FORM No._____

TRIPURA COLLEGE OF NURSING

A unit of the
Society for Tripura Medical College & Dr. BRAM Teaching Hospital,
(Registered under Societies Registration Act, 1860)
Hapania, Agartala-799 014

APPLICATION FORM FOR ADMISSION TO B.Sc. (Nursing), 2014-15

1. Name of the candidate   :
    (IN CAPITAL LETTER)

2. Father's Name   :

3. Mother's Name   :

4. Address   :……………………………………….

……………………………………………..

…………………………………………..

…………………………Pin………………

Contact No:……………………………...

Affix passport size Photograph (taken in the month of May/June 2014) of the candidate attested by the Head of the last Institute attended/ Gazetted Officer

5. Date of Birth   : _____/_____/19_____   **6.** Category   : ST /SC / GENERAL
(as per Madhyamik Certificate)

7. Nationality   :…………………… **8.** Religion:……………….   **9.** Sex   : Male / Female

10. Educational qualification (Madhyamik/10th standard) :

Name of the Examination	Year of Passing	Board/University	Division	Percentage of Marks

11. Details of Qualifying H.S. (10+2) Examination / Equivalent Examination Passed or likely to be passed.

Name of the examination passed / appeared	Name of Board/ University	Name and Address of the School/College from where passed/appeared	Year of passing/ appeared	% of marks in Physics, Chemistry, Biology & English together (if mark-sheet is available)

DECLARATION

      I, do hereby solemnly and sincerely affirm that the information furnished above is true and correct. I have not concealed any information. If any information furnished herein fraudulent, incorrect or untrue, I shall be liable to criminal prosecution along with the cancellation of the selection and admission to the course forfeiting the fees deposited. I agree to abide by the Rules and Regulations governing the Institution. .

Place:
Date   ………………………….
                                              Signature of the Candidate

……………………………………
Signature of the Parents/Guardians

Attested by the Head of the Institute last attended / Gazetted Officer

      This is to attest that the particulars given in this Application Form including Name, Photograph, Address, Category, Date of Birth and the marks obtained statement, signature are true to the best of my knowledge.

Place:-
Date:-   Signature of the Head of the Institution/Gazetted Officer
                                     (Full Name with seal)

Enclosed the self attested photo copies of :-

i.   Proof of Indian Nationality / Permanent Resident Certificate.

ii.   Pass certificate of Madhyamik/SSLC as proof of age.

iii.   Mark-sheet of Higher Secondary (10+2) or any equivalent examination from the recognized Board or the Admit card of the H.S. (10+2) examination pending declaration of the result.

iv.   ST/SC category certificate from the Competent Authority (where applicable).

v.   BPL Card copies (where applicable).

vi.   1(one) copy of Passport size photograph (taken in the month of May/June 2014) to be affixed on Application Form.

vii.   1(one) copy of recent Passport size photograph (taken in the month of May/June 2014) to be affixed on Admit Card.

viii.   2(two) copy of passport size photographs (taken in the month of May/June 2014) as extra.

ix.   Nationalized Bank Draft for amount of Rs.1,500/- (Rupees one thousand five hundred)only in favour of the Society for Tripura Medical College & Dr. BRAM Teaching Hospital, payable at Agartala (in case of downloaded Application Form only).

Checked & ticked ' √ ' the enclosed documents.

Place:-

Date :-

…………………………..

Signature of the Candidate

TRIPURA COLLEGE OF NURSING

A unit of the
Society for Tripura Medical College & Dr. BRAM Teaching Hospital
(Registered under Societies Registration Act,1860)
Hapania, Agartala-799 014

ENTRANCE TEST FOR ADMISSION TO B.Sc. (NURSING)-2014
ADMIT CARD

Candidate's Name: _____

Father's Name: _____

Address: _____

_____

_____

State: _____

Pin Code | | | | | | |

Roll No: _____

Examination (Entrance Test)

Date	Time	Centre
	2-00 PM To 3-30 PM	Tripura Medical College & Dr. BRAM Teaching Hospital, Hapania, Agartala, West Tripura, PIN : 799 014

Affix pass port size photo of the candidate (taken in the month of May/June 2014) attested by Head of the institution last attended/Gazetted Officer

Question Paper Language

English

Signature of the Principal
Tripura College of Nursing
(with seal)

Signature of the Candidate

DIRECTIONS FOR CANDIDATES

1. *Candidate shall be present at the Examination Centre 30 minutes before the commencement of the Examination with the Issued Admit Card.*
2. *No candidate shall be admitted to the Examination Hall after the commencement of the Examination.*
3. *No candidates shall be allowed to leave the Examination Hall before the conclusion of the Test and without handing over the Answer Sheet to the Invigilator concerned.*
4. *Candidates should check and ensure that the Test Booklet contains as many numbers of pages as are written on the top of the cover page.*
5. *The candidates shall not remove any page(s) from the Test Booklet and if any page(s) is/are found missing from his/her Test Booklet, he/she will be prosecuted against and shall be liable for criminal action.*
6. *Candidates should bring good quality black ball-point pens for the Examination and write particulars on the cover page of Test Booklet / Answer Sheet etc.*
7. *Calculators, Log tables, Calculating devices, Mobile Phone & Other Communication Devices, Slide Rules, Geometry Box and Textual materials, etc. are not allowed in the Examination Hall.*
8. *The Admit Card is issued provisionally to the candidate subject to his/her satisfying the eligibility conditions.*