

SHRI GAJANAN MAHARAJ COLLEGE OF NURSING (B.Sc.)

Recognized by: Govt. of Maharashtra, Indian Nursing Council New Delhi
Affiliated to Maharashtra University of Health Science Nashik
At. Bhagur, Tal. Shevgaon, Dist. Ahmednagar

PROVISIONAL ADMISSION FORM

Academic Year 2 - 2

PHOTO

Admission in to : _____ Total Fees. : _____

- 1) Full Name of the student : _____
(Capital Letters) Surname Name Farther Name Mother Name
- 2) Age : _____ Gender : _____
- 3) Date of Birth : _____
- 4) Aadhaar Card No.

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- 5) Marital Status : Single Married
- 6) Nationality : _____ Religion _____ Caste _____
- 7) Name of Guardian (Father / Husband) : _____
- 8) Education of the Father : _____
- 9) Occupation of the Father : _____
- 10) Annual Income of the Father : _____
- 11) Address for correspondence : _____

- 12) Permanent Address : _____

- 13) Contact Number : Land line (with STD Code) : _____
Mobile : 1. _____ 2. _____

Educational Qualification :

Class	Year of Passing	Name of the Board & Division	Phy.	Chem.	Bio.	Percentage PCB	MH-CET Nursing %	Category	Total % of 12th std	Total Mark 12th std

Other Qualification :

- A) Participation in extra curricular activities (if any)
- B) Special merits (if any)
- C) Employment record (if any)

I here by apply my self for admission to _____ Course in your institution.

DECLARATION OF THE APPLICANT :

- 1) I hereby; declare that the information given above is correct.
- 2) I agree to obey all the rules and regulations of the institute and undertake that I shall do nothing that will interfere with discipline of the institute. Otherwise any sort of disciplinary action can be taken against me.
- 3) I accept that my admission will be confirmed only on production of all the required certificates along with Transference Transfer Certificate from the previous college / educational institute.
- 4) As this course in full time course, I will attend the entire lectures, practical sessions, etc. Which to be organized by the institute from time to time.
- 5) I will not claim any transfer from this institute during the entire period of the course.
- 6) I had fulfilled the conditions for admission to course, applied for, In case my admission is cancelled for whatsoever reasons by the institute, I will not claim any refund of fees and amount paid and I will not make the Institute of Principal or Trust/Nursing School (GNM) or any other person to any law suit.
- 7) I hereby submit to the disciplinary jurisdiction and the other officers and authorities of the society and the institute shall obey and abide by the rules made by the Head of the institution.
- 8) I hereby also agreed that so long as I am students at this Institute. I will do nothing inside outside Nursing College and in the hospital which may result in disciplinary action are under the rules prevailing or that may made here after or under the acts and laws in enacted by organization.
- 9) I have carefully noted that rules and procedures of admission as given in the prospectus, which I am required to follow for getting admission to the said course and shall in matters of interpretation accept the decision, given by the principal and / or management in this respect as final binding.

Yours faithfully,

(Signature of the Applicant)

DECLARATION OF THE GUARDIAN :

- 1) I undertake to pay the fees as required in full at the time of admission and shall pay further fees as per rules of the institute.
- 2) I shall take the responsibility of the applicant towards institute rules regulations and for 100% attendance to the college.
- 3) For any misbehavior of student during course, Gaurdian & Student himself will be responsible for it.
- 4) In any circumstances if student wants to cancel his/her Admission he has to pay entire course fee before claiming original documents from institute.

Yours faithfully,

(Signature of the Gaurdian)

FOR OFFICE USE ONLY

Please Admit. Shri./Kum./Smt. _____ S/o./Do./W/o. Shri. _____

in the Course of : _____ Year : 20 -20

Accountant

**Chairman
Admission Committee**

Principal

