



# S . H COLLEGE OF NURSING

GREENGARDENS, CHERTHALA, ALAPPUZHA-688524, PH : 0478 2813438

## APPLICATION FOR ADMISSION TO THE BASIC B.Sc NURSING DEGREE COURSE FOR THE YEAR -2013-14

Please affix  
your  
photograph  
here

Application No:

PLEASE READ INSTRUCTIONS AT THE END CAREFULLY BEFORE  
FILLING UP & FILL IN BLOCK LETTERS ONLY

1. Name : \_\_\_\_\_

2. Age : \_\_\_\_\_ 3. Date of Birth : \_\_\_\_\_ (in word)

4. Sex : \_\_\_\_\_ 5. Nationality : \_\_\_\_\_ 6. Blood Group : \_\_\_\_\_

7. Religion : \_\_\_\_\_ 8. Caste : \_\_\_\_\_ 9. Marital Status : \_\_\_\_\_

10. Name of Parent/ Guardian : \_\_\_\_\_

11. Occupation : \_\_\_\_\_ 12. Annual Income: \_\_\_\_\_

13. Permanent Residential Address : \_\_\_\_\_

14. Phone No. With STD code \_\_\_\_\_ 15. Contact Mobile No. \_\_\_\_\_

16. E-mail : \_\_\_\_\_

17. Address to which communication is to be sent: \_\_\_\_\_

### Educational Profile

SL.No	Qualifying Examinations (Please specify the qualification, course)	Name of Institution/ University	Year of Passing	No. of appearance	% of marks
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____

### Academic Achievements (Rank holder, Publications, recipients of merit scholarship)

SL.No	Specify the Achievement	Name of Institution/ University	Year of Achievement	Prizes Received
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

## Extra Curricular Activities

SL. No	Specify the Item (E.g. Sports-Volleyball, Arts-Folk Dance)	Name of Institution/ University Participated	Year of No Participation	Prizes Received
1.				
2.				
3.				

## Hobbies & Interests

### DECLARATION BY THE APPLICANT

I (Name).....Here by declare that I have carefully gone through the prospectus received along with the application and I promise to abide by the rules and regulations of the institution. I further declared that I have no physical or mental disability to disqualify me for admission and the statement made by me in this application and documents produced to support of the above details and correct to the best of my knowledge and belief.

Place : Signature :  
Date : Name :

### DECLARATION BY THE PARENT / GUARDIAN

I hereby confirm having read the above information given by my ward and declare that the same are true and correct.

Place : Signature :  
Date : Name :

Instructions :- Attestedcopies of following certificates.

- 1) Duly filled application form
- 2) Copy of Admission Memo, Fee receipt for LBS
- 3) 5 Passport size Photo
- 4) Copy of S S L C with date of birth(Those Candidate who do not have the date of birth in the SSLC, should produce the birth certificate from concerned Panchayath)
- 5) Copy of Plus two/ Equivalent examination
- 6) Copy of Transfer Certificate
- 7) Copy of Contact Certificate
- 8) Copy of Income Certificate
- 9) Copy of Caste Certificate (for SC/ST/OBC)
- 10) Copy of migration Certificate (other University)