

St. GEORGE COLLEGE

-----OF MANAGEMENT & SCIENCE-----

(Affiliated to Bangalore University, Approved by AICTE & Recognized by the Government of Karnataka)
OMBR Layout, Banaswadi, Bangalore-560043. Tel: 080-25450193/194 Fax: 080-25453522.
Email: info@stgeorgecollege.org website: www.stgeorgecollege.org

APPLICATION FOR NURSING PROGRAM

For Office purpose only: College Admission No:.....

1. Academic Year : 20__ - 20__ Course Applied for: M.Sc., Nursing [] /
B.Sc., Nursing [] / P.C. B.Sc., Nursing / Diploma GNM []

2. Name of the Applicant (IN BLOCK LETTERS) as mentioned in 10th/SSLC certificate

Telephone number: Landline: _____ Mobile: _____

Email-Id : _____

3. Name of the Father (IN BLOCK LETTERS) as entered in Transfer certificate

Telephone number: Landline: _____ Mobile: _____

Occupation: _____ Designation: _____

Name of the Organization presently working: _____

Annual Salary: _____

4. Name of the Mother (IN BLOCK LETTERS) as entered in Transfer certificate

Telephone number: Landline: _____ Mobile: _____

Occupation: _____ Designation: _____

Name of the Organization presently working: _____

Annual Salary: _____

5. Date of Birth: DD/MM/YYYY Mother Tongue: _____

Sex: Male [] / Female []

Religion: _____ Specify: SC [] ST [] OBC [] GEN []

Attach the relevant Certificate as applicable

6. Nationality: _____

If the applicant is not an Indian citizen, furnish the following particulars:

Passport No :	Valid till : MM/YYYY
Visa Category : Student [] / Visiting [] / others []	Valid till: MM/YYYY

Visa No : _____

7. ACADEMIC RECORD

Furnish details of certificates/degrees obtained

Examination	Board/ University	Month/Year Passed	Subjects	Grade / Class/ Percentage
SSLC/Equivalent 10 th Standard School certificate				
Pre-University Course/ Higher Secondary				
Diploma GNM				
B.Sc., Nursing				
Any other Qualification(Specify)				

8. Medium of Instruction: _____

9. Hostel Facility required: Yes [] / No []

10. Permanent Address

Address for Correspondence:

Telephone number: _____

Telephone number: _____

Declaration of the Parent/Guardian	Declaration of the Applicant
<p>I, _____ hereby declare that all the information provided in this form by my son/daughter _____ - are complete and correct to the best of my knowledge.</p> <p>I further declare that I as a parent/guardian, stand guarantee on behalf of my ward to the college for all financial commitments till the completion of the course.</p> <p>I assure the college of my full support and cooperation in all matters concerning academics, administration and general behavior of my ward. I shall accept and abide all the rules and regulations of the college and ensure compliance of the same by my ward.</p> <p>I further declare that in the event of discontinuation of studies by my ward, I am liable to pay the entire course fee to the college.</p> <p>Neither I nor my ward shall be eligible for any refund of fees under any circumstances.</p> <p>Date: Place: _____ Signature of the Parent /Guardian</p>	<p>I, _____ hereby declare that all the information provided in this form by me are complete and correct to the best of my knowledge.</p> <p>I undertake to abide by all the rules and regulations of the college, instructions of the authorities and be subject to their disciplinary action if needed.</p> <p>I agree to adhere to the rules and regulations, scheme of studies, examinations, the attendance requirement of the affiliating Institution.</p> <p>I undertake to pay the stipulated fees and other payments for specific activities which form part of the academic requirement.</p> <p>I further declare that in the event of discontinuation of studies by me , I am liable to pay the entire course fee to the college.</p> <p>Date: Place: _____ Signature of the Applicant</p>