

13. I will be appearing for the following Subjects:-

Sr. No	Subject Name	Attendance %		Internal Assessment (Out of 25)	Class coordinator Name	Class coordinator Signature
		Theory (minimum 80%)	Practical (100 %)			
1	Nursing Education					
2	Advance Nursing Practice					
3	Nursing Research and Statistics					
4 A	Child Health Nursing					
4 B	Mental Health Nursing					
4 C	Obstetrics and Gynecology					
4 D	Community Health Nursing					
4 E	Medical and Surgical Nursing					

14. DECLARATION BY THE CANDIDATE

- 1) I am aware that, I have to fulfil criteria of attendance and Internal Assessment prescribed by the University/ NCI, failing which I shall be held "NOT ELIGIBLE" and will not be allowed to appear for Examination.
- 2) I hereby declare that I have gone through the syllabus as prescribed and adopted by the University and relevant rules of the Heads of Passing which are applicable for the examination for which I am appearing and I accept the same without any challenge (wherever applicable).
- 3) I shall be responsible if my application form is rejected for any errors, wrong or incomplete entries made by me in the examination form.
- 4) I am not admitted to the course after the cut-off date declared by the University for grant of terms
- 5) I fulfil all the criteria for the admission in the course as defined by the NCI/ University and I am not defying the criteria of the admission order.

Place:

Date:

Signature of Candidate in running hand**15. FOR THE USE OF INSTITUTION OFFICE**

Fulfils attendance criteria	YES	NO	Fulfils Internal Assessment criteria	YES	NO
Attachments					
Fee Receipt No.	YES	NO	Migration certificate Original (if not submitted with enrolment form)	YES	NO
Self attested Nursing Council registration certificate of B.Sc. /Post Basic B.Sc Nursing	YES	NO			
Signature of verifying officer					

16. CERTIFICATE BY THE HEAD OF INSTITUTION

I certify:

1. That Shri/Smt/Kum. is a bonafide student of this college, admitted to the M.Sc. Nursing course in the Admission Session 2015-16. He/she is not admitted to the course after the cut-off date for grant of terms.
2. * That his/her attendance is not less than as prescribed by the Nursing Council of India norms in lecture teaching and practical work up to submission of this application. **OR**
* I find him/her eligible under provisions of MPMSU ordinance 6/14 section 5.1
***(Cancel whichever is not applicable)**
3. That the candidate has completed the academic terms and appeared in mandatory number of internal assessment tests as per the INC rules and has scored internal assessment marks required to appear in this examination (wherever applicable).
4. **That the information furnished by the said candidate is verified from his/her documents and that the candidate is Eligible to appear for University Examination.**

Place:

Date:

Signature & Seal of the Dean/Principal


MADHYA PRADESH MEDICAL SCIENCE UNIVERSITY, JABALPUR (M.P.)
EXAM ATTENDANCE SHEET FOR M.Sc. NURSING (To be filled by Candidate)

CANDIDATES NAME																			
FIRST NAME																			
MIDDLE NAME																			
SURNAME																			
FATHERS NAME																			

COLLEGE NAME																			

3.
Left Hand Thumb Impression of the Candidate

4.
Signature of the Candidate in running hand, within the box only

5.
Paste (do not staple) recent Photograph (Size 35mm× 45mm) duly attested by the Dean/Principal/Head of the Institution.

(FOR THE UNIVERSITY USE ONLY)

ENROLLMENT NUMBER	
ROLL NO	
EXAM CENTER	
EXAM CENTER CODE	

TO BE FILLED IN EXAM HALL

Sr. No	SUBJECT/PAPER	DATE	CANDIDATE SIGNATURE	INVIGILATOR SIGNATURE
1	Nursing Education			
2	Advance Nursing Practice			
3	Nursing Research and Statistics			
4	Child Health Nursing			
5	Mental Health Nursing			
6	Obstetrics and Gynecology			
7	Community Health Nursing			
8	Medical and Surgical Nursing			

SIGNATURE OF CENTER SUPRINTENDENT
SEAL OF THE CENTER

**EXAMINATION FEE RECIEPT
(COLLEGE COPY)
Examination of First year B.Sc. Nursing**

No.....

Date:

NAME OF THE CANDIDATE:.....

COLLEGE NAME AND CODE:.....

TOTAL AMOUNT OF FEE DEPOSITED ` _____ ` _____

SIGNATURE OF CANDIDATE

SIGNATURE AND SEAL OF COLLGE AUTHORITY

**EXAMINATION FEE RECIEPT
(UNIVERSITY COPY)
Examination of First year B.Sc. Nursing**

No.....

Date:

NAME OF THE CANDIDATE:.....

COLLEGE NAME AND CODE:.....

TOTAL AMOUNT OF FEE DEPOSITED ` _____ ` _____

SIGNATURE OF CANDIDATE

SIGNATURE AND SEAL OF COLLGE AUTHORITY

**EXAMINATION FEE RECIEPT
(CANDIDATE COPY)
Examination of First year B.Sc. Nursing**

No.....

Date:

NAME OF THE CANDIDATE:.....

COLLEGE NAME AND CODE:.....

TOTAL AMOUNT OF FEE DEPOSITED ` _____ ` _____

SIGNATURE OF CANDIDATE

SIGNATURE AND SEAL OF COLLGE AUTHORITY

ANNEXURE – 2

EXAMINATION FEES (REFER MPMSU Ordinance 04/2014 table 16)

S No.	M.Sc. Nursing First year	
1	Examination fee	7000/-
2	Form fee	100/-
3	Total fee if form received on or before 29th October, 2016	7100/-
4	Total fee if form received on or before 5th November 2016	+400/- 7500/-

Dear Student,

You have downloaded the Examination application form for appearing in the first year **B.Sc. Nursing** Examination of 2016.

The Last due date of submission of this form to the University by your college is 29th October, 2016 without late fee and 5th November 2016 with Late fee. Since your form is to be forwarded and submitted by your college, they will decide the last date of submission of form to them.

Carefully follow the steps given below to apply.

- Your application form has 4 pages. Have a print out of all the pages on a separate sheet of A4 size paper.
- Have a print out of fee receipt form (annexure 1).
- Collect the following information from your college office:
 - Your theory and practical class attendance in the subjects for examination,
 - Your theory and practical internal assessment marks in the subjects for examination.
- Have the following documents ready with you for attaching to the application form:
 - A self attested photocopy of your 10+2 board examination mark sheet,
 - Migration certificate from the board/ university last attended in original (if not submitted with enrolment form)**
 - Your recent 35 mm (W) X 45 mm (L) *colored* photograph in a light colored dress.
- Having satisfied yourself that you fulfill all eligibility criteria to appear in the examination deposit your exam fees (ANNEXURE 2) in the college office and get receipt in the fee receipt form.
- How to fill the Examination form: **(use black ball point pen only. Use capital letters to enter characters)**.

On page one in the boxes provided-

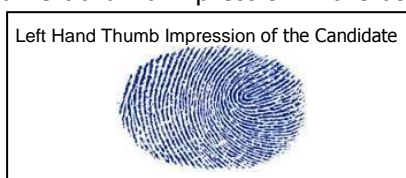
(1) Fill in your first name, second name and surname in the boxes

FIRST NAME	S	A	N	D	H	Y	A			
MIDDLE NAME	S	U	R	A	J					
SURNAME	R	A	T	H	I					

(2) Fill in your father's first name and Middle name and surname in the boxes, don't write Surname

(3) Fill in your college/institutes full name with district name

(4) Put your left thumb impression in the box provided



(5) Put your signature in the box provided

Signature of the Candidate in running hand, within the box only
<i>Signature</i>

(6) Paste the photograph (see no. 4 (c) above) in the box. Photo must be attested by the dean/ principal of the institute.



(7) Enter your date of birth in dd-mm-yyyy format, i.e., if you are born on 15th Aug. 1996

7. Date of Birth

Date		Month		Year			
1	5	0	8	1	9	9	6

(8) Put a right mark against your gender, i.e., if you are a girl mark as:

8. Gender

Male	<input type="checkbox"/>	Female	<input checked="" type="checkbox"/>
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(9 to 12) Make the entries as required

On Page 2:

(13) Fill in the required data and have it verified from respective Class coordinator

(14) Put Place, Date and your signatures. Attach the following to the application form:

Attachments
Fee Receipt University copy No.
Class XII Mark sheet Copy
Migration certificate Original (if not submitted with enrolment form)

(15) Submit to the college office for forwarding to the university well with in time.

On Page 3:

Fill the required details. Don't write anything in the areas marked as **"for University use only"**

On Page 4:

Fill the required details. Don't write anything in the areas marked as **"for University use only"**

VERY IMPORTANT INSTRUCTIONS TO THE COLLEGES/INSTITUTES

1. Submit properly filled application form of all the eligible students on or before 29th October, 2016 without late fee and 5th November 2016 with late fee.
2. Collect exam fee of all the students of one course and make a single draft in the favor of “Registrar, M.P. Medical Science University, Jabalpur” payable at Jabalpur (separate draft of students of B.Sc. Nursing and separate draft for M.Sc. Nursing course)
3. If at any point of time it is found that the college/ institute has submitted or forwarded a form of student who is not illegible to appear in the exam or whose admission process is not as per rules prescribed by INC/ University, very strict action including legal action and disaffiliation of the college/ institute will be taken by the University
4. **Scan first two pages of the form, save in “JPG format- image size should be less than 300 kb” with the name of the student and submit the CD/DVD along with form. Write the name of the institute on the CD/DVD with the help of permanent marker pen (forms will not be accepted without scanned document in a CD/DVD)**