

GOVERNMENT B.Sc. NURSING COLLEGE, SRINAGAR

FORMAT OF APPLICATION FOR ADMISSION TO 02 YEARS B.Sc. Post Basic B.Sc. Nursing

SESSION: 2026- 27 (BATCH 2026)

1. Name: _____
2. S/o, D/o: _____
3. Permanent Address: _____
_____ Village/ Mohalla _____
4. Tehsil _____ Distt: _____
5. Pin: _____ Gender _____ M-Status _____
6. Address for Correspondence: _____
7. Email Address: _____ Mobile/ Phone No. _____
8. Category: _____ Category selected in BOPEE List _____
9. D.O.B _____ Blood Group _____ Religion _____
10. Institution last attended: _____
11. Date of Joining Post Basic B.Sc. Nursing Course: _____
12. J&K BOPEE Notification No.: _____ Dated: _____
13. S. No. in BOPEE Notification _____ RANK _____ Course _____
14. Whether Registered with University of Kashmir: Yes ☐ / No ☐ (If, Yes)
University of Kashmir Registration No. _____

15. Documents enclosed in original with 04 self- attested Xerox copies.

- a) 10th pass marks certificate
- b) 12th pass marks certificate
- c) DOB certificate
- d) Category certificate (wherever applicable)
- e) GNM Marks card of final year.
- f) Migration certificate from institution last attended.
- g) Provisional cum Character/Transfer certificate from Institution last attended.
- h) Domicile Certificate
- i) Physical fitness certificate From CMO/BMO
- j) Photostat copy of Aadhar Card.
- k) Time Gap Affidavit (Applicable for those candidates who have a time gap of one year or more between passing GNM & joining Post Basic B.Sc. Nursing Course)
- l) Anti Ragging Affidavit from student and parent prescribed by College (Applicable for all student)
- m) One file cover and one transparent bag for original documents.
- n) 05 Passport size latest photographs with NAME displayed on each.**
- o) 04 Xerox copies of all above documents figuring at a, b, c, d, e, f, g, h duly self-attested.**
- p) Allotment Letter issued by JKBOPEE.**

16. Educational Qualification in detail:

Year of passing	Subjects	Max. Marks	Marks Obtained	% age	Grade	Registration No.	Name of the Board
GNM FINAL YEAR							

Signature of Applicant

DECLARATION BY THE APPLICANT

I _____ S/o, D/o: _____ undertake
that:

1. The information given by me is true and correct to the best of my knowledge and belief.
2. The documents submitted by me are genuine. In case any of the document submitted by me as detailed at Para- 15 is proved to be fake, tempered or forged, I shall be held personally responsible for that and the authorities shall be at liberty to cancel my admission.
3. I also undertake to deposit the college fee from time to time as and when asked for.

Signature of Applicant

GOVERNMENT B.Sc. NURSING COLLEGE, SRINAGAR
STUDENT HEALTH RECORD

➤ **Identification Data of student**

1. Name of the student

2. Parentage

3. Batch Age.....

4. Course

5. Sex D.O.B

6. Permanent Address

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.....

7. Contact No.

Weight & Height	Blood Group	Medical & Surgical History, if any	History of Allergy, if any	Immunization Status	Treatment, if any

Signature of student

Incharge

Coordinator

AFFIDAVIT FOR POST BASIC B.Sc. NURSING
(To be attested by Judicial Magistrate)

I _____ S/o, D/o _____ R/o _____ do hereby solemnly affirm and declare as under:

1. That I have been selected for the Course of Post Basic B.Sc. Nursing Session 2026-27 in Govt. B.Sc. Nursing College, Srinagar vide JKBOPEE notification No. _____ Dated _____.
2. That during the period of stay in college as a Post Basic B.Sc. Nursing student I shall abide by the rules and regulation prescribed by the University of Kashmir, J & K BOPEE Govt. of UT of Jammu and Kashmir issued from time to time in this behalf.
3. That I shall remain much disciplined.
4. That I am not on rolls of any Institution viz. Professional/ Non Professional degree or diploma course in any College/ University in or outside the UT of J& K.
5. That If at any stage it is detected by the competent authority or Principal of the College concerned that I have secured admission to Post Basic B.Sc. Nursing by fraud, Concealment of facts, or misstatement my admission to the degree shall be treated terminated/ cancelled and I may also be debarred from seeking admission to the degree course in future and shall also be liable for criminal procedure.
6. The documents submitted by me are genuine. In case any of the document submitted by me is proved to be fake, tempered or forged, I shall be held personally responsible for that and the College authorities shall be at liberty to cancel my admission.
7. That I also undertake to pay the fee which is fixed for the course from time to time by the competent authority.
8. That I remain absent from the College for a period of 15 days College authority shall be at liberty to cancel my admission.
9. As per rules of INC and University of Kashmir the college authority have right to debar me from appearing in the examination. If my attendance is below 75% in theory and 100% in clinical.

Deponent

VERIFICATION: Verified on _____ at District Court _____ that the content of the affidavit are true and correct to the best of my knowledge, belief and nothing material has been concealed and no part of it is false.

Deponent

Affidavit format
Prescribed by College Anti- Ragging
(To be attested by Judicial Magistrate)
Post Basic B.Sc. Nursing

1. I _____ S/o, D/o _____ R/o _____ B.Sc.
_____ student enrolled in Govt. B.Sc. Nursing College, Srinagar
carefully read and fully understood the law prohibiting ragging and the directions
of the Supreme Court and the Central/ State Government in this regard.
2. I have received a copy of the INC Regulations on Curbing the Menace of Ragging
in Higher Educational Institutions 2009, and have carefully gone through it.
3. I hereby undertake that:-
 - a. I will not indulge in any behavior or act that may come under the definition of
Ragging.
 - b. I will not participate in or abet or propagate Ragging in any form.
 - c. I will not hurt anyone physically or psychological or cause any other harm.
4. I hereby agree that if found guilty of any aspect of ragging, I may be punished as
per the Provisions of the INC Regulations mentioned above and/ or as per the law
on the land.

Signature of Student

Signature of Parent

Date:

Place:

AFFIDAVIT FORMAT

(TIME GAP)

(To Be Attested By Judicial Magistrate)

I, _____ S/O, D/O _____
R/O _____, do hereby solemnly affirm and declare as under:

1. That, I have been selected for _____ course in Govt. B.Sc. Nursing College, Srinagar by J&K BOPEE vide Notification No. _____
Dated: _____ under rank _____.
2. That, I have passed my GNM Final year examination in the year _____ under Roll No. _____ from (University) _____.
3. That, after passing my GNM Final year examination, I have not joined any Professional/Non Professional Degree or Diploma Course in any Institution/College/University in or outside the UT of J&K.
4. That, in case this statement proved incorrect I shall be personally responsible for the consequences arising there upon.

Deponent

VERIFICATION:

Verified on this day _____ at _____ that the contents of the affidavit are true and correct to the best of my knowledge, belief and nothing has been concealed and no part of it is false.

Deponent

Important Instructions for Post Basic B.Sc. Nursing:-

- **Post Basic B.Sc. Nursing 1st Year Fee Detail:-**
- For 1st Year :- Rs. 12000/-
- Registration Fee amounting Rs. 1675/= to be deposited in cash in the student section Govt. B.Sc. Nursing College Srinagar which is to be submitted towards University of Kashmir for registration.
- The students in respect of Post Basic B.Sc. Nursing Course shall Obtain Paying Slip from the student section Govt. B.Sc Nursing College Srinagar.
- No demand draft/ Cheque shall be accepted.