



OFFICE OF THE PRINCIPAL  
GOVERNMENT B.Sc. NURSING COLLEGE SRINAGAR-190001  
E-mail: conshreenbagh@gmail.com

**In charge**  
IT Section  
Govt. Medical College  
Srinagar

**No:** CON/ 1451-52 **Dated:** 12-09-2024  
**Subject:** Documents required for admission in respect of Govt. B.Sc. Nursing College Dewan  
Bagh, Srinagar for M.Sc. Nursing Programme 2024-25.

Sir/ Madam

Kindly find enclosed herewith the necessary documents required for admission in respect of  
M.Sc. Nursing Programme Session 2024-25.

It is requested to kindly upload the same on official website of Govt. Medical College, Srinagar  
for information of the students selected for M.Sc. Nursing Programme in Govt. B.Sc. Nursing College  
Dewan Bagh, Srinagar.

Matter may be treated as most urgent.

**PRINCIPAL**  
GOVERNMENT B.Sc. NURSING COLLEGE  
Srinagar.

**Copy to the:-**

1. Principal/ Dean Govt. Medical College, Srinagar for information.

Encl : (04) lms

**GOVERNMENT B.Sc. NURSING COLLEGE, SRINAGAR**

**FORMAT OF APPLICATION FOR ADMISSION TO M.Sc. NURSING PROGRAMME**

**SESSION: 2024- 25 (BATCH 2024)**

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 \_\_\_\_\_
10. Institution last attended: \_\_\_\_\_
11. Date of Joining M.Sc. Nursing Course: \_\_\_\_\_
12. J&K BOPEE Notification No.: \_\_\_\_\_ Dated: \_\_\_\_\_
13. S. No. in BOPEE Notification \_\_\_\_\_ RANK \_\_\_\_\_
14. Specialization for M.Sc. Nursing Programme \_\_\_\_\_
15. Documents enclosed in original with 04 self- attested Xerox copies.

- a) Domicile Certificate
- b) DOB certificate
- c) Category certificate (wherever applicable)
- d) Final Year B.Sc. Nursing/ Post Basic B.Sc. Nursing/B.Sc. Hons. Nursing Marks Card
- e) Discharge/Transfer certificate from Institution last attended.
- f) One Year Work Experience after B.Sc. Nursing/ Post Basic B.Sc. Nursing.
- g) Physical fitness certificate From CMO/BMO
- h) Certificate as a registered Nurse or Registered Midwifery or equivalent with any state Nursing Council.
- i) Photostat copy of Aadhar Card.
- j) Time Gap Affidavit (Applicable for those candidates who have a time gap of one year or more between passing B.Sc. Nursing/ Post Basic B.Sc. Nursing final year examination & joining M.Sc. Nursing)
- k) Anti Ragging Affidavit from student and parent prescribed by College (Applicable for all student)
- l) One file cover and one transparent bag for original documents.
- m) 05 Passport size latest photographs with NAME displayed on each.
- n) 04 Xerox copies of all above documents figuring at a,b,c, d, e, f, g, duly self- attested.

16. Educational Qualification in detail:

| Year of passing                         | Subjects | Max. Marks | Marks Obtained | % age | Grade | Registration No. | Name of the Board |
|-----------------------------------------|----------|------------|----------------|-------|-------|------------------|-------------------|
| B.Sc. Nursing/ Post Basic B.Sc. Nursing |          |            |                |       |       |                  |                   |

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 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

# AFFIDAVIT FORMAT

(TIME GAP)

## M.Sc. NURSING PROGRAMME

(To Be Attested By 1<sup>st</sup> Class 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 B.Sc. Nursing/ Post Basic B.Sc. Nursing Final Year examination in the year \_\_\_\_\_ under Roll No. \_\_\_\_\_ from (Institute) \_\_\_\_\_.
3. That, after passing my B.Sc. Nursing/ Post Basic B.Sc. Nursing Final 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

AFFIDAVIT FOR M.Sc. NURSING  
(To be attested by Judicial Magistrate)

\_\_\_\_\_ S/o, D/o \_\_\_\_\_ R/o \_\_\_\_\_ do  
herby solemnly affirm and declare as under:

1. That I have been selected for the Course of M.Sc. Nursing Session 2024-25 in Govt. B.Sc. Nursing College, Srinagar vide JKBOPEE notification No. \_\_\_\_\_ Dated \_\_\_\_\_.
2. That I am not on rolls in any Govt./ Semi Govt. Institution in or outside the UT of J& K.
3. That all the submitted documents/ Certificates are genuine.
4. That I shall strictly adhere to the rules and regulations of the College.
5. 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.
6. That I understand that in case of any misinformation or concealment of my information or indiscipline or the certificates/ document submitted by me are not genuine or incomplete in any respect in view of statues of INC, my admission to the course shall be cancelled and I shall be subjected to legal action
7. That I submit this affidavit under free will without any pressure compulsion.

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)  
**M.Sc. NURSING PROGRAMME**

1. I \_\_\_\_\_ S/o, D/o \_\_\_\_\_ R/o \_\_\_\_\_ M.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: