**Form No.\_\_\_\_\_\_\_**

**DASMESH COLLEGE OF NURSING, TALWANDI ROAD, FARIDKOT**

**APPLICATION FORM FOR ADMISSION TO POST BASIC B.SC. NURSING (SESSION 2020-21)**

Affix recent Attested passport size colour photograph here

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |

1. PBNET ROLL NO.

|  |  |  |
| --- | --- | --- |
|  |  |  |

1. Marks Obtained in PBNET
2. Category name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Code

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

1. Name (IN BLOCK CAPITALS)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

1. Father’s Name (IN BLOCK CAPITALS)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

1. Mother’s Name(IN BLOCK CAPITALS)
2. Category with caste \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Annual Income of parents Rs.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

from all sources

1. Sex Male Female

|  |  |
| --- | --- |
|  |  |

|  |  |
| --- | --- |
|  |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |

1. Date of Birth Day Month Year
2. Address for Correspondence \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Cell/Tel No.(Student)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Parents) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(E Mail)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Permanent Home Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

10. Tick Residence Status Punjab State Other State

11. Academic/Professional Qualifications

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Exam. | Board/ University | Roll No. | Year | Subjects | Marks |
| Max | Obtained | %age |
| 10th |  |  |  |  |  |  |  |
| 10+2 |  |  |  |  |  |  |  |
| GNM |  |  |  |  |  |  |  |

12. Clinical Experience.

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Hospital | From | To | Total Experience |
|  |  |  |  |
|  |  |  |  |

13. GNM from Punjab Outside Punjab

If from out of Punjab then are covered under exemption Yes No

(If covered under exemption then mention the sub clause of clause 4-B of Punjab Govt. Notification\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* **Undertaking and pledge by the candidate**:-
1. 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.
2. I agree to observe and abide by all the rules and regulations of the Institution, including those with regard to programme of studies, syllabus, scheme of examination, examination rules and the hostel rules that may be laid from time to time by Baba Farid University of Health Sciences and/or Institution during the period of my studies and I will not associate myself with any activity prejudicial to the discipline of Institution.
3. I fully understand that for any violation or infringement of these rules and regulations, disciplinary action can be taken against me by the authorities which may include cancellation of the candidature.
4. I certify that I am not involved in any illegal activity and no criminal case is pending against me in any court of law.
5. I understand that if at any stage, it is found that I have provided any wrong information/committed any fraud to seek admission, ,my admission shall stand cancelled automatically and I shall have no claim whatsoever on the seat or the dues paid to the Institution and I & my parents shall be liable for criminal proceedings.
6. I certify that I have not passed the qualifying examination from more than one Board/University/any other examining body.

*Male candidate shall affix their left thumb Impression*

 *FULL Signature of the Candidate*

*Female candidate shall affix*

*their right thumb Impression* Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Undertaking by Parent/Guardian**

1. I certify that my son/daughter/ward Mr/Ms.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has submitted this application with my knowledge and consent and that I hold myself responsible for his/her good conduct and his/her maintenance and any payment of fee during the stay at Institution. The entries made by him/her in the admission form are correct to the best of my knowledge and belief.
2. I certify that my son/daughter/ward Mr/Ms.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has not passed the qualifying examination form more than one Board/University/any other examining body.

Dated: **Signature of Parent**

 **Name of Parent/Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CHECKLIST OF ENCLOSURES:**

(Attested copies of the following certificates)

**Checked by**

 **Candidate CollegeOfficial**

1. Registration certificate from the nursing council.

2. Detail of Marks Card 10+2

3. Detail marks Card of GNM examination

 4. Character Certificate from Institution last attended

.5. Certificate in support of claim under reserved Category

6. Punjab Residence Certificate

7. Migration certificate from the last attended university

 /board / council.

8. Gap year under taking with self attested photo(if applicable)

9. Matric or equivalent certificate for Date of Birth