



ಕೆ.ಎಲ್.ಇ. ಸಂಸ್ಥೆಯ ಶುಶ್ರೂಷಾ ವಿಜ್ಞಾನ ಮಹಾವಿದ್ಯಾಲಯ

ವಿದ್ಯಾನಗರ, ಹುಬ್ಬಳ್ಳಿ-580031.



KLE SOCIETY'S INSTITUTE OF NURSING SCIENCES

VIDYANAGAR, HUBBALLI - 580031

Off : 0836 -2375506

Email : klesinshbl@gmail.com

Website : www.klesnursing.com

ADMISSION APPLICATION FORM~ POST BASIC B.Sc. NURSING

Year of Admission	2026 - 27			Affix passport size colour photograph
Name of the Student (as in SSLC/10 th Std)				
State belongs to (State in which you passed G.N.M.)				
Marks obtained at 12 th / PUC or its equivalent exam	Maximum Marks	600		
	Marks Obtained			
	Percentage			
Marks obtained in G.N.M. > Exam Reg.No: _____ Passed Year: _____ College: _____ _____	Year	Maximum Marks	Marks obtained	
	1 st Year GNM			
	2 nd Year GNM			
	3 rd Year GNM			
	Internship Marks			
	Total			
	Percentage			

To,
The Principal,
KLES Institute of Nursing Sciences,
Vidyanagar, Hubballi.

Sir,

I the undersigned wish to seek admission to 1st year P.B. B.Sc Nursing Course in your institution. I am giving below the following particulars and undertake that, if admitted I agree to be bound by the rules & regulations in force as well as those that may be framed in future by the institution. I have attached all the original documents and attested copies of all necessary documents with this admission form.

1	Name of candidate (In Block letters as per SSLC Marks card)	Mr/Ms.		
2	Name of Father			Occupation :
3	Name of Mother			Occupation :
4	Parents Permanent Address			
	Pin Code :			Email ID :
	Mob No. :			
5	Local Guardian Address (if Any)			
	:	Pin Code :	Mob No.	
6	Contact details of Candidate	Mob No.:	Email ID:	
7	Details of Birth	Gender :	Date (DD/MM/YYYY) :	
		Place:	Age as on today:	
8	Nationality			
9	Details of Religion	Religion :	Caste :	
		Sub Caste :	Category:	
10	Aadhaar Number			11 Blood Group :
12	Marital Status	Married / Unmarried / Others:		
13	Annual Family Income			

ACADEMIC INFORMATION

Examination Passed	Name of the School / College	Name of University/Board	Exam Reg. Number	Month & Year of Passing	Maximum Marks	Marks Obtained	%
SSLC / SSC Xth Std.							
II PUC / XII Std							
G.N.M. [All three years + Internship]							
NUID Reg. No:							

Checklist of Documents to be enclosed:

The following documents to be attached with the application form :			for College Official use only
1	S.S.L.C / X th Standard Marks Cards	(Original +1 attested copy)	
2	II nd PUC / XII th Standard Marks Cards	(Original +1 attested copy)	
3	G.N.M. Marks Cards (4 Nos)	(Original +1 attested copy)	
4	Course Completion & GNM Certificates	(Original +1 attested copy)	
5	K.N.C. Registration Certificate	(Original +1 attested copy)	
6	Transfer Certificate from previous Institution	(Original +1 attested copy)	
7	Character Certificates from the previous institution	(Original +1 attested copy)	
8	Migration Certificate (Non Karnataka candidate only)	(Original +1 attested copy)	
9	Eligibility Certificate (Non Karnataka candidate only)	(Original +1 attested copy)	
10	Caste Certificate	(2 attested copy)	
11	Aadhar Card	(2 attested copy)	
12	Pass port size Colour Photos	04 numbers	

Note: The Candidate, who has passed the qualifying exam (GNM) from a Board/University situated outside Karnataka State, must obtain Eligibility Certificate (E.C.) from Rajiv Gandhi University of Health Sciences, Bangalore by applying online & payment of prescribed fees. Student should submit the Eligibility Certificate before taking admission to 1st year P.B.B.Sc. Nursing Course.

I declare that the above information is true and correct and documents produced are genuine one.

Place:

Signature of the Candidate

Date:

Name:.....

FOR OFFICE USE ONLY

Mr./Miss..... is admitted to 1st year P.B. B.Sc. (N) course for the year has paid Admission Fees as below

Rs..... vide Receipt No.: Dated:

Rs..... vide Receipt No.: Dated:

Course Clerk:

Documents verified By:

Accountant:

Office Superintendent:

PRINCIPAL
KLES' Institute of Nursing Sciences,
Vidyanagar, Hubballi

DECLARATION BY THE CANDIDATE & PARENT / GUARDIAN

1. I am fully aware that my admission to P.B.B.Sc. Nursing course is purely provisional and subject to approval by RGUHS.
2. If admitted, I hereby agree to adhere, to the rules and regulations in force at present or that may be framed hereafter for the governance of the institution, its Management & Hostel. I undertake that as long as I am a student of this institute, I do nothing either inside or outside the Institution, that will interfere with the orderly governance and discipline.
3. I hereby agree to make good any loss or damage to books, apparatus, furniture, and other belongings to institution and its attached Hostel etc., which may be caused by my carelessness, negligence or wontonness on my part.
4. I hereby solemnly affirm that statements made and information furnished in my application form and also all the enclosures submitted by me are TRUE. However, if any of the information is found to be UN-TRUE in material particulars, I realize that I am liable for criminal prosecution and I also agree to forgo my seat in the Institution.
5. I hereby assure that I will not indulge or resort myself in any form of anti-social and prohibitive activities such as Ragging or any kind of harassment of physical or otherwise. I am fully aware of the provisions of Indian Penal Code relating to offences connected with hurt, endangerment of life or personal safety, wrongful confinement, assault, criminal intimidation and so on, and if I am found indulging myself in such prohibitive and antisocial activities. I am liable for severe punishment including removal from the institution and handing over to the police.
6. I hereby declare that I hold myself responsible for the timely payment of dues to the Institution during my studies period, till all my accounts dues are cleared.
7. I am aware that fees once paid will not be refunded under any circumstances.
8. I am fully aware that I have to fulfill 80% of attendance in theory and practical to be eligible for University/Board examinations failing which, I myself will be held responsible for the consequences arising out of it.
9. I am fully aware that, in-case I want to discontinue before expiry / completion of the course, or want to seek transfer to any other college, I shall have to pay full fees (non refundable) then prescribed for all the remaining years i.e., for the entire course.
10. I hereby accept and agree that, all students & officials of the Institute are Indians in broad view. I will not indulge in & observe any kind of religious/traditional/any other customaries that are prohibited by Law, and that will hurt & affect the Grace, Unity, Integrity & Social Environment of the Institution & National well being.
11. I/We hereby declare that, I abide by the above mentioned rules. I/We also declare that, have carefully gone through the instructions for candidates, herein mentioned and agree for the same.

Signature of the Parent / Guardian

Name :

Date :

Signature of the Candidate

Name :

Date :

Principal
KLES Institute of Nursing Sciences, Hubballi