

RAIPUR RABINDRA VIVEK NURSING INSTITUTE

SAPAR, CHANDRAHATI, PURBA BARDHAMAN, 713102

Admission Form

SL NO:

PLEASE FILL IN BLOCK LETTERS

Session : _____

Course Name* : **GNM**

Name of the Candidate* _____

Father's Name* _____

Mother's Name* _____

Guardian's Name* _____

Guardian's Mobile No* _____ Relationship with Guardian* _____

Caste* : General / SC / ST / OBC Religion* : Hindu ☐ Muslim ☐ Others ☐

Marital Status* : Single ☐ Married ☐ Divorced ☐ Gender* : M / F / T ☐

Aadhaar Number*

Physical with disability* : Yes ☐ No ☐ D.O.B*

Contact Details* :

Village / Town* _____

State* _____ District* _____

P.S* _____ Post Office* _____

Pin Code* _____ Email Id* : _____

Student Mobile No* : _____ Student WhatsApp No* : _____

GNM / B.Sc. Entrance Examination

JENPAH/NEET*

Yes ☐

No ☐

If Yes Put Your Rank :

Hostetler* : Yes ☐ No ☐

Educational Qualification* :

Exam	Board / University	Year	Total Marks	Obtain Marks	Percentage
M.P. or Equivalent					
H.S.					
H.S. Subject					
English					

Place:

Date:

Full Signature of the Candidate

Student Name:

Block:

Guardian's Number :

1. Total Fees: **2. 1st Payment:**

1st Year:

At the time of admission: 50000+49000 = 99000/-

November'25 :	25000/-	.....
February'26 :	30000/-	.....
June,26 :	30000/-	.....

2nd Year:

August' 26 :	48000/-	.....
November'26 :	23000/-	.....
February'27 :	23000/-	.....
June'27 :	23000/-	.....

3rd Year:

August'27 :	48000/-	.....
November'27 :	23000/-	.....
February'28 :	23000/-	.....
June ' 28 :	23000/-	.....

Note : Registration Fees, Exam Form Fill Up Per Year, Documents Verification Fees, Uniform Extra.

Documents Required:- M.P- Admit , Mark sheet ,Certificate; H.S- Admit ,Mark sheet, Certificate; Photo-Color 5 Copies; Original School Leaving Certificate; Domicile Certificate; Medical Certificate

Guardian's Signature with Date

Signature with Stamp