



LORD SHIVA COLLEGE OF NURSING

HAMIRGARH – 148033 (MOONAK) Distt. SANGRUR (PB)

Application form for the Admission of

(To be filled in by the candidate in BLOCK LETTERS with same spellings as per the Secondary Certificate)

Form No.

Session

Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Father's Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Mother's Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Date of Birth

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

In word

E-mail: Contacts :

Address:

Category: Male/ Female:

Nationality: Hostel Facility, Yes/ No:

Academic Record:

Qualification	Board/ University	Year of Passing	Subjects	Total Marks	Obtained Marks	%age	Remarks
Secondary							
Sen. Secondary							
G.N.M.							
Any other							

Experience :

Name of the Institutions/ Hospital:

Candidate's Signature

- Enclosures:
- (i) Copy of Matric Certificate (Showing Date of Birth)
 - (ii) Copy of 10+2 Certificate
 - (iii) Residence Certificate (domicile)
 - (iv) Medical Certificate
 - (v) Copy of GNM Diploma

Undertaking and Pledge by the candidate:

- a. I hereby certify that the entire made by me in this from are correct to the best of my knowledge and I have not concealed any information in any manner.
- b. I agree to observe and abide by all the rules and regulations of the institute and hostel rules that may be laid from time to time by the Punjab Govt. & Punjab nurses registration council.
- c. I fully understand for any violation or infringement of these rules and regulations, disciplinary action can be taken against me by the authorities which may include cancellation of the candidature.
- d. I certify that I am not involved in any legal activity and no criminal case is pending against me in any court of law.
- e. I understand that if at any stage, it is found that I have provided any wrong information to seek admission to the institution, my admission shall stand cancelled automatically and I shell have no claim whatsoever, on the seat & the dues paid to the institution.

Date:

Signature of the Candidate

Undertaking by the Parent/ Guardian

I certify that my son/ daughter/ ward Mr./ Ms. has submitted this application with my knowledge and consent and that I hold myself responsible for his/ her good conduct and his/ her maintenance and any payment of fees during the stay at any institution. The entries made by him/ her in the Admission Form are correct to the best of my knowledge.

Date:

Signature of the Parent/ Guardian

Admission Form

Signature of Principal with Seal