

Smt. Narayani D. R. Kariqowda College of Nursing

RECOGNISED BY THE GOVERNMENT OF KARNATAKA
KARNATAKA STATE NURSING COUNCIL & INDIAN NURSING COUNCIL
(AFFILIATED TO RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES IN KARNATAKA, BANGALORE)
HASSAN - 573 201, KARNATAKA
(Under the auspices of Boovanahally Channakeshava Swamy Vidya Samsthe (R), Hassan)

APPLICATION FOR ADMISSION TO FIRST YEAR BASIC, B.SC., NURSING COURSE



No.

01. Full name of the applicant (in Block Letters)	
02. Date of Birth as entered in S.S.L.C. Marks card	In figures : In words :
03. Place of Birth & District	
04. Religion & Caste	
05. Whether SC / ST / I / II / III / IV / GM	
06. Name & address of Parent or Guardian. (If parent is not alive)	
07. Guardian, relation to the applicant	
08. Occupation & Annual Income of Parent / Guardian	
09. Course to which the applicant desires to join	
10. Combination studied in PUC & percentage of Marks secured in PUC	Year of passing
11. Percentage of marks secured in PCB	
12. Whether passed PUC in first attempt	
13. Name of the College last attended & date of living	

I hereby agree to undergo the NSS Training / Physical Culture Training / NSS Programme prescribed by the College during the period of my study in the college.

Also declare that the statements I have made in the application are correct.

Place :

Signature of the Candidate

Date :

I agree to the applicant's admission I shall be responsible for the payment of all his / her fees and charges. I shall also be responsible for his / her conduct and good behaviour during the period of his / her college career *.

Signature of the Father / Guardian

UNDERTAKING

I declare that the particulars given in the application form during admission are correct. I submit myself to the disciplinary jurisdiction of the Authorities of the University who may be vested with the Authority to exercise discipline under the act of the status, the ordinance and the rules that have been framed and to be framed from time to time by the University.

I agree to abide the Regulations / Ordinance adopted by the University for the maintenance of the discipline among students in the College / Department / Institute / Hostel. I will neither involve myself in any unlawful or provocative of communal or anti-social or political activities nor cause physical harm to any fellow student or teacher or official. I also agree not to involve myself in the damage of any University property. I give this undertaking with full knowledge that breach of this on my part is liable for the cancellation of my admission in the College / Department / Institute / Hostel of the University.

Signature of the Parent / Guardian
With full postal address

Signature of the Student

OFFICE NOTE

Fees paid

Amount

Date

Receipt No.

Accountant

Admission is granted subjected to the producing of all certificates required as per rules and also the final approval of the University of Mysore.

Principal

Certificates to be enclosed : (Original and 3 sets xerox copies)

01. SSLC Marks Card

04. Transfer Certificate

02. PUC Marks Card

05. Photos (3 P.P. & 3 Stamp Size)

03. Character and Conduct Certificate