

SAK Group of Institutions

Affiliated to Karnataka State Diploma in Nursing Examination Board, Bangalore. Approved by Govt. of Karnataka, KNC Karnataka & INC New Delhi

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APPLICATION FOR ADMISSION																										
GNM Basic B.Sc. Nursing PB B.Sc. Nursing										Affix Recent Passport Size																
M.Sc. Nursing D. Pharam											Photograph															
Student Inform	atic	on																								
Name of the Applicant:																										
Sex :		м	ale			Fe	ema	le																		
Date of Birth :]															
Blood Group :																										
Religion :] Ca	ast :														
Mother Tongue :														21		ł										
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Phone Number :]	M	ob:										
E-mail ID :																										
Parents / Guaro	lian	Inf	orm	atio	on																					
Name of the Father :																										
Occupation of Father :																										
Name of the Mother :																										
Occupation of Mother:																										
Address of Parents :																										
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Phone Number :															M	ob:										
E-mail ID :																										

Details of Educational Qualification									
SI.No.	Qalification	Name of the School / College	Subject	Percentage	Year of Pasing				

Passport Details (If applicable)

Passport Number	:
Place & Country of Issue	:
Date of Issue	Date of Expiry :
Students Visa No.	

Copy of Annexure enclosed (Attach 2, sets of attested Photocopies)

1. Class X / Equivalent Marks Card
2. Class XII / Equivalent Marks Card
3. Transfer Certificate
4. Migration Certificate (for Non Karnataka Student only)
5. Medical Fitness Certificate
6. Caste Certificate (incase of SC/ST/cat 1 students only)
7. 10 recent colour passport size photographs
8. Equivalence Certificate (from AIU, Delhi)
9. Passport & Visa
*Applicable for foreign nationals / NRI <mark>s / PIOs only</mark>

Other Information

Extra - Curricular Activities

Sports / NCC / Cultural Events Social Service etc. in which the candidate excelled previously. (To be supported by certificates)

Are you physically Disabled ? if yes give the details

Declaration by the Student

- 1. I here agree to abide by the rules and regulations of the university, the State Government & the College regarding my admission. to be approved based on eligibility criteria submission of testimonials in original as stipulated by the University.
- 2. I here agree to abide all the rules & regulations regarding payment of fees for my course. Payment of fees on time is my / parents responsibility and any delay will attract fine as decided by the Management from time to time. I accept that refund of fees is not allowed under any circumstances.
- 3) I agree to the rule that deposits of any kind, both at college and hostel, will be refunded only after the completion of the course. I will not request for any refund if I withdraw or vacate the hostel room. I agree that the entire amount shall be forfeited under such situation.
- 4) I Declare that I shall not indulge in ragging, eve teasing, smoking, consuming alcohol drug abuse or any other anti-social activity In the college premises, hostel, on educational tours, industrial visits or elsewhere.
- 5) I shall abide by the dress code prescribed by the institution.
- 6) I shall abide by the rules and regulations of the Institution in force, which may be amended from time to time by the Management / University / State Government / and or any other regulatory authorities. The decision of the Management with respect to any administrative or academic matter shall be final and binding on me at all times,
- 7) I shall accept the decision of the authorities in all matters of training, conduct and discipline with right to question any one of them.

l,	Son / Daughter of					
Mr. / Ms	declare that the particulars furnished above are true to					
the best of my knowledge and belief. I have read and understood the rules and regulations for my admission						
to,	course for the academic year 201201					
and shall abide by the rules and regulations that shall be on me at all times.						

Place : Bangalore

Signature of the Student

DECLARATION BY PARENT / GUARDIAN

I hereby declare that my ward does not suffer from any disease / aliments. I know the financial obligations of my ward and I can afford to pay all the costs and undertake to pay the tuition and other fees payable on time to the College as per the rules in force and which may be amended from time to time by the Management, I am aware that the fee paid to the College for admission will not be refunded in case he / she does not join the course, he / she discontinues the studies, he / she is expelled from the college for any reason. I also stand by the declaration given to the college by my son / daughter.

Place : Bangalore

Signature of the Parents / Guardian Name:

Remarks (for office use only)								
Date of Receipt of Application : Accepted Rejected								
Any other comments :								
Admitted to. :	Application No. :							
Admission No. :	Fee Paid :							
Receipt No. :	Date :							
Authorised Signatory	College Seal							

S A K Group of Institutions

Kanakapur Road, Bangalore Office : +91 8618161896, http://www.sakinstitutions.com