



# Prajwal College of Nursing

# 73/A, Balaji Layout, Byadarahalli, Magadi Main Road, Bangalore - 560 091.  
Phone : +91-80-23485703, E-mail : info@prajwalnursing.com, www.prajwalnursing.com

Application No. :

## APPLICATION FORM

Course Applied for :  M.Sc -Nursing  P.B.B.Sc-Nursing  B.Sc -Nursing  GNM -Nursing

Other .....

Issued on :

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Received on :

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Applicant's  
Photo

**IMPORTANT** : All entries must be made in English in Block (Capital) Letters only.

1. Full Name of the Applicant (As Per SSLC Marks Card)	
2. Age & Date of Birth	
3. Place of Birth	
4. Full Name of Father / Guardian	
5. Nationality	
6. Religion & Caste	
7. Mother Tongue	
8. Sex	
9. Whether belongs to S.C / S.T. / O.B.C. or any other Reserved Category	Yes / No
10. Father's Name	
11. Mother's Name	
12. Occupation of Parent / Guardian	
13. Permanent Address of the Applicant	Local Address of Guardian
PIN.....Phone : .....	PIN.....Phone : .....
14. Name of the School / College last attended	
15. Qualifying Exam Passed (S.S.L.C / P.U.C / Other. (If other please specify	
16. Month & Year of Passing	
17. Register Number in the qualifying exam passed	

18. Marks obtained in the Qualifying Examination

- Documents Required: a)  SSLC Marks Sheet b)  II PUC / 10+2 / PDC / Marks Sheet
- Documents Required : c)  Migration Certificate d)  Transfer Certificate  
(Photocopies)
- (Original to be Produced at the time of admission)**
- e)  Conduct Certificate (Issued by the institution where last studied)
- f)  Passport Size Photo & Passport Copy (For NRI )
- g)  Student Visa (for foreign nationals)

**DECLARATION BY THE APPLICANT**

- I have carefully read the instructions and I hereby declare that all the information given and statements made in this application and also in its accompanying attachments and enclosures are true to the best of my knowledge.
- I agree to stay in the Hostel for full term of the course. I agree to the condition that if any information or any statement is found to be wrong, my admission to the Institution would automatically be cancelled.
- If admitted, I promise to abide by the rules and regulations in force or there that may hereafter be made for the administration of the institution and I shall do nothing either inside or outside the institution which will interfere with its orderly working and discipline.
- I agree to rule that I may be expelled from the institution for misconduct, raging, lack of interest in studies, indiscipline or continuous failure in the examination.
- Any Payment paid towards admission is not refundable.
- Any sole jurisdiction deputes shall be solved in Bangalore only.

Date : Signature of Applicant

**DECLARATION BY THE PARENT / GUARDIAN**

I declare that I am fully aware of the financial obligations of admitting my ward into the Institution, and that I shall pay all the costs and the prescribed fees to the Institution under the rules framed by the management from time to time. I also own responsibility for all particulars mentioned in the application by my son / daughter / ward..... I shall be answerable and responsible for the conduct / character and behavior of my ward, during, his / her stay in the Institute. Moreover, I accept the decision of the Principal, in respect of my ward in all matters relating discipline and attendance as binding on me.

Date : Signature of Parent / Guardian Name :

**For Office Use Only**

Check List  a  b  c  d  e  f  g Checked by :

C/o. \_\_\_\_\_

Referred by \_\_\_\_\_ Mobile : \_\_\_\_\_

Address : \_\_\_\_\_

I have checked and verified all required information and supportive documents and declare that the candidate is admitted for the course applied.

Principal