

## **APEX TRUST NURSING COLLEGE**

A unit of Apex Welcare Trust

NH7, Varanasi-Mirzapur Road, Samaspur, Chunar, Mirzapur-231304 (Recognised by **U.P.Nurses & Midwive Council U.P. State Medical Faculty, Lucknow**) Affiliated to **Mahatma Gandhi Kashi Vidyapith, Varanasi**)

## **ADMISSION FORM**

## **B.Sc. NURSING COURSE**

Affix your recent attested passport size photograph here

Fill the form in CAPITAL LETTERS (English only) in Black or Blue ink only.

I. PERSONAL DATA								
Name of the Applicant								
Father's Name								
Father's Occupation								
Mother's Name								
Mother's Occupation Mobile No Mobile No								
Guardian's Name (in ab	sence of parents):							
	Mobile No							
_								
	parents/guardian: Rs/-	,						
		)						
Date of Birth	Date of Admission							
Permanent address								
		<u> </u>						
PIN	Mobile No.							
Email:								
Aadhar No:								
Address for Correspondence								
		<u>                                     </u>						
PIN	Mobile No.							

Religion			Nationa	Nationality				
Category				<u> </u>	<u> </u>	_		
General	SC	ST	ОВС	(Pu	t Tick √ ma	arks)		
Marital Stat	us							
Married	i	Unmarried		(Pu	t Tick ✓ ma	arks)		
II. ACADEMIC QUALIFICATION								
Examinations	*	Subjects	Year of	Marks	Total	PCBE		
passed	University	0,00	passing			Percentage		
High School / Secondary								
Board								
Examination								
(SSLC)								
Senior								
Secondary								
Board Examination /								
Intermediate								
Graduation								
Post								
Graduation								
Others								
		ND ACTIVITIES (id	i anu)					
		AR ACTIVITIES (if	ally)					
IV DOCII	MENTS T	O BE SUBMITTE	<b>n</b>					
Photocopy		O BE SUBMITTE	D					
	•	sheet						
<ol> <li>High School Marksheet</li> <li>High School Certificate</li> </ol>								
3. Higher Secondary Marksheet								
- The state of the								
— — — — — — — — — — — — — — — — — — —								
<ol><li>Character Certificate from the Principal of the School/College last attended</li></ol>						П		
	lential Certifi							
	e Certificate	Julio						
	ne Certificate	<u>.</u>						
		; ate Gam	as / Litar	arv / Cultu	ıral	Ш		
-				_	ııaı			
		coloured passport siz			dian	Ш		
-		hoto of each of Fathe	i, iviother	anu Guar	uidii			
(in ab	sence of par	ents).						

		DECLARATION					
•	I, Ms./Mr		daughter/son				
	of Mr./Mrs						
		ormation in this form is correct					
	to the best of my kno	•	dein sallana sa atatad in the				
•	prospectus.	e rules and regulations of t	this college as stated in the				
•	<ul> <li>I shall not violate the rules of the college by taking part in any kind of s</li> </ul>						
		ge. If I do so, my name may be					
		ollege and I shall not claim any					
•			ll neither be refundable nor				
		ever may be the reason.					
•		•	of the course, I shall be liable				
	the college authority.		Dues Certificate" is issued by				
•	•		entioned in the prospectus and				
•	as notified from time		criticalica in the prospection and				
•	I will attend regular c	lasses and participate in all the	e college activities.				
•	All the disputes are s	subject to the jurisdiction of Var	ranasi Court only.				
	ate: ace		Signature of the candidate				
_							
re of	sponsible for regular p	payment of fees, any other dund of Mr./Ms	of above candidate shall be ues, good conduct and welfare				
	Date: Signature of Par		/O				
D	ate:	3	s/Guardian				
	ate:ate:	9	rs				
		Name in Block Lette					
		Name in Block Lette	rs				
		Name in Block Lette	rs				
		Name in Block Lette	rs				

Signature of the Principal with Seal

Father

Signature of the Admission Coordinator

Husband/Guardian

(in absence of parents)

Mother