



**BANARAS HINDU UNIVERSITY
INSTITUTE OF MEDICAL SCIENCES
VARANASI - 221005**

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| Roll No. |
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APPLICATION FORM FOR APPEARING IN B.SC. NURSING ENTRANCE TEST - 2009

Last date to reach the completed form to the Director, Institute of Medical Sciences, BHU : 30th MAY 2009

THIS FORM CONTAINS FOUR PAGES TO BE FILLED BY THE CANDIDATE

Candidates are advised to read the form and Information & Instruction Booklet carefully before filling up the application form

(For Office Use Only)

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|--------------------------|--|
| Date of Receipt: | |
| Diary No. / Receipt No.: | |

Provisionally allowed/Not allowed

Reasons:

(To be filled in by the candidate in her own handwriting)

Tick (✓) the appropriate box

1. Details of Demand draft Enclosed

Rs 500/- for General / OBC Category Rs. 400/- for SC/ST Category
 DD No..... Date..... Amount.....
 Bank Name Issuing Branch Payable at.....

2. Course applied for : B.SC. NURSING (4 YEARS)

3. Name of the candidate
 (in block letters)

4. Father's Name :

5. Mother's Name :

6. Date of birth : **7. Age as on 31.12.09.**

8. State to which belongs:

9. Religion & Caste :

10. Category : i) SC* ii) ST* iii) OBC* iv) General

11. Address for Correspondence:

..... Tel. No. with STD Code

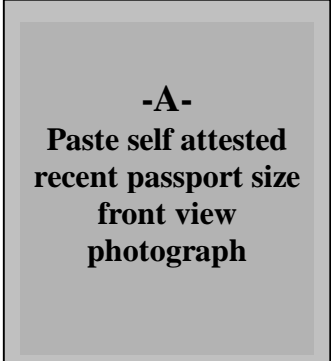
12. Permanent address:

..... Tel. No. with STD Code

13. Marital Status : Married Unmarried Divorcee** Widow**

14. Any close relation is appearing in the test : Yes No

(If Yes, then give name and relationship)



* SC/ST/OBC Candidates must attach attested copy of Caste Certificate in support

**Candidates must attach affidavit on Notarised Non-Judicial Stamp of 10/- regarding no children liability.

15. Details of the Examinations passed:

| Name of the examination | University/ Board | Year | Subjects | Marks obtained / Maximum marks | % of Marks |
|----------------------------|----------------------|------|----------|-----------------------------------|---------------|
| High School or equivalent | | | | | |
| I.Sc. / 10+2 or equivalent | | | | | |
| Any Other, Specify | | | | | |
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| | | | | | |
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(Total Percentage of marks in Physics, Chemistry, Biology & English in qualifying examination _____)

16. Choice of Language of Question Paper in the Test : English Hindi

17. Name and Full Address of the College last attended:

DECLARATION BY THE CANDIDATE

1. I have read the Information and Instruction Booklet carefully.
2. I am an Indian Citizen and have not taken part in any activity subversive to law.
3. The Application Form has been duly filled and signed by me in my own handwriting. All the information furnished herein is true and complete and nothing has been concealed or distorted. If any time it is found that the entries made in my Application Form are incorrect or any of the information has been concealed or distorted, my admission to B.Sc. Nursing Course at the College of Nursing, IMS, Banaras Hindu University, shall be liable to be summarily cancelled without any notice whatsoever by the Head of the Institution.
4. I shall abide by the decision of the Head of the Institution in all matters of admission, discipline, examination, residence, attendance in the classes and shall abide by the Rules & Regulations of the College of Nursing and Banaras Hindu University.
5. I shall reside in the Student Nurses Hostel without any member of my family for the entire period of my training and shall abide by the Rules and Regulations of the Student Nurses Hostel for the entire period of my training.
6. I promise to submit/show original copies of all my Educational Qualification Certificates, Mark Sheets as well as other relevant Certificates at the time of my admission to the Admission Committee. In the event of failure to do so, my admission to College of Nursing, IMS, BHU shall stand cancelled.
7. I understand that if I fail to submit relevant documents / fulfill the essential criteria for admission, my candidature shall stand cancelled forthwith even if I have secured success in the merit list of entrance test results.

Date :

Place:

Signature of the Candidate
(In running handwriting)

UNDERTAKING BY THE FATHER / GUARDIAN

In the event of my Daughter / Ward being admitted to B.Sc. Nursing Course, I hereby give an undertaking that I shall be responsible for the behavior and conduct of my Daughter / Ward during the entire course of her studies and shall make payments for any dues to the University.

I also give an undertaking that in all matters of admission, discipline, examination, residence, attendance in class and other related matters of my Daughter / Ward shall abide by the decision of the Head of the Institution.

Date :

Place:

Signature of the Father / Guardian

Name in Full & Relation with the Candidate



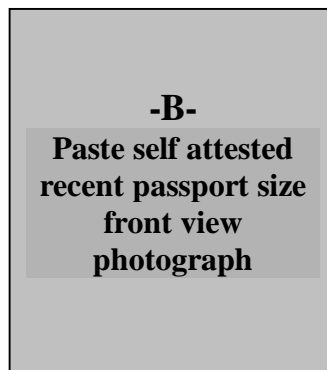
**BANARAS HINDU UNIVERSITY
INSTITUTE OF MEDICAL SCIENCES
VARANASI – 221005
B.SC. NURSING ENTRANCE TEST - 2009
PROVISIONAL ADMIT CARD**

| |
|-----------------|
| Roll No. |
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Examination Centre
(To be filled by the office)

(To be filled by the candidate in her own handwriting)

Admit Provisionally Ms.
(in BLOCK LETTERS)
Daughter of Sri
Address:
.....
.....



to the B.Sc. Nursing Entrance Test -2009 to be held on 12th July 2009 between 10.00 AM to 12.00 Noon

Specimen signature of the Candidate
(In running handwriting)



Right Thumb impression of the candidate

Authorized Signatory
(for Office Use)

INSTRUCTIONS FOR CANDIDATE

1. Candidate must bring Admit Card with her to secure admission to the examination room.
2. Mark your answers on the "Answer Sheet" by blackening the circles using **BALL POINT PEN WITH BLACK INK**. (Read the instructions given in the Information & Instruction Booklet supplied with the form carefully).
3. PLEASE BRING YOUR OWN WRITING MATERIAL ONLY.
4. ENVELOPE OF ADMIT CARD / ANY OTHER PAPER / ANY RESOURCE MATERIAL/CALCULATORS/SLIDE RULE/MOBILE PHONE/ PAGERS ARE NOT ALLOWED.
5. The examination rooms will be opened half an hour before the commencement of the examination.
6. No candidate will be admitted to the examination room after **Fifteen minutes** of start of the examination.
7. No candidate will be allowed to leave the examination room till the examination is over.
8. Candidate should not leave the examination room without handing over her question booklet and answer sheet to the Invigilator.
9. Candidates will be required to sign her attendance and thumb impression at designated place in the presence of the invigilator when directed to do so by the Invigilators.
10. Candidates who fail to observe these regulations may be disqualified and debarred from appearing in the entrance test and any subsequent examination held by the University.

THE ADMIT CARD IS BEING ISSUED PROVISIONALLY SUBJECT TO THE SCRUTINY OF THE ELIGIBILITY. IT IS ONLY AFTER VERIFICATION OF THE ELIGIBILITY THAT THE CANDIDATE WOULD BE CONSIDERED FOR ADMISSION. MERELY APPEARING OR QUALIFYING IN THE TEST DOES NOT ENTITLE A CANDIDATE FOR SELECTION/ADMISSION

PRESERVE YOUR PROVISIONAL ADMIT CARD WHICH HAS TO BE PRODUCED BEFORE ADMISSION COMMITTEE IN CASE OF YOUR SELECTION.



BANARAS HINDU UNIVERSITY
INSTITUTE OF MEDICAL SCIENCES
VARANASI – 221005
B.S.C. NURSING ENTRANCE TEST - 2009
REGISTRATION CARD

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|-----------------|
| Roll No. |
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Examination Center
 (To be filled in by the Office)

(To be filled in by the candidate in her own handwriting)

1. Full Name:

2. Father's name:

3. Date of birth:

4. Address:

.....

| |
|---|
| <p>-C-</p> <p>Paste self attested recent passport size front view photograph</p> |
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5. Specimen signature of the Candidate at the time of applying

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|--|
| Signature of the Candidate (In running handwriting) |
| Candidate's Right Thumb impression |
| Signature & Seal of the Gazetted Officer attesting Signature and Thumb Impression |

6. TO BE USED IN THE EXAMINATION HALL
 IN PRESENCE OF INVIGILATOR

Not to be filled at the time of applying

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|---|
| Signature of the Candidate (In running handwriting) |
| Candidate's Right Thumb impression |
| Name and Signature of the Invigilator Verifying the Signature and Photograph |