

BLOSSOM GROUP OF INSTITUTIONS

Passport Size Photo

Recent

No.1/5 Balagangadhara Nagar Mallathahalli Lake Road, Mallathahalli Outer ring Road, Nagarabhabi Banlore - 560056 Karnataka.

APPLICATION FORM

				_			
Academic Year: To:				Application No:			
Note: Car	didates are	required to submit indivi	dual applica	ation for each course			
APPLICATION FOR ADMISSION TO B.Sc NURSING GENERAL NURSING (GNM)							
CANDIDATE PERSONAL DETAILS							
1. FULL NAME (BLOCK LETTERS)							
(As per school records):							
2. Gender:	3. [Date of Birth:		. 4. Age: 5. Blood Group:			
6. Marital Status:	7. N	lationality:		8. Domicile State:			
9. Religion:	10. (Caste & Community:		11. Category of Reservation:			
12. Do You Suffer Fro	m Any Cor	nmunicable Disease?	YES	NO NO			
If Yes Mention The	Details:						
13. Do You Have any	Past Medic	YES	NO				
If Yes Mention The	If Yes Mention The Details:						
14. Student Aadhar Ca	14. Student Aadhar Card No.:						
16. Student Email Id:							
17. Student Mobile No	o:	// 🛨					
Extra Curricular Activities, Hobbies: (Sports, Literary, Cultural, Etc.)							
	Ī	<u>-</u>					
	To Spea	k:					
Languages Known:	To Read	ıd:					
LAST EXAMINATION DETAILS							
School / College Last Attended University / Board Last				Last Examination Passed with Reg. No.			

ALL EXAMINATION ATTENDED DETAIL

Course	Name of Institution	Month & Year of Final Exam	Board / University	Maximum Marks	Marks Obtained	Percentage Obtained
Class - X						
Class - XII / PUC						

LAST ATTENDED EXAMINATION MARK DETAILS

Course	Subject	Maximum Marks	Marks Obtained	Marks in Percentage (%)	Medium of instruction & Year of Passing	Name of the institution & Address
				X		
				4		
			7			
		<i>f b</i>	*		-	
	1	L	X		-	
					-	
Total						

LAST ATTENDED EXAMINATION PERCENTAGE DETAILS

Total Marks In Languages	Total Percentage In	Total Marks In Optional	Total Percentage In
	Languages	Subjects	Optional Subjects

Family Details: Own Brother's & Sister's

Family Members With Relationship	Age	Educational Qualification	Occupation	Residence address

Candidate Permanent Address				Candidate Present Address		
State:	District:		State:		District:	
City:	Pin	:	City:		Pin:	
	CA	NDIDATE PAR	RENTS DETA	ILS		
Details	7	Father	M M		Mother	
Name				X		
Occupation			7			
Annual Income				7		
Aadhar No				4		
Email ID			7		7 77	
Contact Number			1	7		
Paren	ts Permanent A	ddress	1		Parents Present Address	
State: District:		State	e:	District:		
City: Pin:			City:	ä	Pin:	
ACADEMIC DETAILS						
School / College Las	t Attended U	niversity / Boar	d Last Attend	ed L	ast Examination Passed with Reg. No.	

<u>List of documents enclosed (2 Set of Attested Xerox Copies Only Attached with the Application</u> <u>Form) Original Certificates Need to Summit the Concern Person in the College.</u>

a)	Marks Card Of 10th	b) Marks Card Of +1 and +2 (PUC)	c) Transfer Certificate					
d)	Character Certificate	e) Migration Certificate	f) Eligibility Certificate					
g)	8 passports + 6 stamp size	h) Aadhar Card of Student.	i) Aadhar Card of Student					
	Photos		Father or Mother					
j)								
	Student. Certificate. (For Foreign Nationalities & NRI's Only)							
For I	For Foreign / NRI Students: Passport No:							
Issue	Issued At:Visa No:							
	<u>.</u>	DECLARATION THE BY STUDEN	<u>IT</u>					
	_	ven is complete and accurate to the best						
		esentation may result in rejection. In th lege are neither refundable nor transferr						
abide	by all the rules and regulation of t	he college, Rajiv Gandhi univer <mark>sity</mark> o <mark>f h</mark> ea	alth science and apex bodies and I am					
aware	e of the law forbidding the act of ra	gging, the punishment thereof which coul	d be awarded, if found guilty.					
Pla	ce:							
Dat	Date: Name & Signature of Student Name & Signature of Parent / Guardian							
DECLARATION BY PARENT / GUARDIAN								
		d above and the declaration signed by m	Fig. in the translate the content of the metalor of the content of					
		of his/her dues, if any, to the institute. tructure and have understood the conten						
	이번 그 그 그 그는 그 그는 그 그는 그는 그를 그린 그를 그린 그를 그리고 있다.	be involved in any kind of ragging and						
involvement, I am aware of the punishment thereof which could be awarded if found guilty.								
Pla	ice:							
Da	te:	Name &	Signature of Parent / Guardian					
FOR OFFICE USE ONLY								
The	application of Mr. / Ms	S/	o / D/o					
ls s	selected by the "Selection Comm	ittee" for admission to	For the					
aca	demic year:							
Date:								
Pla	Place: Bangalore							