



**APPLICATION FORM FOR ADMISSION TO
B.Sc. NURSING/ GNM COURSE -20__ to 20__**

(Put a ✓ for the course you are applying for)

(To be filled by the applicant in her own handwriting using **CAPITAL LETTERS** only)

Application Number: _____

Details of Application Fee Paid: Cash / DD/NEFT

Receipt or DD No with Date _____

Amount Rs: _____

Issuing Bank & Branch: _____

Payable at: _____

1. Name of the Applicant (In block letters as entered in 10th certificate):

2. Name of Parent/Guardian:

3. Relationship with the applicant:

4. Date of Birth (DD/MM/YYYY):

5. Religion / Caste: Gen./SC/ST/OBC/Others (Tick Appropriate)

6. Permanent Address with Pin - Code:

7. Present Address with PIN-Code (Address for Communication):

8. Email ID (not parents' but Candidates own currently active email ID) in capital letters.

9. Mobile Number (Candidates own with Aadhar linked)

10. Mobile Number (Parent/ Guardian):

11. Father's Name & Occupation :

12. Mother's Name & Occupation :

13. Annual Family Income : Rs

14. Name of the institution last attended :

Pass port Size
Photo

15. Details of Qualifying Examination : (XII - HSE, VHSE, CBSE, ICSE, Others)

Details of 10th& 12th standard Examination:

Name of the Board	Year of Passing	Max. Marks	Marks Obtained	No. of Attempts	Roll No. / Register No.
10th					
12th					

16. Marks obtained in Qualifying Examination - XII (Attach self attested copy of the mark list): (XII - HSE, CBSE, ICSE, Others) (applicable only for B. Sc Nursing)

Subjects:	Max. Marks	Marks Obtained	% of Marks
Physics			
Chemistry			
Biology			
English			
Total (PCBE)			

17. Joint Declaration by the Applicant & Parent / Guardian:

We _____ (applicant) & (Parent/ Guardian) do hereby declare that all the information furnished above are true and correct and we will obey the rules and regulations of the institution, if admitted. We promise to submit all certificates and documents in original at the time of admission failing which the admission will be liable for cancellation.

Name & Signature of the Applicant:

Place:
Date:

Name & Signature of the Parent /Guardian:

18. Please Tick on regarding Documents Attached

X or XII Certificate in proof of Date of Birth	
Std. X Mark Sheet & Pass Certificate	
Std. XII Mark Sheet & Pass Certificate	
Character & Conduct Certificate from institution last attended	
TC from last institution attended	
Caste Certificate from Village Officer / Parish Priest Letter	
Medical Fitness Certificate (download from college website)	
Passport Size Photograph	
Demand Draft /NEFT	

(Office use)

ACKNOWLEDGEMENT OF APPLICATION B.Sc. NURSING COURSE 20__ - 20__

Application Number: _____

Name of the Applicant: _____

Received the application on Time: _____

Signature & Seal