Healing Touch Institute of Nursing

AN ISO 9001:2015 CERTIFIED INSTITUTE.

(Run and Managed by Mother Anu Educational Institutions And Research Foundation)

Affiliated to West Bengal Nursing Council (WBNC),
Recognized by Directorate of Health Services, Govt. of West Bengal, Applied for Affiliation to Indian Nursing Council (INC)-New Delhi

Vill.-Urala, P.o.-Kanchiara, P.S.-Amdanga, Dist.-North 24 Parganas, Pin-743711, West Bengal.

APPLICATION FORM FOR GNM NURSING COURSE.

Academic Year.....

Name of the Candidates.....

Father's/ Guardians Name.....

Mother's/ Guardians Name.....

Father's Income.....

Sex..... Nationality..... Religion.....

Date of Birth & Age..... Caste & Category.....

Postal Address.....

.....

Present Address:.....

Phone..... STD Code.....

Adhaar No. ..... Pan No. .....

Year of PUC/ +2 Passed .....

Passport Size photo

Sl. No.	Subject	Total Marks	Obtained Marks	Percentage

The above given information is accurate & Authentic.

Student Signature

Undertaking by Guardian/Parents

I have read the prospectus and accept it. I agree to the applicant's admission to the course. In Case of discontinuation of course or cancellation of applicant's admission, I will pay the entire course fees. I will be liable to compensate for the loss incurred to the School by the applicant. I have been informed about West Bengal Nursing Council (WBNC) norms that the candidate has to submit his/her or All documents to WBNC for approval/registration purpose. I am declaring that the candidate/Applicant has taken admission in presence of its legal Guardian/ Parents at the school premises.

I shall be responsible for his/her conduct, behavior, 75% attendance in each subject. I shall make sure he/she has to abide by school rules and regulations.

Note : fees once paid is not refundable at any circumstances.

I have read all the above stated declaration carefully and I am signing below with my wish without anyone's pressure.

Signature of Guardian/Parents

Signature of students

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UNDERTAKING/ DECLARATION BY STUDENT & GUARDIAN

I.....S/o/D/o.....

Village/Town.....P.O.....

P.S.....Dist.....

State.....Pin No.....

I declare that at the time of admission in GNM Nursing Course at Healing Touch Institute of Nursing, I was physically present along with my parents/guardians at your School premises at Vill.-Urala, P.o.-Kanchiara, P.S.-Amdanga, Dist.-North 24 Parganas, Pin-743711, West Bengal.

1. I will be regular in all my classes throughout the year, I will maintain minimum of 75 % attendance as per the rules of Council, If for any unforeseen reason , I am compelled to be absent from the classes for long time, I shall submit a valid explanation at the earliest. I am aware that if 85% attendance is not maintained in all the subjects, I will not be allowed to sit for annual examination.

2. I do hereby promise that:

(a) I will not damage any of my school and Hostel property like benches, switch boards and laboratory equipment and sport equipment, damage any library items such as books, magazine, newspaper etc. damage the desk, bench, chair, walls of the Hostels, Classroom, blackboards and not damage the toilet walls with any writing.

(b) I will not damage any public property in the vicinity of School or elsewhere.

(c) I will abide by all the rules & regulations terms & conditions of the School.

(d) In case of cancellation of my admission in the middle of the session or after my registration done, I would be liable to pay for the loss as charged by the School for wasting one seat of the School.

(e) I declare that class 10th (Marksheet +Admit card) and 12th document (Marksheet) has been received by school authority in connection to my registration purpose at WBNC, which may take 12 months or more.

(f) In case my registration is not done by the Council due to any reason, I shall accept it and shall not have any claim towards the school Authority.

(g) In case of admission fees taken by any Consultancy firm not deposited to school, the school shall not be liable in any way.

(h) In case of accident or any mishap occurs with me or in case, if I commit suicide during my course due to my personal reasons or any other reasons school authority is not responsible for any such mishap.

(i) All the terminal tests & Examination conducted by the school will be attended by me.

(j) All the assignments, Record books, homework will be completed by me in due time. I shall make earnest attempt to achieve academic improvement In all the subjects throughout the year. I promise to stay back at school to complete the assignments given to me if I am unable to submit the same within the stipulate date.

(k) I shall attend the preparatory examinations, if I fail to do so, I may be debarred from appearing in the Examination and I shall not claim School for this.

(l) I shall keep up the good name of school in all my thoughts, behavior and actions in the classroom. In the campus, off the campus and the Hostels.

(m) I will be fully devoted towards my studies and will maintain absolute silence in the classes and shall not disturb the class by indulging in talks or moving in and out of the classroom when classes are in progress.

(n) I shall not indulge in ragging or misbehave with others in the campus / Hostel.

(o) I shall implicitly accept the decision of the Managements as final in the matter of discipline.

(p) I will not use any obscene language anywhere especially with respected teaching staffs.

(q) I am well aware that Admission fees once paid is not refundable under any circumstances.

® I have read the rules and conditions for my admission for GNM course at Healing Touch Institute of Nursing, Vill.-Urala, P.o.-Kanchiara, P.S.-Amdanga, Dist.-North 24 Parganas, Pin-743711, West Bengal. Nursing Council (WBNC). and Indian Nursing Council (INC) I have read all the above stated declaration carefully and I am signing below with my wish and without anyone's pressure.

Place:

Date:

Signature of Guardian/ Parents

Signature of Candidate