



# ANAND COLLEGE OF NURSING & PARAMEDICAL SCIENCES

Address : Raturath, Someshwar, Almora, Uttarakhand, Contact No. 8449800015

## ANAND EDUCATION GROUP

### Admission / Registration Form

Session ..... Application No. ....

Course 

B.Sc. Nursing	GNM
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Student Name (in Block Letter) .....

Student Name (in Hindi) .....

Gender (Male / Female) Category (Gen/OBC/SC/ST) .....

Student Mobile No. ....

Student Email ID .....

Student Aadhar No. ....

Date of Birth 

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 Current Age ( Year ..... Month ..... )

Permanent Address .....

Landmark .....

District ..... State ..... Pin .....

Father's Name ..... Mobile No. ....

Father's Occupation Farmer..... Govt. Service ..... Private Service ..... Business ..... Other. ....

Yearly Income ..... Email ID .....

Mother's Name ..... Mobile No. ....

Mother's Occupation Homemaker ..... Service ..... Business ..... Farmer ..... Other .....

Yearly Income ..... Email ID .....

Local Guardian ..... Relation .....

Mobile No. .... Address .....

Class	Board	Year	School	Stream	English	PCB%	Total %
X							
XII							
Other							
Exam	Year	Roll No.			Marks	Rank	
NEET							
UNEE (HNBMEU)							
Other							

Note : Full session fee payment confirms admission; no refund on fee.

### Checklist of Documents

S.No.	Document	Status	
1.	Class 10 <sup>th</sup> Marksheet		
2.	Class 10 <sup>th</sup> Certificate		
3.	Class 12 <sup>th</sup> Marksheet		
4.	Class 12 <sup>th</sup> Certificate		
5.	CC, TC & Migration		
6.	Aadhar Card		
7.	Domicile		
8.	6 passport size photographs		
9.	Medical Certificate		
10.	Gap Certificate		
11.	Affidavit regarding Anti Ragging		
12.	Affidavit regarding Attendance		
13.	Caste Certificate		
14.	Income Certificate		

How did you come to know about our institute ? (Please provide details or reference)

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#### UNDERTAKING BY STUDENT

I..... Student of ..... declare that I have read and understood the prospectus. I commit to abide by institute rules, avoiding any conduct that may lead to disciplinary action. If any information provided is false, I understand my admission can be cancelled. I accept possible disciplinary action for rule violations.

Date : \_\_\_\_\_ Signature of the candidate \_\_\_\_\_

#### UNDERTAKING BY GUARDIAN / PARENTS

I.....affirm that I have read and explained the institute rules to my ward. I assure their compliance with all regulations, including regular attendance in theory, tutorials, and practical sessions. I understand that failure to meet attendance criteria may result in debarment from exams and possible expulsion, as decided by the institute authority.

Relationship with student ..... Signature of the parents \_\_\_\_\_

<b>Other Facility Desired</b>	<input type="checkbox"/> <b>Hostel</b>	<input type="checkbox"/> <b>Transport</b>	<input type="checkbox"/> <b>None</b>
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Fee Deposited Rs. ....

Approved by .....

Date .....

Fee Receipt No. ....

Fee Pending .....

**Admission Incharge**

**Accountant**

**Registrar**

