**CURICULUM VITAE**

**Full Name:** Gbore Lucia Olu

**Post Applied For:** The post of clinical instructor

**Personal Data**

Date and place of birth: 29th January, 1959, Ilawe Ekiti

Nationality: Nigerian

State of Origin: Ondo State

Senatorial District: Ondo North

Local Government Area: Akoko SouthWest

Home Address: 8, Gaga Street, Oke-Aro, Akure, Ondo State.

Postal Address: C/O Mr. Makanju John, School of Nursing, Akure.

Mobile Phone Numbers: +2348037203190

E-mail Address: [luciagbore@gmail.com](mailto:luciagbore@gmail.com)

Marital Status: Married

Number of Children: Four

Post at Retirement: Assistant Director(Nursing Officer)

Grade Level at Retirement: GL 1411-#215,235.81

**QUALIFICATIONS**

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| --- | --- | --- | --- |
| Qualification Name | Institution Name | Date | Degree |
| B.N.Sc. Nursing | National Open University of Nigeria | 2013 | B.N.Sc |
| Nurse Tutor Cert. | Federal College of Education, Akoka, Lagos, Nigeria | 2012 | Pg.D |
| Registered Psychiatry Nurse Cert. | School of Psychiatry Nursing, Uselu, Benin | 2001 | Post Basic |
| Registered Nurse Cert | School of Nursing, Akure. | 1986 | Post Basic |
| Family Planning | School of Family Health, Ministry of Health, Akure | 2002 | Upgrade |
| Registered Midwife Cert | * St Louis School of Midwifery, Owo, Ondo State | 1983 | Basic |
| WAEC | Corpus Christi College, Ilawe Ekiti | 1980 | WAEC |
| Primary School Cert | St Catholic Primary School, Ilawe Ekiti | 1971 | PSLC |

**SCHOLARSHIP/AWARDS**

* Best Student in Practical, Schoolof Psychiatry Nursing, Uselu, Benin
* Best Student in guidance and counselling – Federal College of Education, Akika, Lagos

**BOARD CERTIFICATIONS/LICENSURES/PROFESSIONAL ASSOCIATIONS**

* National Association of Nigeria Nurses and Midwives
* Nursing and Midwifery Council of Nigeria

**SEMINARS/CONFERENCES ATTENDED WITH DATE**

* OBJECTIVE STRUCRURED CLINICAL EXTERMINATION: AN ASSESSMENT TOOL FOR CLINICAL SKILLS IN GENERAL NURSING. 28TH FEB-1ST MARCH, 2018. SCHOOL OF NURSING LUTH, LAGOS.
* NMCN EXAMINERS WORKSHOP JULY,2017
* MCPDP (PSYCHIATRY) MODULE 2016
* PROFESSIONAL EXAMINATION FOR NURSES/MIDWIVES IN NIGERIA PROSPECT AND CHALLENGES IN A TECHNOLOGICAL ERA AUG 2014.
* NATIONAL ASSOCIATION OF NIGERIA NURSES AND MIDWIVES EXAMINERS CONFERENCE 2014
* ACTUALIZING NURSING EDUCATION THROUGH OBJECTIVE EVALUATION OF STUDENTS IN SCHOOL OF NURSING, AKURE, 2012.
* SKILL ACQUISITION PROGRAMME, ONDO STATE 2010
* MCPDP (MEDICAL SURGICAL) MODULE1, 2010
* EFFECTIVE DELIVERY OF HEALTHCARE SERVICES IN ONDO STATE 2006.
* STATE INFORMATION DEVELOPMENT TECHNOLOGY, AKURE, ONDO STATE, 2005
* EXCLUSIVE BREASTFEEDING, 2003
* FAMILY PLANING PROVIDER TRAINING JULY-AUG,2002
* UPPER RESPIRATORYTRACT INFECTION SEMINAR 1998
* ORAL REHYDRATION SOLUTION THERAPY(ORS) 1991

**WORK EXPERIENCE WITH DATES**

|  |  |  |
| --- | --- | --- |
| PLACE OF WORK | POST HELD | YEAR |
| School of Midwifery, Akure | Guest Tutor | 2013 till date |
| School of Nursing, Akure | Guest Tutor | Retirement till date |
| School of Nursing, Akure | Tutor | 2013-2016 |
| Psychiatric Hospital, Akure | C.N.O | 2002-2013 |
| State Specialist Hospital, Akure | Registered Nurse/ Midwife | 1992-2002 |
| General Hospital, Idanre | Staff Nurse/Midwife | 1988-1992 |
| Ondo State Specialist Hospital, Ondo | Registered Nurse/Midwife | 1987-1988 |
| General Hospital, Ido Ekiti | Registered midwife | 1984-1984 |

**EXAMINATION EXPERIENCE**

* Local examiner for school of midwifery, Akure 2009 - till date.
* Guest tutor for school of nursing on mental health nursing 2010
* Mental Health Nursing Guest Tutor in School of Midwifery 2010 till date
* Local examiner for school of Nursing, Akure 2012- till date
* Invigilator/Assessor for July hospital final examination, college of nursing, Obangede, Kogi State, July, 2014.
* Invigilator/Assessor for Hospital Final Examination, School of Nursing, Osogbo July 2015
* Chief Examiner/Invigilator/Assessor for Nursing Council Examination Nov 2017
* Invigilator/Assessor for Hospital Final Examination, School of Midwifery, Akure, Dec 2017
* Invigilator/ Assessor for Nursing Council Examination Nov 2018.

NAMES AND ADDRESS OF REFEREES

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Signature……………………