



APPLICATION FORM FOR ADMISSION TO B.SC NURSING COURSE

(SESSION 20.....20.....)

Please fill the form in Capital Letters in blue ball point pen only.

First Name:Last Name.....

Father's /Husband Name:

Mother's Name:.....

Date of Birth:.....

Address.....

Pin code..... Town/city

Contact No..... Email.....

Father Contact No..... Email.....

Alternate Contact No..... Email.....

Marital Status :

Marks Details

Sr. no.	Examination passed	Year of passing	Name of School & Board	Max. Marks	Marks Obtained	Percentage& Division	Subjects
1.	10 th						
2.	12 th						
3.	JKBOPE ESCORE						

I undertake that in case of any change in above particular(s), I will inform the college authorities writing within a week from the date of change. In case of default, I shall be liable for disciplinary action as the Institution may deem fit/decides

Signature of Applicant

Date.....