



# PRAGATHI EDUCATION TRUST

#8, Rajanna Complex, Jnanabharathi Main Road, Nagarabhavi Circle, Bengaluru-72

Sneha College of Nursing

Saint Antony School & College of Nursing

RKP School of Nursing

Arya College of Nursing

ID CARD PHOTOGRAPH

Please staple a passport-sized photograph to this box. Please write your name and birth date on backside of photograph in pencil only.

## APPLICATION FORM

Admission No.

### Student Information

Student Full Name: \_\_\_\_\_ D.O.B.

Father's Name: \_\_\_\_\_ Mobile \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Mobile \_\_\_\_\_

Nationality: \_\_\_\_\_ Sex: Male  Female

Nationality Citizenship / Aadhaar No.: \_\_\_\_\_

Entrance Test Details: Examination: \_\_\_\_\_ Rank No.: \_\_\_\_\_

Qualified Examination Passed: \_\_\_\_\_ Registration No.: \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Student Mobile: \_\_\_\_\_

Local Guardian Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Relation with Student : \_\_\_\_\_  
 Mobile: \_\_\_\_\_

Hostel Package: Yes  No  Sharing : 6  4  2  Attach  Non Attach  Hostel Fees: \_\_\_\_\_

Date :

Place :

Signature of Father / Guardian

Signature of Student

### For Office Use only

Description	1st Year	2nd Year	3rd Year	4th Year
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
Total Fee	.....	.....	.....	.....

Course :  M.Sc.  B.Sc.  PB B.Sc.  GNM

**Admitted by**  
 Code: .....  
 Name: .....  
 Mobile: .....

**Verified by**  
 Name : .....

**Entered by**  
 Name : .....

**Approved by**  
 Name : .....

**DECLARATION BY THE CANDIDATE**

1. Mr. / Ms..... hereby affirm that the information furnished by me in this application and the enclosure are true. I know that if the information furnished by me found to be untrue, my seat will be forfeited
2. I will not indulge in any form of ragging. I know it is a criminal offence and if found guilty I will be summarily dismissed. I undertake to make good the loss caused to the College/Staff/Student or any other person caused by any illegal act of mine.
3. I am liable for payment of the balance of fees for the entire course, in case I discontinue the course or expelled from the college for any reason.
4. I shall abide by all the rules & regulations of the College that may be framed from time to time.
5. In all matters regarding my admission to the course, the decision of the College is final and binding on me

Place: .....  
 Date: .....

.....  
 Signature of the Applicant

**DECLARATION BY PARENT OR GUARDIAN**

(Declaration to be signed by the guardian, only in case both father and mother of the candidate are not alive)

1. I Mr./ Ms..... hereby affirm that the information furnished in my Son's /daughter's / ward's application and in the enclosures are true, I know that if the information furnished by my son's /daughter's / ward's found to be untrue, my son's / daughter's / ward's seat will be forfeited.
2. I know ragging is a criminal offence and shall take steps to prevent my son / daughter /ward from indulging in it. I also know that, if he/she is found guilty of the offence, he / she will be summarily dismissed from the college. I undertake to make good the loss caused to the College/Staff/Student or any other person caused by any illegal act of my son/daughter/ ward.
3. I am liable for payment of the balance of fees calculated for entire course, in case my son /daughter / ward discontinues the course or is expelled from the college for any reason.
4. I am also aware that once the candidate is admitted to the course, no refund of fees either in full or part. Thereof will be made, for any reason

Place: .....  
 Date: .....

.....  
 Signature of the Parent / Guardian

**LIST OF ENCLOSURES TO ACCOMPANY THE APPLICATION FORM (PHOTOSTAT COPIES)**

1. S.S.L.C. / Equivalent Examination marks card for age proof.
2. P.U.C. / Equivalent Examination marks card
3. B.Sc. / Equivalent Examination all the three years marks cards (for graduates)
4. Conduct / Character Certificate issued by the College last studied.
5. Date of Birth Certificate if not mentioned in the S.S.L.C / Equivalent examination marks card
6. Physical fitness certificate issued by the Medical Officer not below the rank of Assistant Surgeon.
7. Migration Certificate issued by the University for candidates coming from outside of Rajiv Gandhi University of Health Sciences, Bangalore and Eligibility certificate issued by the Rajiv Gandhi University of Health Sciences, Bangalore.
8. Three passport size Photograph of which one to be affixed to the application form in the space provided
9. Foreign Nations seeking admission should obtain eligibility Certificate issued by the Registrar, R.G.U.H.S.

**FOR OFFICE USE**

Eligible / Not Eligible for Admission

Admission is approved / rejected

Signature of Admission Clerk / Superintendent

Signature of Principal