

STATE INSTITUTE OF NURSING AND PARA MEDICAL SCIENCES, BADAL
APPLICATION FORM FOR ADMISSION TO FIRST YEAR M.Sc. NURSING COURSE

(To be filled by the Candidate in his / her own handwriting)

1. PMNET- 2019 Roll No. ➤ _____ 2. Category applied for _____
Name of the Candidate ➤ _____
3. Father's Name ➤ _____
4. Marks in PMNET 2019 ➤ _____
5. Marks in B.Sc. Nursing/Post Basic B.Sc. Nursing (qualifying examination) ➤ b. Total Marks
Maximum _____ Obtained _____
c. Final Year Marks
Maximum _____ Obtained _____
6. Date of Birth ➤ _____
7. Age as on 31.12.2019 ➤ _____
8. Name of School & State from where Passed B.Sc. (Nursing)/Post Basic B.Sc (Nursing) ➤ _____
9. Permanent Address ➤ _____
_____ Mobile No. _____

Signature of the Candidate

(TO BE CHECKED BY THE OFFICE)

- | | Remarks of the Checker | Signature of the Checking Officer |
|--|------------------------|-----------------------------------|
| 1. Matric - Certificate for checking date of Birth | _____ | _____ |
| 2. DMCs of all years of B.Sc. (Nursing)/Post Basic B.Sc.(N) | _____ | _____ |
| 3. Degree Certificate of B.Sc.(N) | _____ | _____ |
| 4. Registration Certificate | _____ | _____ |
| 5. Punjab Resident Certificate | _____ | _____ |
| 6. P.M.N.E.T. Admit Card | _____ | _____ |
| 7. Certificate of reserved category (ies), if any | _____ | _____ |
| 8. Undertaking (not availed residence benefit in any other state) | _____ | _____ |
| 9. Experience certificate | _____ | _____ |
| 10. Exemption certificate if applicant is not a resident of Punjab | _____ | _____ |

Signature of Doctor Incharge
Checking Board.

UNDER TAKING / DECLARATION

1. I _____ S/D/o _____ resident of _____ Solemnly declare as under:-
- a. That I am a citizen of India.
 - b. That I have not obtained the benefit of Residence in any other State.
 - c. That I passed B.Sc.(Nursing) examination in the year _____ and after that I did not join any college. During this period I was not involved in any unlawful activities and no criminal case is pending against me.
 - d. That my admission is purely Provisional at my own risk & responsibility subject to production of original certificates / documents at the college where selected for verification and thereafter verification by the BFUHS on receipt of registration return from the college concerned as also subject to Medical Fitness on the basis of Medical Examination to be conducted by the concerned college.
 - e. That I am at present studying in _____ course at _____ (name of college and place) and will leave this course before joining the present college in which I have been selected, I will also submit the proof in this regard to the present college authority after obtaining the same from the concerned college.
 - f. That I have not passed the qualifying examination from more than one Board/University/any other Examining Body.
 - g. Undertaking : I undertake that if any deception/fraud committed by me/on my behalf in the PMNET-2019, is detected by the University, my admission shall be cancelled and a criminal case shall be registered against me and the persons involved in the deception/fraud.
 - h. I undertake that if I have been found indulged in ragging in the past or in future, my admission may be refused or I shall be expelled from the institution.

Thumb Impression

(Left in case of male/Right in case of female)

Signature of Candidate

2. OPTION FOR ADMISSION
(to be filled before the Selection Committee)

- a. Certified that I have been fully aware about the vacant seats and I have also been fully explained by the Selection committee about the vacant seats at my turn in merit and the same has been displayed outside as well as in the Selection Committee Room.
- b. I hereby accept admission in M.Sc. Nursing Course Session 2019 at _____ (Name of the College) in _____ under _____ Subject.
(Name of the Category) (Name of Speciality)

OR

- c. I am not willing to opt any seat available at my turn and willingly forgo the available seats in today's counseling.

Signature of the candidate

MEMBER

MEMBER

MEMBER

CHAIRPERSON