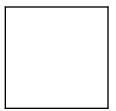
School of Nursing: Application form

Candidate's photo



NEW INDIA DEVELOPMENT SOCIETY'S

New India Institute of Nursing Studies (NIINS) (Institute's registration details)

Application for Admission to Diploma in General Nursing and Midwifery (20----- 20-----)

FOR OFFICE USE ONLY

Admission Section	Scholarship/Sponsorship	Selected/ Not Selected/Wait-listed
Date of Application		
Documents yet to be submitted		
Verified by	Verified by	Principal/Vice-Principal

STUDENT'S INFORMATION

Name of the student

Father's/Husband's/Guardian's name

Mother's name

Gender

Male	Female

Student's permanent address

House name/number	Town/Village	Post office
District	Pin code	Landline
No		
Address for communication		
House name/number	Town/Village	Post
office Distric	ctPin code.	
Landline No		
Parent's/Guardian's		
mobile phone number		
email ID		
Parent's/Guardian's profession		
Annual income Rs		
<u>Student's</u>		
personal mobile phone number		
email ID		
Date of birth	Place of birth	
Nationality	Mother tongue	
Marital status: Married/Unmarried		

Height cms	Weight K.g.
Religion Caste	
If, Christian, Denomination (Name & Address of	
Have you had any major illness in the past?	
If yes, give details	
Briefly state why you want to be a nurse	
Why have you chosen NIINS for your nursing st	udies
Documents submitted:	

Details of the Class last attended (for Migration Certificate/Transfer Certificate)

Class	Name of the Institution	Year (fromto)	Board/University	Percentage of marks

Details of Subjects with marks scored in Class X & XII

<u>Class X</u>:

SI.No	Subject	Marks scored	Maximum marks	Percentage/ Grade	Exam. Board
1	English				

<u>Class XII</u>

SI.No	Subject	Marks scored	Maximum marks	Percentage/ Grade	Exam. Board
1	English				

Participation in extracurricular activities: (SPORTS, NCC, SCOUTS, NSS, MUSIC, ANY OTHER)

DECLARATION 1

I, Ms./Mr....., have read the prospectus and application form for admission to the GNM course at NIINS and have understood their contents. I agree to abide by all the rules and regulations of the Institute and the Indian Nursing Council. All the information I have furnished in my application for the GNM course is true and correct to the best of my knowledge. I will solely be responsible for any wrong information in it. I am also aware that the Institute has the right and authority to take appropriate action against me for untrue information and that the Institute can cancel my admission if any of the wrong/misleading information provided has been beneficial to me in securing admission to the said program at NIINS.

Signature of the student

Place

Date

DECLARATION 2

I, Ms./ Mr., fully endorse the details in the application and the above declaration made by my Ward Ms./Mr.I am aware that the NIINS has the right and authority to take action against my Ward for any misconduct or violation of the rules of the INC and NIINS.

Signature of the parent/Guardian

Place:

Date :

