



KLE SOCIETY'S CENTENARY INSTITUTE OF NURSING SCIENCES

YALLUR ROAD, BELAGAVI-590005, KARNATAKA, INDIA.

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APPLICATION FORM FOR ADMISSION TO BASIC B.Sc. NURSING

Year of Admission			Affix Paste passport size photograph
State you belongs to (Name of State in which you have passed PUC 2 nd year or 10+2 or its equivalent)			
Grand Total Marks obtained at 10+2 or its equivalent exam	Maximum Marks		
	Marks Obtained		
	Percentage		
Marks obtained in 10+2 or its equivalent Exam in Physics, Chemistry & Biology (PCB)	Subjects	Maximum Marks	Marks obtained
	Physics		
	Chemistry		
	Biology		
	Total		
	Percentage (PCB)		
Do you have English as one of the optional subject in 10+2 or its equivalent Exam	Yes / No:	If yes marks obtained:	
<p>To, The Principal, KLES Centenary Institute of Nursing Sciences, Yallur Road, Belagavi.</p> <p>Sir, I the undersigned wish to seek admission for 1st year B.Sc. Nursing Course in your institution. I am furnishing the following particulars and undertake, that if admitted I agree to abide by the rules & regulations of institution in force as well as those that may be framed in future. I have attached all the original documents and attested copies of all necessary documents with this admission form.</p>			
1	Name of the candidate (In Block letters as per SSLC Marks card)		
2	Name of Father		Occupation :
3	Name of Mother		Occupation :
4	Parents Permanent Address Pin code: Mobile No.: Email ID :		
5	Local Guardian Address (if Any) Pin code : Mob No. :		
6	Contact details of Candidate	Mob No.:	Email ID:

7	Details of Birth	Gender :	Date (DD/MM/YYYY) :	
		Place:	Age as on today:	
8	Nationality			
9	Details of Religion	Religion :	Caste :	
		Sub Caste :	Category:	
10	Aadhaar Number		11	Blood Group :
12	Marital Status	Married / Unmarried / Others		
13	Annual Income of Family			

ACADEMIC INFORMATION

Examination Passed	Name of the School / College	Name of University / Board	Month & Year of Passing	Maximum Marks	Marks Obtained	Percentage
SSLC / SSC Xth Std.						
II PUC / XII Std						

Documents to be enclosed:

The following documents to be attached with the application form :			Checklist for official use only
1	S.S.L.C / X th Standard Marks Cards	(Original +1 attested copy)	
2	II nd PUC / XII th Standard Marks Cards	(Original +1 attested copy)	
3	Transfer / L.C Certificate from previous Institution	(Original +1 attested copy)	
4	Character Certificates from the previous institution	(Original +1 attested copy)	
5	Migration Certificate (Non Karnataka candidate only)	(Original +1 attested copy)	
6	Caste Certificate	(1 attested copy)	
7	Aadhar Card	(1 attested copy)	
8	Recent Pass port size colour Photos	5 Nos	

Note:

- The candidate coming from out of state must obtain **Eligibility Certificate** from **Rajiv Gandhi University of Health Sciences, Bangalore** on payment of prescribed fees and should submit the **Eligibility Certificate** before taking admission to 1st year B.Sc. Nursing Course.
- Student having an aggregate of 45% in PCB are ONLY eligible for B.Sc. Nursing Course.

I declare that the above information is true and correct and documents produced are genuine one.

Place:

Signature of the Candidate

Date:

Name:.....

FOR OFFICE USE ONLY

Mr./Miss.....is admitted to 1st year B.Sc. (N) course for the year

Applicant has paid a Fee of Rs..... vide Receipt No.:Dated:

Course Clerk

Documents verified By

Accountant

Office Superintendent

Principal

KLES Centenary Institute of Nursing Sciences,
Yallur Road, Belagavi.

DECLARATION BY THE CANDIDATE & PARENT / GUARDIAN

1. I am fully aware that my admission to B.Sc Nursing course is purely provisional and subject to approval by RGUHS.
2. If admitted, I hereby agree, to the rules and regulations at present in force or that may be hereafter framed for the governance of the institution, its Management, and Hostel. I undertake that as long as I am a student of this institute, I do nothing either inside or outside the Institution, that will interfere with the orderly governance and discipline.
3. I hereby agree to make good any loss or damage to books, apparatus, furniture, and other belongings to institution and its attached Hostel etc., which may be caused by my carelessness, negligence or wantonness on my part.
4. I hereby solemnly affirm that statements made and information furnished in my application form and also all the enclosures submitted by me are TRUE. However, if any of the information is found to be UN-TRUE in material particulars, I realize that I am liable for criminal prosecution and I also agree to forgo my seat in the Institution.
5. I hereby assure that I will not indulge or resort myself in any form of anti-social and prohibitive activities such as **Ragging** or any kind of harassment of physical or otherwise. I am fully aware of the provisions of Indian Penal Code relating to offences connected with hurt, endangerment of life or personal safety, wrongful confinement, assault, criminal intimidation and so on, and if I am found indulging myself in such prohibitive and antisocial activities. I am liable for severe punishment including removal from the institution and handing over to the police.
6. I hereby declare that I hold myself responsible for the timely payment of dues to the Institution during period of my studies, till the accounts are cleared.
7. I am fully aware that I have to fulfill 80% of attendance in theory and 100% in practical to be eligible for University/Board examinations failing which I myself will be held responsible for the consequences arising out of it.
8. I am aware that fees once paid will not be refunded under any of the circumstances.
9. I am fully aware that, in-case I want to discontinue before expiry / completion of the course, or want to seek transfer to any other college. I shall have to pay full fees (non refundable) then prescribed for all the remaining years i.e., for the entire course.
10. I/We hereby declare that I abide by the above mentioned rules. I / We also declare that I have carefully gone through the instructions for candidates, herein mentioned and agree for the same.

Signature of the Parent/Guardian.

Name:

Date:

Aadhar No.:

Signature of the Candidate.

Name:

Date:

Aadhar No.: