

Application No:-



PGP COLLEGE OF NURSING AND RESEARCH

NAMAKKAL-637207

(Approved by Govt. of Tamilnadu G.O (Ms) NO. 246, Affiliated to Tamil Nadu Dr. M.G.R Medical University

Recognized by Tamil Nadu Nurses and Midwife Council)

Ph .No:-8939808576, Email:- nursing@pgpews.com

APPLICATION FOR ADMISSION IN B.SC (NURSING)

Affix Photo

FILL THE APPLICATION IN CAPITAL LETTERS

1. Name of the Candidate :-
(As given in the SSLC Certificate)
2. Gender :-
3. Age, Date and Place of Birth :-
4. Father's Name :-
5. Mother's Name :-
6. Parents Occupation & Income per Annum :-
7. Permanent Address with
Phone No & Email Id :-
8. Nationality, Religion, :-
9. Community :- **OBC / BC / MBC / SC / ST**
10. Mother Tongue :-
11. Medium of Instruction in the 12th Standard :- **Tamil / English (or).....**
12. State the applicant belongs to :-
13. Academic Information
(Name and Address of the School) :-
14. Have you been a Student in any class of
any professional college.
If, yes Specify :-

15. Marks Obtained in the H.Sc (or) Equivalent Examination:-

Subject	Registration No	Month and Year of Passing	Marks Obtained	Percentage of Marks
Physics				
Chemistry				
Biology				
Botany				
Zoology				
English				

16. Any physical disability present. If Yes Specify :-

17. Requirement of Hostel Accommodation :- Yes / No

18. Participation of Games/Athletes at District/State/National Level :-

DECLARATION BY THE CANDIDATE AND PARENT/GUARDIAN

We.....S/o/D/o.....do hereby agree to abide the rules and regulations of the College/Hostel. We agree to the decision of the College /Hostel. If any Violation of rules and regulations. We undertake that information furnished by us in this application is true and correct and I undertake that any wrong information furnished by me, detected will be treated as cognizable offence. We aware that the fees once paid will not be refunded. We undertake and accept that Criminal Case will be filed against my ward if He/ She indulge in ragging.

Signature of the Candidate

Signature of the Parent/Guardian

Date:-

OFFICE USE ONLY

- 1. Registration No :-**
- 2. Date Of Admission:-**
- 3. Quota :- Management / Government**

Office Seal

Signature of the Principal