- 3. I hereby agree that if found guilty of any aspect of ragging, I may be punished as per the provisions of the UGC Regulations mentioned above and as per the law in force.
- 4. I hereby affirm that I have not been expelled or debarred from admission by any institution.
- 5. I hereby affirm that I will not use alcohol / smoke/ substances which are harmful inside the college and hostel premises.

	o.ue uno comoge	aa					
Sig	gned this	day of		month of		year.	
Place:			Signature	e of Studen	t		
	UNDERTAKING BY PARENTS / GUARDIAN						
1.	I, Mr. / Mrs			,	Father / M	other /	
	Guardian of				have ca	refully	
	read and fully understood the law prohibiting ragging and the direction of the						
	Supreme court and the Central and State Government in the regard as well as					well as	
	the UGC Regulation	ons on Curbing t	he Mena	ce of Ragging in H	igher Educ	ational	
	Institutions, 2009.						
2.	I assure you that m	ny son / daughter	/ward wi	ll not indulge in any	act of raggi	ng.	
3.	I hereby agree tha	t if he / she is fou	nd guilty (	of any aspect of rag	ging he / sh	ne may	
	be punished as per the provisions of the UGC Regulations mentioned above and						
	or as per the law in	force.					
4.	If my ward left in m	ny ward left in mid-stream, I am liable to pay the balance fees for all the whole					
	course even if left i	n mid-stream.					
Sigr	ned this	day of		month of	у	ear.	
Contact No:							
E-mail ID:							
Place:			Signature of Par	ent / Guard	lian		

# VIVEKANAND COLLEGE OF NURSING Plot No: 18/2492 & 18/2593, Khandagiri, Bhubaneswar-751030

AND BANESWING

Mobile: +91 9090021010, E-mail: vivekanandnursing@gmail.com

Session -20\_\_\_\_/ 20\_\_

# **ADMISSION FORM**

Passport size Photograph

GNM/B.Sc. (N)/ POST BASIC B.Sc. (N)/ M.Sc. (N)

Instruction:

- 1. Fill in this form properly & legally in English with your own handwriting.
- 2. Incomplete form will not be accepted.

2. Fees Should be Paid 3 Installments.

3. Candidates should read the rules and regulations during filling up the application.

1.	FULL NAME (In Block Letters)						
2.	Father's Name						
3.	Mother's Name						
4.	Occupation						
5.	Sex				Blood Group	р	
6.	Marital Status						
7.	Date of Birth D D M N	/ Y	YY	′ Y	8. Age		Years
9.	Category	sc[	ST	ОВ	C GENI	ERAL [	
10.	Nationality						
11.	Aadhar No.						
12.	Permanent Address	At-			Po-		·
		Ps-			Dist		
		State	-		PIN-		
13.	. Mailing Address		At- Po-			-	
			Ps- Dist				
			-		PIN-		
14.	Contact No. Mobile :			Whatsa	pp:		
15.	E-mail ID						
16.	Educational Qualification						
	SI. Examination No. Passed Year Name of Institute / C		Nar Board	ne of the / Universit	Marks Obtained	Total Marks	Percentage
	1.						
	2.						
	3.						
	4.						
17.	Mode of Payment:  1. Payment should be made through Cheque/ NEFT/RTGS mode only.						

# **DECLARATION BY STUDENT**

### Undertaking and pledge by the candidate:

- a) I hereby certify that the entries made by me in this form are correct to the best of my knowledge & belief and I have not concealed any information in any manner.
- b) I agree to observe and abide by all the rules and regulations of the institution in which I may be admitted including those with regard to the programme of studies, syllabus, scheme of Examination, Examination rules and the Hostel rules that may be laid from time to time by Vivekanand College of Nursing during the period of my studies and I will not associate myself with any activity prejudicial to the discipline of institution.
- c) I fully understand that of any violation or infringement of those rules and regulations disciplinary action can be taken against by the authorities which may include cancellation of the candidature.
- d) I certify that I am not involved in any illegal activity and no criminal case is pending against me in any court of law.
- e) I understand that at any stage, it is found that I have provided any wrong information to seek admission my admission shall stand cancelled automatically and I shall have no claim whatever on the seat or the dues paid to the institution.
- f) I certify that I have not passed the qualifying examination from more than one board/ University/ any other examining body.

Signature of Student

## **DECLARATION BY THE PARENTS/GUARDIAN**

- A) I hereby declare that I hold myself responsible for the good conduct and I have known a financial obligation.
- B) I can afford and undertake to pay the tuition and other fees payable to the institution under the rules of the college.
- C) I agree to the condition that on discontinuation of the course, I am liable for the payment of the entire course fee.

Signature of Parent/Guardian

# **CHECK LIST/ ENCLOSURES**

#### (Attach Original Copies Only)

Note: Tick relevant box. Leave box empty if not applicable.

SI.	Document	OFFICE	STUDENT
1.	Matric Certificate & Mark Sheet		
2.	+2 Certificate & Mark Sheet		
3.	GNM/ Degree Certificate & Mark Sheet		
4.	Nursing Council Registration Certificate		
5.	CLC / Transfer Certificate		
6.	Course Completion & Conduct Certificate		
7.	Migration Certificate		
8.	Category Certificate		
9.	Aadhar Card		
10.	Experience Certificate (For M.Sc. Nursing)		
11.	B.Sc(N)/P.B.B.Sc(N) Degree Certificate (For M.Sc. Nursing)		
12.	B.Sc(N)/P.B.B.Sc(N) first year to final year mark sheets (For M.Sc. Nursing)		

Verified By Officer Name & Seal

Signature of Student

## **UNDERTAKING BY THE STUDENT**

1.	l,	, Son / Daughter
	of Mr. /Mrs	have carefully read
	and fully understood the law prohibiting ragging and the dire	ction of the Supreme
	Court and the Central/ State Government in this regard.	

- 2. I do hereby undertake that
  - a) I will not indulge in my behavior or act that may come under the definition of ragging.
  - b) I will not participate/involved or propagate ragging in any form.
  - c) I will not hurt anyone physically / mentally or psychologically or cause any other harm.