

## Vivekananda Polyclinic School of Nursing (affiliated to U.P. State Medical Faculty) Ramakrishna Mission Sevashram Vivekananda Puram, Lucknow 226 007

## Application for Admission to Diploma Course of General Nursing & Midwifery

Affix your recent passport size photograph here

\*Completed application forms are to be submitted to the Principal, Vivekananda Polyclinic School of Nursing, Vivekananda Puram, Lucknow 226 007 U.P.

		Registration No
Cour	rse Applied for:	
	Personal Data	
A-1	Name	
A-2	AgeYrs A-3 Date of Birth	Nationality
A-4	Mailing Address	
		Pin
PhoneFax		
Mob	ileE-ma	ail
Pern	nanent Address	
		Pin
Phor	neFax	
Mob	ileE-ma	ail
	amily Details	
B-1	Father's Name	
	Occupation	
B-2	Mother's Name	
	Occupation	
B-3	Annual Income (Both Parents) in Rs	

## C. Academic Performance

List down the Enclosure(s):

Exam Passed	Board/University	Subjects taken	Year of Passing	Marks Obtained	Marks in PCB
Matric/10th/SSC					
10+2/Inter					
Graduation					
Post Graduation					
Other					

υ.	Major Extra-Curricular Activities / Hobbles :
••••	Declaration
	ID/Odo hereby solemnly affirm and declare that:
•	Information in this form is correct to the best of my knowledge and belief and nothing has been concealed by me.
•	I shall abide by the orders, rules and regulations of this School as stated in the Prospectus. Ignorance of the same will not be excused by the School authorities.
•	I shall not violate the rules of the School by taking part in any kind of strikes, ragging or such other activities harmful to the Administration / School . If I do so, my name should be struck off from the School and I shall not claim any return of fees paid.
•	I admit that any charges / fees paid to the School will neither be refundable nor transferrable, whatsoever may be the reason.
•	In case I leave the School before the completion of the course, I shall be liable for payment of all dues, whatsoever, before 'no dues certificate' is issued by the School .
•	I shall pay the fees and all other dues in time as mentioned in the Prospectus / notified from time to time.
•	I will attend regular classes and participate in School activities and self development programmes. All the disputes are subject to the jurisdiction of Lucknow Court only.
	Date Signature of the Candidate
	This is to certify that I, father / guardian of above shall be responsible for regular payment fees, any other dues, good conduct and welfare of Kmduring her dies in this School.
	Dato Signature of Father / Guardian