Form No. _____ / DSN/Admission/ Admission No. : _____

Admission Date : _____

Dhanbad School of Nursing

[Affiliated to BBMKU (Dhanbad), JNRC (RIMS Ranchi)
INC (New Delhi)]

APPLICATION FOR ADMISSION

A recent passport size photo of applicant to be affixed here

B.Sc.(N) ☐ **Post B.Sc.(N)** ☐ **GNM** ☐ **ANM** ☐

Note : 1) To be filled in applicant's own Handwriting. (In English)
2) Read the prospectus before filling the form.
3) Not to be sold or Photocopied
4) Fill details as per Secondary Educational Certificate.

1. Name .....
2. Date of Birth ..... 3. Age : .....
4. Gender : ..... 5. Marital Status : .....
6. Height : ..... 7. Weight : .....
8. Nationality : ..... 9. State : .....
10. Religion : ..... 11. Aadhar No. ☐☐☐☐☐☐☐☐☐☐☐☐
12. Category (SC/ST/OBC/Minority/Gen) : ..... 13. Language (Speak/write) .....
14. Father's Name : .....
15. Mother's Name : .....
16. Father's Occupation : ..... Mobile No. .....
17. Mother's Occupation : ..... Mobile No. .....
18. Guardian's name (if father is not the guardian) : .....
19. Mobile No. : .....
20. Address of Father/Mother/Guardian :

Present Address : .....

.....

.....

..... Mobile No. .....

At Asarfi Hospital, Baramuri, B. Polytechnic, Dhanbad - 828130 (Jharkhand)
Mob. No. : 8227996502, 8227996528 • E-mail : infodsn@dsnahl.in

Scanned with CamScanner

. Permanent Address : .....

.....

.....

21. Name of the Local Guardian, who could be contacted in case of emergency : .....

22. Relationship : .....

23. Address of Local Guardian : .....

..... Mobile No. .....

24. Educational Qualifications :

INTERMEDIATE

	Board/University	Year of Passing	Subjects	Max. Marks	Obtained Marks	Percentage (%)
12th Class/ Equivalent						
			Total			

MATRICULATION

	Board/University	Year of Passing	Subjects	Max. Marks	Obtained Marks	Percentage (%)
10th Class/ Equivalent						
			Total			

25. Tick mark your ability in extracurricular activities if any (attach photo copies) :

Elocution / Sports, Dance, Music, NCC etc. .....

26. Details of Relatives working in Asarfi Hospital if any :

Name	Relationship	Department

Scanned with CamScanner

27. List of Family Members : Photos to be submitted (stamp size)

i) **FATHER**

Father's Name : ..... Age : .....

Occupation : ..... Ph. No. .....

Address : .....

.....

i) **MOTHER**

Mother's Name : ..... Age : .....

Occupation : ..... Ph. No. .....

Address : .....

.....

i) **LOCAL GUARDIAN**

Local Guardian's Name : ..... Age : .....

Occupation : ..... Ph. No. .....

Address : .....

.....

28. List of Visitors, authorised by the father :

i)

Visitor's Name : ..... Age : .....

Occupation : ..... Ph. No. .....

Address : .....

.....

LIST OF ENCLOSURES FOR B.Sc./ GNM / ANM (Please mark a tick mark against statement)
Photocopies of the following documents :

- ☐ Birth Certificate
- ☐ Migration Certificate
- ☐ School Leaving Certificate or T.C.
- ☐ Recommendation letter
- ☐ Secondary Exam mark Sheet
- ☐ Character Certificate
- ☐ Secondary Exam Board Certificate
- ☐ +2 or its equivalent Examination Mark sheet
- ☐ +2 or its equivalent Exam. Board Certificate
- ☐ Caste Certificate
- ☐ For the sponsored candidate, a letter from the authorised person with the specific direction regarding payment
- ☐ Demand Draft of Rs. 500/- in favour of Dhanbad School of Nursing, payable at .....

Scanned with CamScanner

AGREEMENT

- I have read and understood the prospectus and regulations of Dhanbad School of Nursing, Dhanbad. I hereby agree to abide by them.
- I shall not claim for any Certificates until I have paid all my dues and fulfilled all the requirements of Dhanbad School of Nursing.
- If decided to discontinue the training due to a disciplinary action, I will have to pay the indemnity amount mentioned below as per the year of leaving : Rs. 10,000/- as indemnity amount in the first year and also an additional Rs. 5,000/- for each academic year.
- I hereby agree to join the educational trip and other field posting as required for clinical experience planned at the discretion of the college authorities.

I hereby agree for the surety for the applicant ..... and bind myself to abide by the above agreement.

Date : ....

Signature of the Student

Date : ....

Signature of the Father/Mother/Guardian

DECLARATION

We declare that the statements given on the application form are true. We accept the rules and regulations of the School according to the prospectus and the policy of Dhanbad School of Nursing, Dhanbad authorities have the right to discipline, suspend, or dismiss a student for inefficiency, misconduct, or behaviour which is detrimental to the work of the Institution. We are willing to accept any addition, amendments and alteration which may be made from time to time to the above terms. an conditions.

....

Applicant's Signature & Seal Signature of the Father/Mother/Guardian & Date

DECLARATION OF ANTI-RAGGING

We hereby agree that if found guilty of any aspect of ragging by indulging, participating, propagating or hurting anyone physically or psychologically or cause any other harm then the candidate will be punished or expelled as per provisions of the UGC regulations.

..... Date ....

Signature of Father/Mother/Guardian & Date Signature of Applicant

DECLARATION OF CANDIDATE

I, Miss ..... daughter of Sri/Smt. ..... declare that I have read and understood all the rules and regulations that are in vogue during the continuation of my training here at .....

I shall be held responsible and be punished including my discontinuance of the training.

Further, I declare that I am UNMARRIED/MARRIED/WIDOW/DIVORCED.

Date : ....

SIGNATURE OF THE TRAINER

DECLARATION OF PARENT OF CANDIDATE

I, Sri / Smt. ..... do, hereby declare that my daughter/ ward ..... will abide by the above mentioned Rules and Regulation.

Date : ....

SIGNATURE OF THE GUARDIAN

Scanned with CamScanner