

## **RESUME**

**NAME** :- Mrs. Rekha Sonawane

**ADDRESS** :- Indira Nagar Raver Jalgaon

**DATE OF BIRTH** :- 07/08/1987

**EDUCATIONAL QUALIFICATION** :- ANM

**REGISTRATION NUMBER** :- 064

**PASSING YEAR** :- June-2016

**AWARDING AUTHORITY** :- Maharashtra Nursing Council, Mumbai