date of Issue: 2064/12/01

Purushottam Prasad Lahani  
(Purushottam Prasad Lahani)  
Principal



Schedule - 2  
(Related to rule 19)

## Certificate of Registration

Regd. No. 7234

REGISTERED NURSE

Nepal Nursing Council



As Mr./Mrs. / Miss Shobha Kadel aged 21  
a resident of ward no. 1 of Benighat Municipality /  
Village Development Committee, Dhading District Bagmati Zone  
fulfilled the requirements to qualify for getting his/ her name registered in Nepal  
Nursing Council as set out in Nepal Nursing Council Act, 1996, this Certificate of  
Registration is hereby issued after having registered the name in the Nurse Register  
of Nepal Nursing Council by decision of Nepal Nursing Council dated 21st Aug. 2006  
made in pursuance of Section 17 of Nepal Nursing Council Act, 1996 and rules 18  
and 19 of Nepal Nursing Council Regulation, 1996

This Certificate shall remain valid for a six-year period from the date of the  
decision of this council to register the name.

Seal of the Council



Signature :- Ishwori Khanal

Date :- 21st August, 2006

Name :- Ms. Ishwori Khanal

Designation :- Registrar



T. U. Regd. No.: 5-1-37-125-2001



S. No.: 708

TRIBHUVAN UNIVERSITY  
INSTITUTE OF MEDICINE  
POKHARA CAMPUS

Ramghat, Pokhara-Nepal


☎ : +977-61-520438 Off.  
+977-61-520485 C.c.  
+977-61-521961 Hos.  
Fax: +977-61-5



✿ To Whom It May Concern ✿

*This is to certify that Mr./ Miss/ Mrs. SHOBHA KADEL.....  
was a bonafide student of this campus from 01 CHAITRA 2059... B. S.  
(....15 MAR. 2003... A. D.) to 15 CHAITRA 2062. B. S.  
(....28 MAR. 2006... A. D.). He/ She has successfully completed the final  
examination of proficiency certificate level in Nursing. His/ Her date of birth according to  
the campus record is 15-09-2042... B. S. (30 DEC. 1985... A. D.).  
His/ Her character during to stay in this campus was satisfactory.*

*Date: 14-03-2063 B. S. (28 JUNE 2006 A. D.)*

  
08/03/14  
Written by  
Examination Section

Namrakar  
Campus chief  
FOR CAMPUS CHIEF





Issue Number

472

**TRIBHUVAN UNIVERSITY**  
**OFFICE OF THE CONTROLLER OF EXAMINATIONS**  
 KATHMANDU, NEPAL  
**ACADEMIC TRANSCRIPT**



DUPLICATE

Name of the Student **SHOBHA KADEL**Registered Number **S-1-37-125-2001**

Course Duration: 3 Academic Years

Institute of Medicine

Campus: **POKHARA**Examination: Proficiency Certificate  
in Nursing

Subject/s appeared in the examination	Full Marks			Pass Marks			Examination attended year and Roll No.			Examination attended year and Roll No.			Examination attended year and Roll No.			Examination attended year and Roll No.			Examination attended year and Roll No.			Remarks
	Int	Ext	Total	Int	Ext	Total	Int	Ext	Total	Int	Ext	Total	Int	Ext	Total	Int	Ext	Total	Int	Ext	Total	
<b>1<sup>st</sup> Yr. Examination</b>																						
Nepali 101	20	80	100	8	32	40	14	48	62													
English 102	20	80	100	8	32	40	13	40	53													
Integrated Sc. Related to Health 195	20	80	100	8	32	40	18	55	73													
Fundamental of Nursing 196 Th.	20	80	100	8	32	40	15	48	63													
Fundamental of Nursing 197 CL	50	50	100	25	25	50	41	48	89													
Community Health Nursing 198 Th.	20	80	100	8	32	40	12	53	65													
Community Health Nursing 199 CL	75	25	100	37.5	12.5	50	69	23	92													
<b>Total</b>			700			300			497													
<b>2<sup>nd</sup> Yr. Examination</b>																						
Nepal Parichaya 103	10	40	50	4	16	20				4	22	26										
Community Health Nursing 200 Th.	20	80	100	8	32	40				18	50	68										
Community Health Nursing 201 CL	75	25	100	37.5	12.5	50				67	18	85										
Behavioural Sc. 202	10	40	50	4	16	20				4	21	25										
Nursing Care of Children 203 Th.	10	40	50	4	16	20				9	30	39										
Nursing Care of Children 204 CL	25	25	50	12.5	12.5	25				20	20	40										
Midwifery 'A' 205 Th.	10	40	50	4	16	20				9	33	42										
" 'A' 206 CL	25	25	50	12.5	12.5	25				21	19	40										
" 'B' 207 Th.	10	40	50	4	16	20				9	23	32										
" 'B' 208 CL	25	25	50	12.5	12.5	25				19	21	40										
" 'C' 209 Th.	10	40	50	4	16	20				7	16	23										
" 'C' 209 CL	25	25	50	12.5	12.5	25				20	20	40										
<b>Total</b>			700			310						500										
<b>3<sup>rd</sup> Yr. Examination</b>																						
Nursing Care of Adult I 211 Th.	20	80	100	8	32	40							11	52	63							
Nursing Care of Adult II 212 Th.	20	80	100	8	32	40							14	51	65							
Nursing Care of Adult 213 CL	125	125	250	62.5	62.5	125							87	105	192							
Leadership and Management 214 Th.	20	80	100	8	32	40							11	49	60							
Leadership and Management 215 CL	112.5	37.5	150	56.25	18.75	75							88	27	115							
<b>Total</b>			700			320									495							
<b>Grand Total</b>			2100			930									1492							

Written by

Checked by

Total marks secured **1492**Percentage **71.0**Passed Division **FIRST**Year of completion **2062 (2005)****-2 JUN 2011**

Date of issue

*[Signature]*  
 Controller of Examinations

**Grading System of Marks Secured in the Examination:**

Distinction - 80 percent and above in the aggregate.

First Division - 65 percent and above in the aggregate.

Second Division - 50 percent and above in the aggregate.





TRIBHUVAN UNIVERSITY  
INSTITUTE OF MEDICINE  
**POKHARA CAMPUS**  
Ramghat, Pokhara (Nepal)

Office Ph. No. : 520438  
Campus Chief : 520485  
Hostel Ph. No. : 521961  
Post Box No. : 67

Ref No. 2063/2064

Institute of Medicine  
Pokhara Campus  
1982

Date: "23 May, 2007"

**\* TO WHOM IT MAY CONCERN \***

This is to certify that Miss. **SHOBHA KADEL** Daughter of Mr. **BIDDHYA SAGAR KADEL** inhabitant of **BENIGHAT V.D.C.**, Ward No.01, **DHADING**, is a bonafied student of Tribhuvan University, Institute of Medicine, Pokhara campus, from 15 Mar.2003 A.D. to 28 Mar.2006 A.D. She has successfully completed the final examination of **Proficiency Certificate Level (P.C.L)** in Nursing conducted by Tribhuvan University, Institute of Medicine in 2006 A.D.

The study course is in English medium. Her moral character was good during the period she studied in this campus. According to campus record her date of birth is Dec.30,1985 I recommend to carryout her future job, study or training smoothly and successfully.

(BHAGAWATI K.C.)  
CAMPUS CHIEF

**CAMPUS CHIEF**



**Academic Transcript****Diploma of Disability (CHC50108)**Student Name: **Shobha Kadel**Date of Birth: **30/12/1985**Student Number: **90045**Date of Issue: **25/02/2011**

Unit Code	Unit Description	Result	Unit Code	Unit Description	Result
CHCCM404A	Undertake case management for clients with complex needs	P	CHCNET503C	Develop new networks	P
CHCCM501A	Coordinate complex case requirements (Note pre-requisite CHCCM404A)	P	CHCPOL501A	Access evidence and apply in practice	P
CHCCM503C	Develop, facilitate and monitor all aspects of case management	P	HLTOHS400A	Maintain OHS processes	P
CHCCS503A	Develop, implement and review services and programs to meet client needs	P	CHCCD514A	Implement community development strategies	P
CHCCW503A	Work intensively with clients	P	CHCLD415A	Confirm client developmental status	P
CHCORG506C	Coordinate the work environment	P	CHCLD514A	Analyse impacts of sociological factors on clients in community work and services	P
CHCDIS511A	Coordinate services for people with disabilities	P	CHCGROUP403 D	Plan and conduct group activities	P
CHCINF505C	Meet statutory and organisation information requirements	P		Field Placement 1	P
CHCAD504A	Provide advocacy and representation services	P		Field Placement 2	P

.....  
(No results printed below this line)

**Legend/Grading System**

Pass (Competent)	P	Work demonstrating achievement to the specified standard of all the elements of the unit of competency
Not Yet Competent	NYC	Work not yet demonstrating achievement to the specified standard of one or more elements of the unit of competency
Recognition of Prior Learning/ Credit Transfer	RPL	Recognition of Prior Learning/ Credit Transfer as per AQTF qualifications and/or statements of attainment issued by other RTOs.


**Dr Moninderjit Singh**  
Chief Executive Officer

This Statement is issued without error or alteration.

The statement here in is recognised within the Australian Qualification Framework & is issued under authority of the NSW Vocational Education & Training Act 2005.


**Mandhir Singh Sandha**  
Managing Director


**Sydney Campus:** 14 Douglas Road (PO Box 203) Quakers Hill NSW 2763 Australia  
Ph: +61 2 9837 4213 Fax: +61 2 9837 4273

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## Statement of Attainment

This is a statement that

**Shobha Kadel**

**Student No: 90045**

**Date of Birth: 30/12/1985**

**Certificate No: 201022**

**Has been assessed has having fulfilled the following requirements in partial completion of  
Certificate III in Disability Work -CHC30102**

Unit Code	Unit Name	Result
CHCDIS1C	Orientation to Disability Work	P
CHCCOM2B	Communicate appropriately with clients and customers	P

All the units in this statement meet the delivery requirements and assessment guidelines set out by the relevant training package as well as the requirements of the Australian Quality Training Framework (AQTF). The courses were successfully completed and instructions were given in English.

**Commencement Date: 26/01/2009**

**Issue Date: 11/03/2009**

**Legend/Grading System**

Pass (Competent)	P	Work demonstrating achievement to the specified standard of all the elements of the unit of competency
Not Yet Competent	NYC	Work not yet demonstrating achievement to the specified standard of one or more elements of the unit of competency



**Dr Moninderjit Singh**  
Chief Executive Officer

The statement here in is recognised within the Australian  
Qualification Framework & is issued under authority of the NSW  
Vocational Education & Training Act 2005.



**Mandhir Singh Sandha**  
Managing Director



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Date: 25 February 2011

## To Whom It May Concern

**Reference Student: Shobha Kadel**

**Student ID: 90045**

This is to confirm that **Shobha Kadel (Date of Birth 30/12/1985)** has successfully completed and met all requirements of **Diploma of Disability (CHC50108)**. He joined the institute on **26 January 2009** and finished on **25 February 2011**.

All units in this course meet the delivery requirements and assessment guidelines set out by the relevant Training Package as well as the requirements of the Australian Quality Training Framework (AQTF). The course was successfully completed on a full time basis and instructions were given in English.

If you require further information, Please do not hesitate to contact me on [info@aamsaustralia.com.au](mailto:info@aamsaustralia.com.au)

Kind Regards

**Dr Moninder Singh PhD JP**  
**CEO**

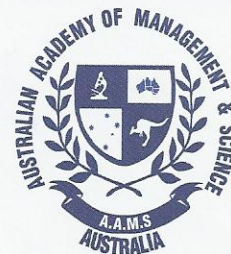
**Australian Academy of Management & Science**



Committed to Education & Learning

# AUSTRALIAN ACADEMY OF MANAGEMENT & SCIENCE

ACN: 101 401 834 CRICOS Provider No.: 02882M RTO Code: 91354



**This is to certify that**

**Shobha Kadel**

**Student No: 90045**

**Date of Birth: 30/12/1985**

**Certificate Number: Dip 10/07**

**Has successfully fulfilled the requirements for**  
***Diploma of Disability***  
***(CHC50108)***

**Issue Date**  
**25 February 2011**

**Dr Moninderjit Singh**  
Chief Executive Officer

The statement here in is recognised within the Australian  
Qualification Framework & is issued under authority of the NSW  
Vocational Education & Training Act 2005.

**Mandhir Singh Sandha**  
Managing Director



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