

Form No.: \_\_\_\_\_ / KHFHCON/Basic BSc. Nsg. ANAT %.: \_\_\_\_\_

# College of Nursing

**KURJI HOLY FAMILY HOSPITAL, SADAQUAT ASHRAM P.O**

PATNA – 800010, BIHAR, PHONE: 0612 – 2274727

E-mail [kfhcollegeofnursing@gmail.com](mailto:kfhcollegeofnursing@gmail.com)

Website:- [www.collegeofnursingkfhpatna.org](http://www.collegeofnursingkfhpatna.org)

*(Affiliated to Aryabhata Knowledge University, Patna, Bihar)*

## **APPLICATION FOR ADMISSION TO BASIC B.Sc. (N)**

A recent  
passport size  
photo of  
applicant to be  
affixed here

- Note:** 1) To be filed in applicant's own Handwriting. (In English)  
2) Read the prospectus before filling the form  
3) Not to be sold or Photocopied

1. **Name** (as on Secondary Edu. Cert.):.....
2. **Date of Birth** (as per Sec. Edu. Cert.).....
3. **Age:** ..... **Yrs. On:** .....
4. **Gender:**..... 5. **Marital Status:** .....
6. **Height:** ..... 7. **Weight:** .....
7. **Nationality:**..... 8. **Applicant's Mobile no.**.....
9. **Religion:** .....
10. **Category(SC / ST/OBC/Minority/Gen) :** .....
11. **Language (speak/Write) :** .....
12. **Aadhar No.:** .....
13. **Father's Name:**..... 14. **Mother's Name:** .....
15. **Father's Occupation** ..... **Mobile No.** .....
16. **Mother's Occupation** ..... **Mobile No.** .....
17. **Guardian's Name ( if father is not the guardian) :** .....
18. **Income of the Father / Mother/ Guardian**.....
19. **Telephone No. (i) Home**..... **(ii) Parent's Mobile No.:** .....
- (iii) Personal Mobile No. :** .....
20. **Address of Father/ Mother/Guardian:-**
  - **Present Address:** .....
  - ..... **Mobile No**
  - **Permanent Address:** .....
  - ..... **Mobile No.**

21. **Name of the Local Guardian**, who could be contacted in case of emergency: .....

22. **Relationship:** ..... 23. **L. Guardian's Occupation:** .....

24. **Address of Local Guardian:** .....

..... **Mobile No:**.....

25. **If you are a religious sister – your religious name** .....

**Date of making Religious Profession**.....

**Name & Address of the Religious Order** .....

**Ph. No.of Provincial Superior:** .....

**25. Educational Qualifications:**

	Board/University	Year of Passing	Subjects	Maximum Marks	Obtained Marks	Percentage (%)
<b>12<sup>th</sup> Class / Equivalent</b>			Physics			
			Chemistry			
			Biology			
			English			
			Total			
<b>10<sup>th</sup> Class</b>			Total			

26. **Address of School/College where studied** .....

.....

27. **Tick mark your ability in extracurricular activities if any (attach photocopies):**  
 Elocution/Sports/ Dance/ Music/ NCC etc.....

**28. Details of Relatives working in Kurji Holy Family Hospital if any:**

Name	Relationship	Department

**29. List of Family Members: Photos to be submitted (stamp size)**

i) 

Affix stamp size photo of father
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 Father's Name: ..... Age: .....

Occupation: ..... Ph.No.....

Address : .....

.....

ii) 

Affix stamp size photo of mother
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 Mother's Name: ..... Age: .....

Occupation: ..... Ph.No.....

Address : .....

iii) Affix stamp size  
photo of  
sister/brother Name: .....Age: .....  
Occupation: ..... Ph.No.....  
Address : .....

iv) Affix stamp size  
photo of  
sister/brother Name: .....Age: .....  
Occupation: ..... Ph.No.....  
Address : .....

**30) List of Visitors, authorized by the father /guardian**

i) Affix stamp size  
photo Name: .....Age: .....  
Occupation: ..... Ph.No.....  
Address : .....

ii) Affix stamp size  
photo Name: .....Age: .....  
Occupation: ..... Ph.No.....  
Address : .....

**31) Relatives in Patna or nearby places, where the applicant may be allowed to go with Late or overnight Pass on guardian's risk and responsibilities:-**

i) Affix stamp size  
photo Name: .....Age: .....  
Relationship: ..... Ph.No.....  
Address : .....

**LIST OF ENCLOSURES FOR BASIC BSc. NSG. (Please make a tick mark against statement)**

**Photocopies of the following documents:-**

- |  |   |
|--|---|
| <input type="checkbox"/> Birth Certificate   | <input type="checkbox"/> Migration Certificate            |
| <input type="checkbox"/> School leaving Certificate or T.C.  | <input type="checkbox"/> Secondary Exam Marksheet         |
| <input type="checkbox"/> Character Certificate   | <input type="checkbox"/> Secondary Exam Board Certificate |
| <input type="checkbox"/> For the sponsored candidate, a letter from the authorized person with the specific direction regarding payment.   |   |
| <input type="checkbox"/> +2 or its equivalent Examination Mark sheet   |   |
| <input type="checkbox"/> +2 or its equivalent Exam board Certificate   |   |
| <input type="checkbox"/> Caste Certificate   |   |
| <input type="checkbox"/> Demand Draft of Rs. 500/- in favour of <b>KHFHS College of Nursing</b> payable at HDFC Bank Ltd., Patliputra, Code No.HDFC0002643, Patna. (In case the application form is taken from website.) |   |

