Mrs. JIBI JOHNSON SHARJAH, UAE.

00971 581253691(UAE) jibijohnson12@gmail.com



I have outlined some information about myself bellow. I would like to thank you in advance for your time and consideration.

OBJECTIVE:

I wish to contribute my maximum potentials with in towards the growth of the organization and also to develop my eminence in the process.

PROFESSIONAL EXPERIENCE:

FORTIS HOSPITALS LIMITED MULUND, MUMBAI

Since 26th August 2015 to 3rd November 2016 in Medical-Surgical Ward.

LOTUS HOSPITAL, BANGALORE

Since 10th November 2016 to 10th December 2017 in Medical-Surgical Ward.

LICENSE DETAILS:

MOH License number: RN015018

Expiry Date : 03/10/2022

PROFESSIONAL QUALIFICATIONS

B.S c.IN NURSING

COURSE	COLLEGE	UNIVERSITY	YEAR OF PASSING	MARKS
BSc N 1 st year BSc N 2 nd year BSc N 3 rd year	Father Mathews College of Nursing Bangalore	Rajiv Gandhi University Of Health Science Karnataka	2011 2012 2013	426/700 438/700 397/600
BSc N 4 th year			2013	397/600

SCHOOL QUALIFICATIONS

CLASS	SCHOOL	BOARD	YEARS OF PASSING	MARKS
12 th Standard	St.Gregorious Higher Secondary school, Kottarakara	Board of Higher Secondary Exam, Govt of Kerala	2010	68%
10 th Standard	S.K.V.V.H.S.S Thrikkannamangal	Board of Public Exam, Kerala	2008	86%

<u>Personal Profile</u>

Name	: Mrs. JIBI JOHNSON		
Father's Name	: Mr. JOHNSON C.P		
Date of Birth	: 03-03-1992		
Place of Birth	: Kottarakara		
Sex	: Female		
Marital Status	: Married		
Nationality	: Indian		
Religion	: Christian		
Blood Group	: B+ve		
Permanent Address	: Thundil veedu		
	Thrikkannamangal		
	Kottarakara(P.O),		
	Kollam.		
Mobile	: +971 581253691(UAE)		
VIisa status	: Husband Visa		
E-mail	: jibijohnson12@gmail.com		
Languages Known	: English, Malayalam, Hindi		

Declaration

I hereby declare that the above mentioned information is correct up to my knowledge and I bear the responsibility for the same.

Place: Sharjah, UAE.

Name: Mrs. JIBI JOHNSON