

## MANASA COLLEGE OF NURSING

(Approved by the Govt of Karnataka, Affiliated to Rajiv Gandhi University of Health Sciences Recognised by Karnataka Nursing Council and Indian Nursing council-Newdelhi)

## Hosur Main Road, MALIR - 563 130, Kolar District, KARNATAKA STATE

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	www.manasainstitutions.com	e-mail : bsdhrpms	sc@yahoo.co.in		
SL. No. Of Application :		Dat	e of Issue :		
To,  The Chairman / Princip  Manasa School / Colleg  Malur - Hosur Road, Ma	je of Nursing,				
Dear Sir/ Madam,  I furnish the following particular to admit my son/ daughter into your school / college					
Name of the pupil in     (In Block Letters)	full	_ L_ L_ L_ L_ L_ (Father's Name)	_		
2. Sex Male  Date of birth in words	<del></del>	e of birth in figures			
3. Place of Birth					
4.Father's Name L  Mother's Name L  5.Father's Qualification		her's Qualification			
6.Father's occupation in Mother's occupation	n detail	arents Annual Income			
7.Parents/Guardians ad	dress				
8.Nationality  _  _	_  _  _ Religion		_		
9.For Scheduled Caste/Scheduled Tribes ( Sub Caste)					
10.Mother tongue		No of cistors			
11.No of brothers	_	No of sisters			

12.whether they are studying in this school. If so name & std.

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13. Documents Submitted 1) Marks Card					
2) Date of birth certificate                   T.C.					
3) Conduct Certificate					
14. Details of the school last attended					
Reg. No	Name of the school last attended	Std. Last attended	Date of leaving	Reason	

Signature of the Student

## **Parents Declaration**

I hereby declare that i shall provide my Son/Daughter with all that is required and co-operate with the teachers. I shall pay School / College fees and dues regularly. I assure you that i shall abide by the rules laid down by the institution, so that my Son / Daughter takes advantage of every opportunity to develop his/her total personality. I also declare if my Son / Daughter does not abide by the rules and regulations laid down by the management, the management has the right to suspend or dismiss my Son / Daughter from the school / college. Once the fee are paid it shall not be refunded or adjusted.

Place: Malur Date: LL-LL-LL	Signature of Parents / Guardians
Admitted to GNM / B.Sc (N)	Date of admission
Admission No	Fees Receipt No
T.C. No Date of issue	Initial of Clerk
Secretary	Signature of Principal